South Hills Nuclear Cardiology Center

Jefferson Hospital Medical Building Suite 106, 575 Coal Valley Road Jefferson Hills, PA 15025

'05 MAY 11 P12:50

Phone (412) 469-5400 Facsimile (412) 469-7336

April 28, 2005

U.S.N.R.C. Region I 475 Allendale Road King of Prussia, PA 19406-1415

Re: license #37-28378-01 03031136

To whom it may concern,

Please let this letter serve as notification that the name of our facility has changed to Jefferson Cardiology Associates / Madhavan, Chandra, Tauberg Cardiology Medical Associates /Jefferson Nuclear Cardiology Associates. The name change is due to reimbursement and billing issues. However, our facility continues to be under the same management. Therefore, this is a name change only and is not representative of an ownership change.

Thank you for your attention in this matter.

Sincerely,

Certifying Administrative Official JCA/CMA/JNCA

NRC FORM 213 U.S. NUCLEAR REGULATORY COMMISSION	APPROVED BY OMB: NO. 3199-0120 EXPRES: 19/31/2005	
(4-2004)	Entimated burden per response to comply with this mandatory collection request: ? hours. Submittel of the applicables is necessary to determine that the applicant is	
10 CFR 30, 32, 33. 34, 35, 39, 39, and 40	quelified and that adequate procedures exist to protect the public health and safety.	
	Send comments regarding burden estimate to the Records and FOIAPrivacy Services	
	Service (7-5-6-2); U.S. Nuclear Regulatory Commission; Weshington, DC 2066-0001; or by internet 4-mail to Infopollects@arc.gov, and to the Desk Officer, Office of Information and Regulatory Affairs, NEOB-10202, (3160-0120), Office of Management	
APPLICATION FOR MATERIAL LICENSE	Information and Regulatory Affairs, NEOB-10202, (3150-0120), Office of Management and Budget, Washington, DC 20503. If a means used to impose an information	
With the transfer of the terms the state	collection does not display a currently valid OMB control number, the NRC may not	
1	conduct or sponsor, and a person is not required to respond to, the information	
	tollecijon:	
INSTRUCTIONS: SEE THE APPROPRIATE LICENSE APPLICATION GUI	DE FOR DETAILED INSTRUCTIONS FOR COMPLETING APPLICATION.	
SEND TWO COPIES OF THE ENTIRE COMPLETED APPLICATION TO T	HE NRC OFFICE SPECIFIED BELOW.	
APPLICATION FOR DISTRIBUTION OF EXEMPT PRODUCTS FILE APPLICATIONS WITH:	IF YOU ARE LOCATED IN:	
ORMEION OF INDUSTRIAL AND MEDICAL MUCLEAR SAFETY	ILLINOIS, MDIANA, IONA, MICHIGAN, MINNESOTA, MISSOURI, OHIO, OR WISCONSIN, SEIS	
OFFICE OF NUCLEAR MATERIALS SAFETY AND SAFEGUARDS	APPLICATIONS TO:	
U.S. NUCLEAR REGULATORY COMMISSION WASHINGTON, DC 2003-0001		
Washington DC Massaur	MATERIALS LICENSING BRANCH U.S. NUCLEAR REGULAYORY COMMISSION, REGION IN	
ALL OTHER PERSONS FILE APPLICATIONS AS FOLLOWS:	2443 WARRENVILLE ROAD, SUITE 210	
	USLE, IL 90532-4362	
IF YOU ARE LOCATED IN:		
	ALASTA AMERIKA ABUSANTAN SALUTUNNIA DEL DUANG MANAGUN MANG MANGE	
ALABAMA, COUNTETICUT, DELAMARE, BUTTUCT OF COLLIMINA, FLORIDA, GEORGIA, ROMTUCKY, MARKE MARYEANIE, MASSACHUBETTE, MINGROUPPE, NEW HAMPSHRE, NEW	ALASKA, AMEDNA, ARKAMBAR, CALIFORNIA, EOLORADO, HAWAII, IDANO, KANBAB, ILDUNBIANA, INDNYANA, NEBRASNA, MEVADA, NEW MEDICO, NORTH BAKOTA, OKLAHOMA,	
JERSEY, NEW YORK, NORTH CAROLINA, PENNSYLVAMA, PUBRTO RICO, RHODE	OREGON, PACUIC TRUST TERRITORIES, SOUTH BAKOTA, TEXAS, LITAH, WASHINGTON,	
island, bouth carolina, tennessee, vermont, virginia, virgin klands, or Enger, virginal send applications 30:	OR WYOMMS, SEND APPLICATIONS TO:	
UCENBING ASSISTANCE TEAM	NUCLEAR MATERIALS LICCHING BRANCH	
ORABION OF NUCLEAR MATERIALS SAFETY  U.S. NUCLEAR REGULATORY COMMISSION, REGION (	U.S. NUCLEAR REGULATORY COMMISSION, REGION IV 811 RYAN PLAZA DREVE, BUITE 400	
475 ALLENDALE ROAD	APPLINGTON IX 76011-4005 03031136	
IGNG OF PRUSSIA, PA 19408-1415	030 311 36	
i		
PERSONS LOCATED IN AGREEMENT STATES SEND APPLICATIONS TO THE U.C. MUCLEAU MAYERIAL IN STATES SUBJECT TO U.E. MUCLEAU REQUILATORY COMMERCION JURISDICT	R REGULATORY COMMISSION ONLY IF THEY WIGH TO POSSESS AND USE LICENSED	
· · · · · · · · · · · · · · · · · · ·		
1. THIS IS AN APPLICATION FOR (Check appropriate form)	2. NAME AND MAILING ADDRESS OF APPLICANT (Include ZIP code)	
A NEW LICENSE	Jefferson Cardiology Association/Madhavan, Chandra, Tauberg	
	Cardiology Medical Associates/Jefferson Nuclear Cardiology	
B. AMENOMENT TO UCENSE NUMBER: 37-28378-01	Associates	
C. RENEWAL OF LICENSE NUMBER	575 Coal Valley Road; Suite 106	
C. Harting of Classic, Indiana	Jofferson Hills, PA 15025	
3. ADDRESS WHERE LICENSED WATERIAL WILL BE USED OR POSSESSED	A. NAME OF PERSON TO BE CONTACTED ABOUT YHIS APPLICATION	
	K-ith O Ontario O Novida	
	Keith G. Ostrom, Consultant, Associates in Med. Physics, LLC	
	TELEPHONE NAMEER	
	(216) 663-7000	
BURNEY FERMAN S TANDENING AND		
SUBMIT FREMS STANDUCK 11 ON 6-1/2 X 17 PAPER. THE TYPE AND SCOPE OF INFORMAT  S. RADIOACTIVE MATERIAL	TON TO BE PROVIDED IS DESCRIBED IN THE LICENSE APPLICATION GLIDE	
Element and mass number, b. charriest and/or physical func and c. orginizate amount	8. PURPOSE(\$) FOR WHICH LICENSED MATERIAL WILL BE USED.	
which will be processed at any one time.		
7. INDMOUALISI RESPONSIBLE FOR RADIATION SAFETY PROGRAM AND THEIR TRAINING EXPERIENCE.	U. TRAINING FOR INDIVIDUALS WORKING IN OR FREQUENTING RESTRICTED AREAS.	
8. FACKLITIES AND EQUIPMENT.	10. RADIATION SAFETY PROGRAM.	
11. WASTE MANAGEMENT,	12. LICENSE FEES (See 10 CFR 170 and Section 170 31)	
	FEE CATROORY AMOUNT &	
13 CERTIFICATION, (little to completed by explicit THE APPLICANT UNDERSTANCE THAT ALL STATISHENING AND REPORTED TATION MADE IN THE ADDITION AND REPORTED TO A STATISHENING AND REPORTED TO		
GOT THE APPOCAT.		
OF PERSON HAVE WITH TITLE 10, CODE OF FEDERAL REGULATIONS, PARTS 20, 32, 29, 34;	HE APPLICANT, MANGO IN ITEM 2, CERTIFY THAT THIS APPLICATION IS PREPARED IN 36, 36, 39, AND 40, AND THAT ALL INFORMATION CONTRANSIT MEDICIN IN THEIR AND	
THE APPLICANT AND ANY OFFICIAL EXECUTING THIS CERTIFICATION ON BEHALF OF THE APPLICANT, MANGO IN ITEM 2, CERTIFY THAT THIS APPLICATION IS PREPARED IN COMPORMITY WITH TITLE 10, CODE OF FEDERAL RIGIGLATIONS, PARTS 30, 32, 32, 34, 36, 36, 36, AND THAT ALL INFORMATION CONTAINED HEREIN IS TRUE AND GONEGET-TO THE GEST OF THESIS INFORMATION CONTAINED HEREIN IS TRUE AND		
WARNING: 18 U.S.C. SECTION 1001 ACT OF JUNE 28, 1946 SZ STAT, 749 MAKES IT A CRIMINAL OFFENSE TO MAKE A WILLFULLY FALSE STATEMENT OR REPRESENTATION TO ANY DEPARTMENT OR AGENCY OF THE UNITED STATES AS TO ANY MATTER WITHIN ITS JUNESCICTION.		
	USE ONLY /	
TYPE OF FEE FEE LOG FEE CATEGORY AMOUNT RECEIVED CHECK	NUMBER COMMENTS	
5		
APPROVED BY DATE	12-12	
	137032	
NRC FORM 313 (4-2004)	PRINTED ON RECYCLED PAPER	
• •	rain ED On NEGTOCO PAPER	

