



MOUNT VERNON CARDIOLOGY
A S S O C I A T E S INC.

CONSULTATIVE
AND INTERVENTIONAL
CARDIOLOGY

Cleveland Francis, Jr., MD
Bruce P. Tinker, MD
Arnold J. Rosenblatt, MD
George A. Besch, MD
Narian P. Rajan, MD
Minh Van Ngo, MD
Azita Moalemi, MD
Naghmeh Tebyanian, MD
John Y. Sunew, MD

August 16, 2007

NH 562

Brian A. Parker
Commercial and R&D Branch
Division of Nuclear Materials Safety
Region I
475 Allendale Road
King of Prussia, Pennsylvania 19406

RE: Mt. Vernon Cardiology Associates, Ltd.
License Amendment
45-25548-01

03035623

Dear Mr. Parker,

Please amend the above referenced license to add John Sunew, M.D. as an authorized user to the above referenced license. Documentation in support of this physician's credentials is enclosed.

Please amend the above referenced license to remove Azita Moalemi, M.D. and Naghmeh Tebyanian, M.D. as authorized users from the above referenced license. They no longer use the facility.

Any questions regarding this request may be directed to me at (703) 641-0500 or Wendy Charlton, Krueger-Gilbert Health Physics, Inc. at (410) 665-5447.

2007 AUG 23 AM 10:55
RECEIVED
REGION I

Sincerely,

Neil C. Smarte, C.N.M.T.
Radiation Safety Officer.

8101 Hinson Farm Road
Suite 408
Alexandria, VA 22306
703-780-9014
703-780-9077 FAX

6355 Walker Lane
Suite 406
Alexandria, VA 22310
703-313-0943
703-313-0944 FAX

www.mvcaheart.com

140972

NMSS/RGN1 MATERIALS-002

THE CERTIFICATION BOARD OF NUCLEAR CARDIOLOGY

Incorporated 1996

CERTIFIES THAT

John Y. Sunew, M.D.

HAVING MET THE REQUIREMENTS PRESCRIBED BY THIS BOARD FOR PHYSICIANS RESIDING
IN THE UNITED STATES AND HAVING SATISFACTORILY PASSED THE REQUIRED EXAMINATION,

IS HEREBY DESIGNATED

A DIPLOMATE CERTIFIED IN THE SUBSPECIALTY OF

NUCLEAR CARDIOLOGY

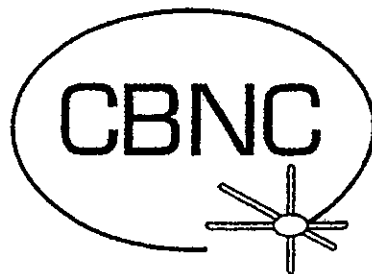
FOR THE PERIOD 2005 THROUGH 2015

M. D. Conger
PRESIDENT

J. A. [Signature]
SECRETARY



CERTIFICATE # 4266



OCTOBER 23, 2005

COMMONWEALTH OF VIRGINIA
DEPARTMENT OF HEALTH PROFESSIONS

Robert A. Nebiker, Director

William L. Harp, M.D.
Executive Director
(804) 662-9908

BOARD OF MEDICINE

6603 West Broad Street, 5th Floor
Richmond, VA 23230-1712
www.dhp.virginia.gov/medicine

License to Practice
Medicine & Surgery

John Y. Sunew, MD

Issued
04/05/2001

Expires
03/31/2008

Number
0101230943

To Provide Information or File a
Complaint About a Licensee, Call: 1-800-533-1560

REMOVE SIDE EDGES FIRST.
THEN FOLD, CREASE AND TEAR THIS STUB ALONG PERFORATION

0101230943

SEE REVERSE SIDE FOR OPENING INSTRUCTIONS

Department of Health Professions Board of Medicine
6603 West Broad Street, Fifth Floor
Richmond, Virginia 23230-1712

Presorted
First-Class Mail
US Postage Paid
Richmond, VA
Permit No. 1902

IMPORTANT LICENSE DOCUMENT ENCLOSED

John Y. Sunew



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BY NRC. NO COPY OF THIS INFORMATION
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**AUTHORIZED USER TRAINING AND EXPERIENCE
AND PRECEPTOR ATTESTATION**
(for uses defined under 35.100, 35.200, and 35.500)
[10 CFR 35.190, 35.290, and 35.590]

APPROVED BY OMB: NO. 3150-0120
EXPIRES: 10/31/2008

Name of Proposed Authorized User

John Sunew, MD

State or Territory Where Licensed

Virginia

Requested Authorization(s) (check all that apply)

35.100 Uptake, dilution, and excretion studies

35.200 Imaging and localization studies

35.500 Sealed sources for diagnosis (specify device _____)

PART I – TRAINING AND EXPERIENCE
(Select one of the three methods below)

* Training and Experience, including board certification, must have been obtained within the 7 years preceding the date of application or the individual must have obtained related continuing education and experience since the required training and experience was completed. Provide dates, duration, and description of continuing education and experience related to the uses checked above.

1. Board Certification

a. Provide a copy of the board certification.

b. If using only 35.500 materials, stop here. If using 35.100 and 35.200 materials, skip to and complete Part II Preceptor Attestation.

2. Current 35.390 Authorized User Seeking Additional 35.290 Authorization

a. Authorized user on Materials License _____ meeting 10 CFR 35.390 or equivalent Agreement State requirements seeking authorization for 35.290.

b. Supervised Work Experience.
(If more than one supervising individual is necessary to document supervised work experience, provide multiple copies of this section.)

