

HENRICO CARDIOLOGY ASSOCIATES

7702 E. PARHAM ROAD, SUITE 106
RICHMOND, VIRGINIA 23294

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February 17, 2005

05 FEB 22 P 2:18

RECEIVED
REGION 1

United States Nuclear Regulatory Commission
Region 1
475 Allendale Road
King of Prussia, Pennsylvania 19406-1415

RE: # 45-25634-01 63036395
Henrico Cardiology Associates
7702 E. Parham Road, Suite 106
Richmond, Virginia 23294

Dear Sir or Madam:

We would like to add the following three individuals as authorized users to our materials license, based upon them being named authorized users on license number 45-15249-01 issued to Chippenham and Johnston-Willis Hospitals, Inc. (attached).

Russell O. Briere, M.D. Material and Use 35.200

James Zelenak, M.D. Material and Use 35.200

Ray A. Beauchamp, M.D. Material and Use 35.200

If you have any questions please contact me at (804) 346-2070.

Sincerely,

Marion R. Patterson

Marion R. Patterson, Administrator
Henrico Cardiology Associates

Enclosure

136535
NMSS/RGN MATERIALS-002

NRC FORM 374A

U.S. NUCLEAR REGULATORY COMMISSION

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**MATERIALS LICENSE
SUPPLEMENTARY SHEET**

License No.
45-15249-01

Docket and Reference No.
030-08805
45-02888-01

Amendment No. 37

11. The Radiation Safety Officer (RSO) for this license is Gerry Reece, M.D., for the 1401 Johnston-Willis Road, Richmond, Virginia location, and Russell O. Briere, M.D., for the 7101 Jahnke Road, Richmond, Virginia location.

12. Licensed material is only authorized for use by, or under the supervision of:

A. Individuals permitted to work as an authorized user and/or authorized medical physicist in accordance with 10 CFR 35.13 and 35.14.

B. The following individuals are authorized users for medical use as indicated:

<u>Authorized User</u>	<u>Material and Use</u>
Russell O. Briere, M.D.	35.100; 35.200; 35.300; 31.11
James D. Wadsworth, M.D.	35.100; 35.200; 35.300 except Iodine-131; 31.11
Fabio Guitierrez, M.D.	35.100; 35.200; 31.11
George W. Thomas, M.D.	35.100; 35.200; 35.300; 31.11
Willard P. Milby, III, M.D.	35.100; 35.200; 35.300; 31.11
James Zelenak, M.D.	35.100; 35.200; 35.300; 31.11
Charles Cockrell, M.D.	35.100; 35.200; 31.11
Nathaniel W. Cuthbert, M.D.	35.100; 35.200; 35.300 except Iodine-131; 31.11
Maurice F. Mullins, M.D.	35.100; 35.200; 35.300; 31.11
B. Gerald Yount, Jr., M.D.	35.100; 35.200; 31.11
George W. Martin, M.D.	35.100; 35.200; 35.300 except Iodine-131 in quantities greater than 33 millicuries; 31.11
Efstathios Spinos, M.D.	35.100; 35.200; 35.300; 31.11
Glen L. Shivel, M.D.	35.100; 35.200; 31.11
Joel F. Parker, M.D.	35.100; 35.200; 31.11
Scott Cunningham, M.D.	35.100; 35.200; 31.11
Timothy R. Taylor, M.D.	35.100; 35.200; 31.11
Ray A. Beauchamp, M.D.	35.100; 35.200; 31.11

This is to acknowledge the receipt of your letter/application dated

2/17/2005, and to inform you that the initial processing which includes an administrative review has been performed.

Amendment 45-25634-01 There were no administrative omissions. Your application was assigned to a technical reviewer. Please note that the technical review may identify additional omissions or require additional information.

Please provide to this office within 30 days of your receipt of this card

A copy of your action has been forwarded to our License Fee & Accounts Receivable Branch, who will contact you separately if there is a fee issue involved.

Your action has been assigned **Mail Control Number** 136535.
When calling to inquire about this action, please refer to this control number.
You may call us on (610) 337-5398, or 337-5260.

BETWEEN: : (FOR LFMS USE)
 : INFORMATION FROM LTS
 : -----
 :
 License Fee Management Branch, ARM : Program Code: 02201
 and : Status Code: 0
 Regional Licensing Sections : Fee Category: 7C
 : Exp. Date: 20131031
 : Fee Comments: _____
 : Decom Fin Assur Reqd: N
 : ::

LICENSE FEE TRANSMITTAL

A. REGION I

1. APPLICATION ATTACHED
 Applicant/Licensee: HENRICO CARDIOLOGY ASSOCIATES
 Received Date: 20050222
 Docket No: 3036395
 Control No.: 136535
 License No.: 45-25634-01
 Action Type: Amendment

2. FEE ATTACHED
 Amount: /
 Check No.:

3. COMMENTS

Signed Rebecca J. Ford
 Date 2/2/2005

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

- 1. Fee Category and Amount: _____
- 2. Correct Fee Paid. Application may be processed for:
 - Amendment _____
 - Renewal _____
 - License _____
- 3. OTHER _____

Signed _____
 Date _____