U.S. NUCLEAR REG	JLATORY COMMISSION	Date: 8-11-06
TELEPHONE CON	VERSATION RECORD	Time: 9:30 am
Mail Control 139203 or Report No(s).	License No(s). 37-02763-01	Docket No(s). 03003025
Name of Licensee:	St. Joseph Regional Health Network	ς
Name of Participant(s):	Karen Wagner, RSO	
Telephone No.	610-208-8810	
Subject: (NOTE: This will be used as the Documents Title in ADAMS)	Amendment RAI	
Summary:	Dr. Hughes is listed for manual brac Hospital license. However, you may Hahnemann (LN 37-00467-36) that there.	
	Dr. Haas and Dr. Yuen were previou HDR. Please confirm that they will r use of the Nucletron unit prior to me	receive vendor equivalent training for
	Item 9.E. of your license authorizes whether you wish to be licensed for currently manufacturers the device.	the Novoste device. Please indicate the Best Vascular device, who
Action Required:	await response	
Document Availability:	× Publicly Available	Non-Publicly Available
x Non-Sensitive	Non-Sensitive Copyright Sen	nsitive Sensitive Copyright
Immediate Release	x Normal Release	Delay Release Date
Prepared & SUNSI Review Completed By: Penny Lanzisera / RA / Date: 8-11-06		