

From: Michelle Beardsley
To: staffords@epix.net
Date: Wed, Feb 2, 2005 9:33 AM
Subject: Re: Scranton Heart Inst. application for NRC license
Place: LAT@nrc.gov

New License application
Docket No. 03036758
Control No. 136030

Dr. Stafford M. Smith
Scranton Heart Institute

Dr. Smith:

In order for you to be approved as an authorized user for 35.200 materials you will need to submit a signed preceptor statement from an authorized user of these materials, documenting either:

1. 500 hrs. of supervised work experience and 500 hours of supervised clinical experience = total of 1000 hours confirming that you completed the tasks specified in 35.920 (b) (2);

OR

2. 500 hours of work experience confirming that you completed the tasks specified in 35.290 (c) (1) (ii) **AND** a written certification signed by an authorized user preceptor confirming that you completed these tasks and have achieved a level of competency sufficient to function independently as an authorized user for the materials requested.

PLEASE use NRC Form 313A (preceptor statment) to document the aforementioned. You can obtain a copy of this in NUREG-1556 Vol. 9 or on our website nrc.gov.

Please call me at 610-337-6942 if you require additional information. Also, please reference the control number listed above on any correspondence submitted.

Sincerely,
Michelle Beardsley
Health Physicist
USNRC RI
FAX: 610-337-5393

CC: LAT@nrc.gov

Mail Envelope Properties

(4200E4CB.DF0 : 12 : 35316)

Subject: Re: Scranton Heart Inst. application for NRC license

Creation Date: Wed, Feb 2, 2005 9:33 AM

From: Michelle Beardsley

Created By: MRB@nrc.gov

Recipients

epix.net

staffords (staffords@epix.net)

nrc.gov

kp1_po.KP_DO

LAT CC (LAT@nrc.gov)

Post Office

kp1_po.KP_DO

Route

epix.net

nrc.gov

Files

MESSAGE

Size

2406

Date & Time

Wednesday, February 2, 2005 9:33 AM

Options

Expiration Date:

None

Priority:

Standard

Reply Requested:

No

Return Notification:

None

Concealed Subject:

No

Security:

Standard