



UNITED STATES
NUCLEAR REGULATORY COMMISSION
WASHINGTON, D.C. 20555-0001

MATERIALS LICENSE

DIGENE DIAGNOSTICS, INC.
2301-B Broadbirch Drive
Silver Spring, MD 20904

License No. 19-23789-01E
Docket No. 030-32142
Amendment No. 02

In accordance with letter dated July 30, 1996, NRC License
No. 19-23789-01E is hereby terminated.

FOR THE U.S. NUCLEAR REGULATORY COMMISSION

DATE: August 26, 1996

BY:

[Signature]
Original signed by: *8/26/96*
CB

Susan L. Greene
Medical, Academic, and Commercial
Use Safety Branch
Division of Industrial and
Medical Nuclear Safety
Office of Nuclear Material Safety
and Safeguards
Washington, DC 20555

060051

9611060153 960826
PDR ADOCK 03032142
C PDR

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ML00
cy to Reg I

ORC

NRC HEADQUARTERS

MATERIAL LICENSE TERMINATION/RETIREMENT FORM

(To be completed only by Headquarters Section Leader or person authorized to sign licenses)

LICENSEE NAME Digene Diagnostics, Inc.

LICENSE NO. 19-23789-01E

ADDRESS 2301-B Broadbirch Drive

DOCKET NO. 030-32142

Silver Spring, MD 20904

EXPIRATION DATE 07/31/2001

LICENSE IS EXPIRED _____

BEING TERMINATED XXX

Basis for termination/retirement:

1. Superseded by License No. _____

Transfer documents to new license folder. Date Transferred _____

By _____

2. Other See licensee's ltr dtd 7/30/95, requesting termination.

DATE 08/24/96

Authorized Signature

BY

Susan L. Greene
NMSS/IMNS/IMAB

ACTION BY IR:
Retire old license.

ACTION BY IMOB:
Change status in computer.
Status changed to 04 on 08/24/96
by Carolyn Boyle

DISTRIBUTION:
IRM - Retired Folder
OC/LFDCB
Region Licensing Section

ML00
cyto Reg I

August 26, 1996

Digene Diagnostics, Inc.
ATTN: Jeanmarie Curley
Director of Manufacturing
2301-B Broadbirch Drive
Silver Spring, MD 20904

Dear Ms. Curley:

Enclosed is Amendment No. 02 terminating NRC License No. 19-23789-01E as requested in your letter dated July 30, 1996.

If I can be of further assistance, please contact me at (301) 415-8140.

Sincerely,

Original signed by:

Carolyn Boyle, Licensing Assistant
Medical, Academic, and Commercial
Use Safety Branch
Division of Industrial and
Medical Nuclear Safety
Office of Nuclear Material Safety
and Safeguards

Docket No. 030-32142

Enclosure: Amendment No. 02

cc: Roland G. Fletcher, Manager
Radiological Health Program
Air and Radiation Management Administration
Maryland Department of the Environment
2500 Broening Highway
Baltimore, MD 21224

DISTRIBUTION:

License File 19-23789-01E

NMSS r/f

IMNS c/f

IMAB r/f

TWRich

LWCamper

Region I

DOCUMENT NAME: G:\DIGENE.CJB

To receive a copy of this document, indicate in the box: "C" = Copy without enclosures "E" = Copy with enclosures "N" = No copy

OFFICE	IMAB:NMSS	IMAB:NMSS						
NAME	CJBoyle:cjb	SLGreene						
DATE	08/26/96	08/26/96						

OFFICIAL RECORD COPY

DIGENE RADIOACTIVE MATERIAL DISTRIBUTED JULY 1991 - JULY 1996

NRC Distribution Summary, JC
32P

Kits	mCi 1991	mCi 1992	mCi 1993	mCi 1994	mCi 1995	mCi 1996	TOTAL mCi / PRODUCT	RAD PER KIT(mCi)
Hep Probe	1.32	2.3	4.44	0.78	0	0	8.92	0.02
Hep Probe Japan	0.12	0.26	0	3.04	0.74	0	4.16	0.02
Vira Pap	11.42	17.76	12.64	9.12	0.01	0	50.95	0.01
Vira Pap Japan	1	1.68	1.84	0	0	0	4.52	0.01
Vira Type	5.56	10.19	7.345	4.08	0.005	0	27.18	0.005
Vira Type Japan	0	0	0	0.51	0.285	0	0.795	0.005
HPV Profile	0.33	2	1.7	6.8	24.01	0	34.84	0.01
Single Probes	0.064	0.098	0.024	0	0	0	0.186	0.002
TOTAL mCi/YEAR	19.814	34.368	27.989	24.33	25.05	0		

16-Aug-96

030-32142



2301-B Broadbirk Drive
Silver Spring, Maryland 20904
(301) 470-6500
FAX (301) 680-0690

July 30, 1996

U.S. Nuclear Regulatory Commission
Carolyn Boyle/Licensing Assistant
2 White Flint-3F5
11545 Rockville Pike
North Bethesda, MD 20852-2738

Dear Ms. Boyle:

Please discontinue license # 19-23789-01E. As of December 1995, we ceased shipments of radioactive material.

