

VOID SHEET

TO: License Fee Management Branch

FROM: RIII - Michael Weber

SUBJECT: VOIDED APPLICATION

Control Number: 302026

Applicant: Radiologists, P.C.

License Number: 24-20047-01

Docket Number: 030-17683

Date Voided: 1/9/97

Reason for Void: combined w/ Control No 302101

Michael Weber  
Signature

1/9/97  
Date

Attachment:  
Official Record Copy of  
Voided Action

FOR LFMB USE ONLY

- ☐ Refund Authorized and processed  
☒ No Refund Due  
☐ Fee Exempt or Fee Not Required

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Log completed ☒

Processed by: SAC 1/23/97 0/1

050102

9702050249 970109  
PDR ADOCK 03017683  
C PDR

ML  
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SD

(FOR LFMS USE)  
INFORMATION FROM LTS

BETWEEN:

License Fee Management Branch, ARM  
and  
Regional Licensing Sections

Program Code: 02120  
Status Code: 0  
Fee Category: 7C  
Exp. Date: 20010331  
Fee Comments:  
Decom Fin Assur Req: N

LICENSE FEE TRANSMITTAL

A. REGION

1. APPLICATION ATTACHED

Applicant/Licensee: RADIOLOGISTS, P.C.  
Received Date: 961104  
Docket No: 3017683  
Control No.: 302026  
License No.: 24-20047-01  
Action Type: Amendment

2. FEE ATTACHED

Amount: ~~-----~~

Check No.: ~~-----~~

Signed

Date

*\* Addl. Info*  
*301872 - 52*

*D. Hersey*  
*11/14/96*

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

1. Fee Category and Amount: 7C

**FEE NOT REQUIRED**

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

Amendment ☒

Renewal ☐

License ☐

3. OTHER

Signed

Date

*SC*  
*11/14/96*

NOV 18 1996

RECEIVED BY LFDCB

Date *Nov. 12, 1996*

Log *Nov 7 III*

By *SC*

Date Completed *11/14/96*

1996 NOV 12 PM 2:17



## RADIOLOGICAL SOLUTIONS

SERVING YOUR MEDICAL PHYSICS NEEDS

P.O. BOX 22622  
KANSAS CITY, MO 64113  
816-444-5901 FAX 816-444-5789  
1-800-237-9023

October 31, 1996

Mike Webber  
Materials Licensing Section  
US Nuclear Regulatory Commission, Region III  
801 Warrenville Road  
Lisle, IL 60532-4351

Dear Mr. Webber:

Enclosed please find additional information for Control Number 301872. As requested in your letter faxed October 21, 1996, I have provided the decommission survey of the Nuclear Medicine Department at Radiologists, P.C., for your review.

If you require any additional information, please call.

Best regards,

Kari Schlafke Arcide, M.S.  
Certified: ABR(DRP), ABSNM

Enclosure: Decommission survey

Reference: Control number 301872  
RM License # 24-20047-01  
Radiologists, P.C.  
6724 Troost Avenue, Suite 900  
Kansas City, MO 64131

*Continuation of*  
**RECEIVED**  
**FEE NOT REQUIRED** 301872  
NOV 04 1996

**REGION III**

*Pm: 11-2-96*

302026



# RADIOLOGICAL SOLUTIONS

SERVING YOUR MEDICAL PHYSICS NEEDS

P.O. BOX 22622  
KANSAS CITY, MO 64113  
1-800-237-9023  
FAX 816-444-5789

## Decommissioning Record for Radiologists, P.C.

Detection system:

Berthold Industries Nuclear Spectrometer Model LB 2040

Berthold Industries Model LB 6628-1U NaI well detector

Calibrated: 6/25/96

Ludlum Instruments Model 14C, Probe 44-9 SN:69399

Detection Efficiency:

78% for Co-57

No.	Location	mR/hr	CPM	DPM	Accept?
1	L-shield	0.02	603	19	YES
1b	Sharps shield	0.02	556	-42	YES
2	Floor under prep area	0.02	715	162	YES
3	Dose calibrator	0.02	669	103	YES
3b	Counter top in prep area	0.02	550	-49	YES
4	Injection table	0.02	621	42	YES
4b	Injection area floor	0.02	628	51	YES
4c	Waste can	0.02	629	52	YES
5	Matrix camera	0.02	596	10	YES
6	Control center	0.02	609	26	YES
7	Desk	0.02	578	-13	YES
7b	File cabinet	0.02	610	28	YES
8	Toshiba table	0.02	621	42	YES
9	Toshiba camera head	0.02	614	33	YES
10	Collimator stand	0.02	624	46	YES
10b	Fillable flood	0.02	719	167	YES
11	Dose receipt stand	0.02	694	135	YES
12	Lead cave storage	0.02	625	47	YES
12b	Sealed source containers	0.02	670	105	YES
13	Sink	0.02	573	-20	YES
13b	Waste storage cabinet	0.02	645	73	YES
14	Floor under table	0.02	634	58	YES
15	Wall mounted first aid cabinet	0.02	595	8	YES
16	GE matrix camera	0.02	601	16	YES
17	GE camera control	0.02	618	38	YES
18	Floor	0.02	656	87	YES
19	Injection table	0.02	628	51	YES
20	Camera table	0.02	603	19	YES
21	Toshiba camera	0.02	593	6	YES
22	Injection area floor	0.02	659	91	YES
23	Collimator stand	0.02	622	43	YES
24	Door and floor	0.02	581	-9	YES
25	Stool	0.02	624	46	YES

Background:

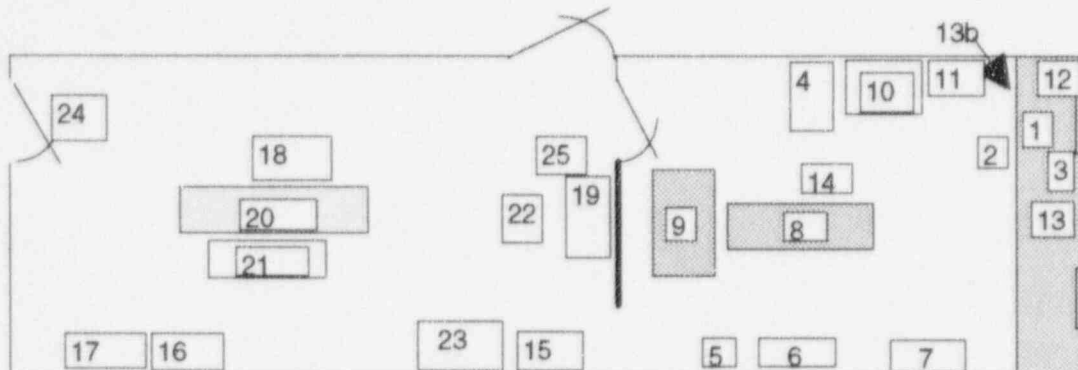
0.02 588.4

**CLEANING LEVEL:**

**200 DPM for I-131**

NOTICE: To convert from cpm to dpm: Wipe dpm = (Measured cpm - Background cpm) / Eff%

# MAP FOR DECOMMISSIONING WIPE AND AREA SURVEY



Surveyor: Kari S. Arcide

Kari S. Arcide, M.S.  
Kansas RM License No.:33-C737-01

Date: 10-30-96