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MAR 29 1985

Mercy Hospital
ATTN: Sister Mary Juliana Gust
Chief Executive Officer
400 Hobart Street
Cadillac, MI 49601

RE: Your Application Dated August 1, 1984 For Renewal Of License Number 21-10717-01

Dear Sister:

In order to complete our review and issue your license amendment, you will need to submit additional information on and/or clarification of the following items:

MAILING ADDRESS

Your expired License Number 21-10717-01 states in Item Number 2 that your hospital mailing address is Oak Street, Cadillac, MI 49601. However, your application for renewal dated August 1, 1984 states in Item 1.a. that your hospital mailing address is: 400 Hobart Street, Cadillac, MI 49601. Please clarify.

RADIOACTIVE MATERIAL POSSESSION LIMITS

Please specify the maximum possession limit you desire for radioactive material listed in 10 CFR 35.100, Schedule A, Group III.

CALIBRATION OF INSTRUMENTS

You have indicated that your survey meters will be calibrated by the manufacturer or an outside firm, specifically Test Equipment Distributors of Detroit, Michigan, NRC License Number 21-18220-01. However, upon reviewing our files it was learned that NRC License Number 21-18220-01 has been terminated since 1980. Please submit the name of an alternate firm for survey meter calibration service. You should contact the firm to determine if procedures for operating a commercial calibration service have been filed with the NRC and if their license is active.

PROCEDURES FOR SAFELY OPENING PACKAGES CONTAINING RADIOACTIVE MATERIAL

You have indicated the the wipe of the external surface of the final source container will be checked with a thin-end-window GM survey meter. If access to an instrument (e.g., solid scintillation counter) sufficiently sensitive to detect 200 dpm/100 cm² is limited, you may assay your area wipe samples with your GM survey meter provided you submit the following information:

- a. State the sensitivity of the instrument in cpm or mR/hr.
- b. State the efficiency of the instrument for common medical isotopes.

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- c. Confirm that the wipes will be counted in a low background area.
- d. Confirm that the beta shield (if present) will be removed from the probe before counting the wipes.
- e. Describe the optimum counting geometry for the particular instrument and confirm that you will adhere to it.
- f. State the instrument response time and the equilibration time that you will allow for counting each wipe.
- g. Confirm that your action level will be any instrument response greater than background.

We will continue our review of your application upon receipt of this information. Please reply in duplicate, within 30 days, and refer to Control Number 77282.

If you have any questions or require clarification on any of the information stated above, you may contact us at (312) 790-5625.

Sincerely,

Original Signed By
J.R. Madera
Materials Licensing Section

RIII

Madera/cm
03/11/85