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### J.S. Heart and Vascular

James W. Marcucci, M.D., F.A.C.C.

Leonard G. Gehl, M.D., F.A.C.C.

David J. Burkey, M.D., F.A.C.C.

Dennis K. Gabos, M.D., F.A.C.C.

Adil Waheed, D.O.

## FAX COVER SHEET

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U. S. HEART & VASCULAR  
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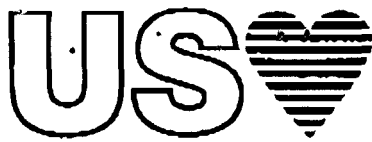
TO: Recipient: Todd J. Jackson FROM: Sender: Lori Gastner  
Fax Number: 601-337-5269 Sender's Signature: \_\_\_\_\_  
Phone Number: 601-337-5308 Sender's Phone Number: 412-429-8840  
No of Pages (including Cover): 2 Patient's Name Inspection date 5-17-07  
Date of Transmission: 5-22-07 Medical Record # 030-30695  
Docket # \_\_\_\_\_

Dear Mr. Jackson,

Attached is the RSO. written agreement showing our corrective action. If you need any further information please notify me.

Thank you,

Lori Gastner C.N.M.T.

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**Memo To: Radiation Safety Officer**  
**From: Chief Executive Officer**  
**Subject: Delegation of Authority**  
**Date: May 21, 2007**

You, James W. Marcucci, M.D., have been appointed Radiation Safety Officer and are responsible for ensuring the safe use of radiation. You are responsible for managing the radiation protection program; identifying radiation protection problems; initiating, recommending, or providing corrective actions; verifying implementation of corrective actions; stopping unsafe activities; and ensuring compliance with regulations. You are hereby delegated the authority necessary to meet those responsibilities, including prohibiting the use of byproduct material by employees who do not meet the necessary requirements and shutting down operations where justified by radiation safety. You are required to notify management if staff do not cooperate and do not address radiation safety issues. In addition, you are free to raise issues with the Nuclear Regulatory Commission or the Pennsylvania Department of Environmental Protection at anytime. It is estimated that you will spend 1 hour per week conducting radiation protection activities.

  
Signature of Management Representative

I accept the above responsibilities,

  
Radiation Safety Officer