Radioactive material we have left is decayed possession for "storage only".

If you have any questions, please don't hesitate to call me (301) 470-6577.

Please confirm receipt of this fax and thank you for contacting us on this issue.

Sincerely,

A handwritten signature in cursive script, appearing to read 'Jeanmarie Curley', is written over the typed name and title.

Jeanmarie Curley
Director of Manufacturing

021863

LTS WORKSHEET

DOCKET NO : 03032142 LICENSE NO : 19-23789-01E STATUS: 04
MAIL CONTROL: 021863 RECEIPT DATE : 960730 ACTION TYPE: 5
DUE DATE : 961028
FED. GOVT : C 960826 INST. CODE : 23789 LICENSE REGION: 0
ISSUE DATE: ~~910702~~ ORIGINAL DATE: 910702 EXPIRATION DATE: 20010731
NAME : DIGENE DIAGNOSTICS, INC. DECOM FIN ASSUR REQD: N
SUBM:
DEPT/BUREAU: CONT PLAN REQD: N APPRV:
BUILDING :
STREET : 2301-B BROADBIRCH DRIVE
CITY : SILVER SPRING STATE: MD ZIP: 20904
CONTACT PERSON: SUSAN D. TIEDY PHONE: 301-670-8524
PRIMARY PGM CODE : 03253 SECONDARY PGM CODES:
INSPECTION REGION: 1 PRIORITY CODE: 5 INSPECTION CATEGORY: E
RADIATION SAFETY OFFICER:
STATES WHERE USE IS AUTHORIZED: 1 0 - ALL LISTED STATES
1 - SAME AS STATE IN ADDRESS
2 - ALL STATES
3 - NON-AGREEMENT STATES
AUTHORIZED STATES: (USE ONLY IF ABOVE IS ZERO)
REPORTING IDENTIFICATION SYMBOL:
APPROVAL FOR: REDISTRIBUTION: N STORAGE ONLY: N
TEMPORARY JOB SITES: N INCINERATION: N
BURIAL: N
EXEMPTIONS: (1) (2)

POSSESSION LIMIT INFORMATION

PAGE: 2

MATERIAL TYPE : NPA FORM CODE: NPA AGGREGATE CODE: NPA
MODEL NUMBER : _____
DESCRIPTION : _____
TOTAL QUANTITY : 0000000.00000000 UNIT: _____
OTHER : - # SOURCES: _____

MATERIAL TYPE : _____ FORM CODE: _____ AGGREGATE CODE: _____
MODEL NUMBER : _____
DESCRIPTION : _____
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DESCRIPTION : _____
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OTHER : - # SOURCES: _____

NAME

AUTHORIZATION

ADDRESS WHERE MATERIAL IS USED OR POSSESSED

BUILDING:
ROOM:
STREET:
CITY:
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DOCKET: 03032142 LIC: 19-23789-01E NAME: DIGENE DIAGNOSTICS, INC.

PARTY ISSUING MECHANISM: ASSUR TYPE : _ (C=CERT D=DFP)
NAME : MECH TYPE : _
ADDR1 : MECH AMOUNT : _
ADDR2 : APPROVED? DATE : _
CITY : EXPIRES ? DATE : _
STATE : ZIP: _

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STATE : ZIP: _

PAGE: 5

MEDICAL QUALITY MANAGEMENT PROGRAM REQUIRED: N RECEIVED: APPROVED:

DECOMMISSIONING FINANCIAL ASSURANCE REQUIRED: N SUBMITTED:

CONTINGENCY PLAN REQUIRED: N APPROVED: _____

DECAY-IN-STORAGE APPROVED: N HOLDING FOR < 10 HALF-LIVES APPROVED:

T 1/2 > 65 DAYS, ISOTOPE(S): _____

INTERIM STORAGE UP TO 1996: N

(FOR LFMS USE)
INFORMATION FROM LTS

BETWEEN:

License Fee Management Branch, ARM
and
Regional Licensing Sections

Program Code: 03253
Status Code: 0
Fee Category: 3I
Exp. Date: 20010731
Fee Comments:
Decom Fin Assur Req'd: N
.....

LICENSE FEE TRANSMITTAL

A. REGION 0

1. APPLICATION ATTACHED

Applicant/Licensee: DIGENE DIAGNOSTICS, INC.
Received Date: 960730
Docket No: 3032142
Control No.: 021863
License No.: 19-23789-01E
Action Type: Termination

2. FEE ATTACHED

Amount: _____
Check No.: /

3. COMMENTS

Signed C Boyle
Date 8/14/96

B. LICENSE FEE MANAGEMENT BRANCH (Check when milestone 03 is entered X)

1. Fee Category and Amount: 3I

2. Correct Fee Paid. Application may be processed for:

Amendment /
Renewal _____
License _____

3. OTHER _____

Signed Sh
Date 8/14/96

Termination
Fee Exempt
Aug. 1 11:05

1996 AUG - 5 AM 10:59