NMOS/RGNI MATERIALS-002

This is to acknowledge the rec	eipt of your letter/application dated		
includes an administrative revi	, and to inform you that the initial processing which iew has been performed.		
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	e within 30 days of your receipt of this card		
	n forwarded to our License Fee & Accounts Receivable separately if there is a fee issue involved.		
Your action has been assigned When calling to inquire about You may call us on (610) 337-	this action, please refer to this control number.		
NRC FORM 532 (RI) (6-96)	Sincerely, Licensing Assistance Team Leader		

		: (FOR LFMS USE)
BET	WEEN:	: INFORMATION FROM LTS
		· :
Lic	ense Fee Management Branch, ARM	: Program Code: 02201
and		: Status Code: 0
Regional Licensing Sections		: Fee Category: 7C
	: Exp. Date: 20141130	
		: Fee Comments:
		: Decom Fin Assur Reqd: N
		***************************************
LIC	ENSE FEE TRANSMITTAL	
Α.	REGION I	
1.	APPLICATION ATTACHED	
	Applicant/Licensee: JEFFERSON CAR	DIOL. ASSN.& CARDIAC
	Received Date: 20050511	
	Docket No: 3031136	
	Control No.: 137032	
	License No.: 37-28378-01	
	Action Type: Amendment	
2.	FEE ATTACHED	
	Amount:	
	Check No.:	
3.	COMMENTS	
		Alexander de la companya de la compa
	Signed .	hitter funer
	Date	211619002 /J
В.	LICENSE FEE MANAGEMENT BRANCH (Check	k when milestone 03 is entered //)
1.	Fee Category and Amount:	
2.	Correct Fee Paid. Application may Amendment	be processed for:
	Renewal	
	License	
3.	OTHER	
	Signed	
	Date	