

Cape Heart Clinic  
2 Village Drive  
Cape May Court House, NJ 08210  
609-465-7517  
Fax 609-465-2448

February 17, 2005

USNRC  
Division of Materials Licensing  
475 Allendale Road  
King of Prussia, PA 19406

RECEIVED  
FEB 22 09:29

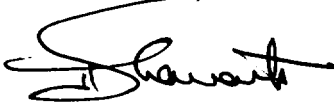
Re: License # 29-28684-02 03035478

Dear Ms. Beardsley:

We have recently added a second Cardiologist to our practice. We would like to add Dr. Jules Pean to our license as an authorized user. He was an authorized user under license # 202-257-24 at Danville Cardiovascular Consultants in Danville, Kentucky. I have also enclosed a copy of his preceptorship letter. If you need any additional information in order to add him to our license, please do not hesitate to call.

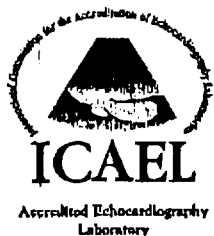
Your attention to this matter is greatly appreciated.

Respectfully,



Suketu Nanavati, M.D.

136538  
NMSS/RGNI MATERIALS-002



**John S. Aumiller, MD, FACC**  
Diplomate, American Boards of  
Internal Medicine  
Critical Care Medicine  
Cardiovascular Diseases

**Jules Pean, MD**  
Diplomate, American Board of  
Internal Medicine

**Aslam M. Ahmad, MD, FACC**  
Diplomate, American Boards of  
Internal Medicine  
Cardiovascular Diseases

**Brad W. Schwarz, MS, PA-C**  
Certified Physician Assistant

**Barbara A. Jarboe, PA-C**  
Certified Physician Assistant

**John Ibanez, PA-C**  
Certified Physician Assistant

**Shelly Lynn**  
Practice Manager

**Brenda Maftoun, RCS**  
Clinic Manager

John S. Aumiller, MD, FACC  
**DANVILLE CARDIOVASCULAR CONSULTANTS**

1250 Ben Ali Drive • Danville, Kentucky 40422

<http://www.mydoctor.com/danvillecard>

(859) 236-6621 Fax: (859) 236-6620 Toll Free: 1-888-256-0093

April 1, 2002

Michael Cleaver  
Radioactive Materials Specialist  
Radiation Health and Toxic Agents Branch  
Cabinet for Health Services  
275 E. Main Street  
Frankfort, KY 40621-0001

RE: Jules Pean, M.D.

Dear Mr. Cleaver:

This letter is to affirm that Dr. Jules Pean gained clinical experience at our institution in nuclear cardiology.

The preceptorship began on April 17, 2000, and continued through January 6, 2002. During this period Dr. Pean actively participated in the act of processing and programming of isotopes as well as interpretation of Thallium stress and rest imaging as well as Pyrophosphate red cell multigated acquisition studies at rest and with stress procedures using both Adenosine and Persantine format as well as Dobutamine.

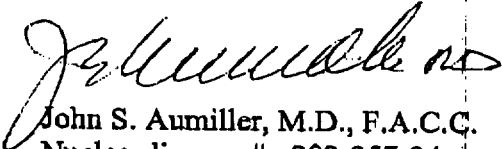
Calculation fractions, wall motion evaluation and shunt calculations were performed.

Total procedures performed were in excess of 3000 with approximately 10 shunt calculations performed.

During this time Dr. Pean also had experience with health physics, the radiopharmaceutical preparation, and the regular meetings of the radiation safety officer and administrative procedures of the facility.

The hours of clinical cardiology and nuclear cardiology work experience accrued during this time was greater than 3000 hours.

Sincerely,



John S. Aumiller, M.D., F.A.C.C.

Nuclear licence #: 202-257-24

JSA/rsr

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

2/11/2005, and to inform you that the initial processing which includes an administrative review has been performed.

Amendment 24-28684-02 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

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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 136530.  
When calling to inquire about this action, please refer to this control number.  
You may call us on (610) 337-5398, or 337-5260.

(FOR LFMS USE)  
INFORMATION FROM LTS

BETWEEN:

License Fee Management Branch, ARM  
and  
Regional Licensing Sections

: Program Code: 02201  
: Status Code: 0  
: Fee Category: 7C  
: Exp. Date: 20101031  
: Fee Comments: \_\_\_\_\_  
: Decom Fin Assur Reqd: N  
: .....

LICENSE FEE TRANSMITTAL

A. REGION I

1. APPLICATION ATTACHED

Applicant/Licensee: NANAVATI, SUKETU, M.D.  
Received Date: 20050222  
Docket No: 3035478  
Control No.: 136538  
License No.: 29-28684-02  
Action Type: Amendment

2. FEE ATTACHED

Amount: /  
Check No.: /

3. COMMENTS

Signed Rebecca J. Ford  
Date 3/1/05

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 \_\_\_\_\_