

Shore Heart Group

1820 Corlies Avenue · Suite 4B · Neptune, NJ 07753 · (732) 776-8500 · Fax (732) 776-8946
35 Beaverson Boulevard · Unit 9B · Brick, NJ 08723 · (732) 262-4262 · Fax (732) 262-4317
9 Mule Road · Unit E1 · Toms River, NJ 08755 · (732) 281-1101 · Fax (732) 281-1105
1100 Route 72 West · Suite 306 · Manahawkin, NJ 08050 · (609) 971-3300 · Fax (609) 978-0007

Richard Adelson, M.D., FACC, FSCAI
Maurice Wetts, M.D., FACC, FSCAI
Raymond Resnick, M.D., FACC, FSCAI
Leonard Sandler, M.D.

Michael Aaron, D.O., FACC
Ihab Girgis, M.D., FACC, FACP
Tony N.T. Chu, M.D., FACC
James Orlando, M.D.

February 23, 2005

Nuclear Regulatory Commission, Region I
Materials License Section
475 Allendale Road
King of Prussia, PA 19406-1415

RE: Radioactive materials license number 29-30541-01

03035255

REQUEST FOR AMENDMENT

Dear Sir or Madam:

Please amend the above referenced license in the following sections:

We are adding another location of use to the license.

The address is:

1820 Corlies Avenue,
Suite 4B
Neptune, NJ 07753

I have enclosed a floor diagram for your review.

All other license conditions and commitments shall remain unchanged. Should you have any questions, I can be contacted at 732-776-8500.

Sincerely,



Michael R. Aaron, D.O.
Radiation Safety Officer

Enclosure as stated

05 MAR -1 p1:29

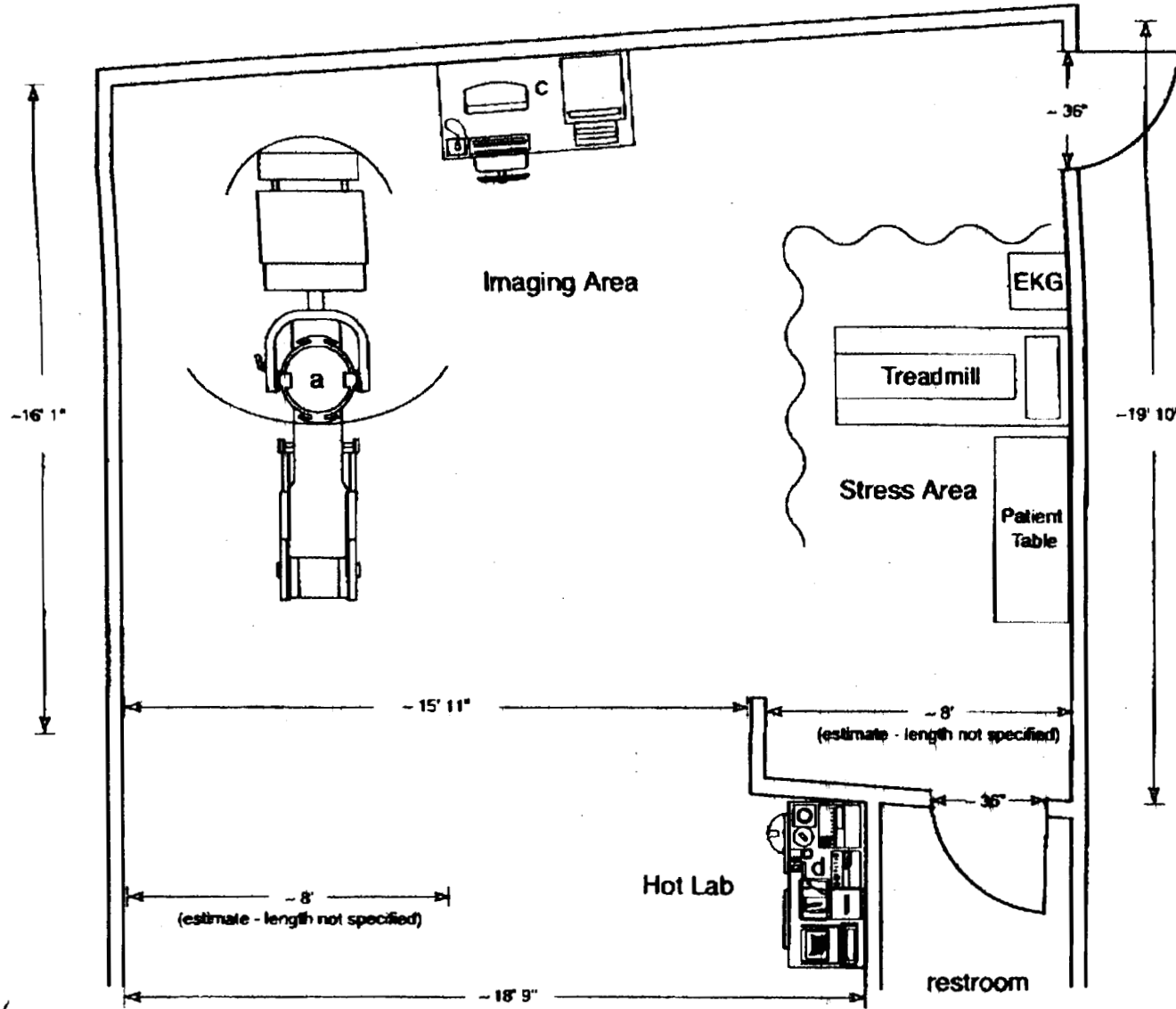
RECEIVED
REGION 1



Customer: Neptune, NJ

Date: 02-15-05

RS 7500 SPECT Camera with table in the cardiac position - SHORT REACH MODEL



- a) SPECT Camera
- c) Computer
- d) Radioactive Receipt
Radioactive Storage
Radioactive Waste

SCALE

 One Foot

Scale 1/4" = 1'0"

Nuclear Layout # A By: VR

Layout Only - Not For Construction Limited to NCS Equipment

1 FEB-15-2005 09:03:03 AM

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

2/23/2005, and to inform you that the initial processing which includes an administrative review has been performed.

Amendment 24-30541-01 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 136584.
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: 20091130
 : Fee Comments: _____
 : Decom Fin Assur Reqd: N
 :

LICENSE FEE TRANSMITTAL

A. REGION I

1. APPLICATION ATTACHED
 Applicant/Licensee: SHORE HEART GROUP
 Received Date: 20050301
 Docket No: 3035255
 Control No.: 136584
 License No.: 29-30541-01
 Action Type: Amendment

2. FEE ATTACHED
 Amount:
 Check No.:

3. COMMENTS

Signed *Rebecca Jensen*
 Date 3/12/09

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 _____