

U.S. NUCLEAR REGULATORY COMMISSION	Date: 8/29/06
TELEPHONE CONVERSATION RECORD	Time:
Mail Control 139032 License No(s). 45-19128-01	Docket No(s). 030-17010
or Report No(s).	
Name of Licensee:	Southern Virginia Regional Hospital
Name of Participant(s):	Pamela Low, Director of Radiology
Telephone No.	434-634-6931
Subject: <small>(NOTE: This will be used as the Documents Title in ADAMS)</small>	RAI (139302) dated 8/29/06
Summary:	In order to approve Inna Tchoukina, M.D. as an AU for 35.200 materials, I need the following additional information: 1. Copy of the CBNC certificate 2. Preceptor attestation statement. According to Ms. Low the information will be faxed ASAP.
Action Required:	Wait for additional information
Document Availability:	<input checked="" type="checkbox"/> Publicly Available <input type="checkbox"/> Non-Publicly Available
<input checked="" type="checkbox"/> Non-Sensitive <input type="checkbox"/> Non-Sensitive Copyright <input type="checkbox"/> Sensitive <input type="checkbox"/> Sensitive Copyright	
<input type="checkbox"/> Immediate Release <input checked="" type="checkbox"/> Normal Release <input type="checkbox"/> Delay Release Date	
Prepared & SUNSI Review Completed By: TLWeidner	/ RA / Date: 8/29/06