Description of Experience	Location of Experience/License or Permit Number of Facility	Clock Hours	Dates of Experience*
Eluting generator systems appropriate for the preparation of radioactive drugs for imaging and localization studies, measuring and testing the eluate for radionuclidic purity, and processing the eluate with reagent kits to prepare labeled radioactive drugs			

Total Hours of Experience:

Supervising Individual

License/Permit Number listing supervising individual as an authorized user

Supervisor meets the requirements below, or equivalent Agreement State requirements (check all that apply).

35.290

35.390 + generator experience in 32.290(c)(1)(ii)(G)

AUTHORIZED USER TRAINING AND EXPERIENCE AND PRECEPTOR ATTESTATION (continued)

3. Training and Experience for Proposed Authorized User

a. Classroom and Laboratory Training.

Description of Training	Location of Training	Clock Hours	Dates of Training*
Radiation physics and instrumentation	Frederick, MD	50	9/9/04-9/10/04 10/8/04-10/10/04
Radiation protection	Frederick, MD	25	9/9/04-9/10/04 10/8/04-10/10/04
Mathematics pertaining to the use and measurement of radioactivity	Frederick, MD	25	9/9/04-9/10/04 10/8/04-10/10/04
Chemistry of byproduct material for medical use <i>(not required for 35.590)</i>			
Radiation biology			
Total Hours of Training: 50			

b. Supervised Work Experience (completion of this table is not required for 35.590).
(If more than one supervising individual is necessary to document supervised work experience, provide multiple copies of this section.)

Supervised Work Experience		Total Hours of Experience:	
Description of Experience Must Include:	Location of Experience/License or Permit Number of Facility	Confirm	Dates of Experience*
Ordering, receiving, and unpacking radioactive materials safely and performing the related radiation surveys	George Washington University Medical Center, Washington, DC NRC Broad Scope License Number 08-30607-01	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	July 1997 - June 2000
Performing quality control procedures on instruments used to determine the activity of dosages and performing checks for proper operation of survey meters	(same as above)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	(same)

AUTHORIZED USER TRAINING AND EXPERIENCE AND PRECEPTOR ATTESTATION (continued)

3. Training and Experience for Proposed Authorized User (continued)

b. Supervised Work Experience. (continued)

Description of Experience Must Include:	Location of Experience/License or Permit Number of Facility	Confirm	Dates of Experience*
Calculating, measuring, and safely preparing patient or human research subject dosages	(same as above)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	(same)
Using administrative controls to prevent a medical event involving the use of unsealed byproduct material	(same as above)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	(same)
Using procedures to contain spilled byproduct material safely and using proper decontamination procedures	(same as above)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	(same)
Administering dosages of radioactive drugs to patients or human research subjects	(same as above)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	(same)
Eluting generator systems appropriate for the preparation of radioactive drugs for imaging and localization studies, measuring and testing the eluate for radionuclidic purity, and processing the eluate with reagent kits to prepare labeled radioactive drugs	(same as above)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	(same)

Supervising Individual

Alan G. Wasserman, MD

License/Permit Number listing supervising individual as an authorized user

NRC Broad Scope License # 08-30607-01

Supervisor meets the requirements below, or equivalent Agreement State requirements (*check one*).

- 35.190
 35.290
 35.390
 35.390 + generator experience in 35.290(c)(1)(ii)(G)

c. For 35.590 only, provide documentation of training on use of the device.

Device	Type of Training	Location and Dates

d. For 35.500 uses only, stop here. For 35.100 and 35.200 uses, skip to and complete Part II Preceptor Attestation.

AUTHORIZED USER TRAINING AND EXPERIENCE AND PRECEPTOR ATTESTATION (continued)

PART II – PRECEPTOR ATTESTATION

Note: This part must be completed by the individual's preceptor. The preceptor does not have to be the supervising individual as long as the preceptor provides, directs, or verifies training and experience required. If more than one preceptor is necessary to document experience, obtain a separate preceptor statement from each. (Not required to meet training requirements in 35.590)

First Section

Check one of the following for each use requested:

For 35.190

Board Certification

I attest that _____ has satisfactorily completed the requirements in
Name of Proposed Authorized User

10 CFR 35.190(a)(1) and has achieved a level of competency sufficient to function independently as an authorized user for the medical uses authorized under 10 CFR 35.100.

OR

Training and Experience

I attest that _____ has satisfactorily completed the 60 hours of training and
Name of Proposed Authorized User

experience, including a minimum of 8 hours of classroom and laboratory training, required by 10 CFR 35.190(c)(1), and has achieved a level of competency sufficient to function independently as an authorized user for the medical uses authorized under 10 CFR 35.100.

For 35.290

Board Certification

I attest that John Sunew, MD has satisfactorily completed the requirements in
Name of Proposed Authorized User

10 CFR 35.290(a)(1) and has achieved a level of competency sufficient to function independently as an authorized user for the medical uses authorized under 10 CFR 35.100 and 35.200.

OR

Training and Experience

I attest that _____ has satisfactorily completed the 700 hours of training
Name of Proposed Authorized User


and experience, including a minimum of 80 hours of classroom and laboratory training, required by 10 CFR 35.290(c)(1), and has achieved a level of competency sufficient to function independently as an authorized user for the medical uses authorized under 10 CFR 35.100 and 35.200.

Second Section

Complete the following for preceptor attestation and signature:

I meet the requirements below, or equivalent Agreement State requirements, as an authorized user for:

- 35.190
- 35.290
- 35.390
- 35.390 + generator experience

Name of Preceptor Alan G. Wasserman, MD	Signature 	Telephone Number 202-741-2302	Date 7/17/07
License/Permit Number/Facility Name NRC Broad Scope License Number 08-30607-01, George Washington University Hospital			

MEDICAL FACULTY ASSOCIATES

THE GEORGE WASHINGTON UNIVERSITY

June 29, 2005

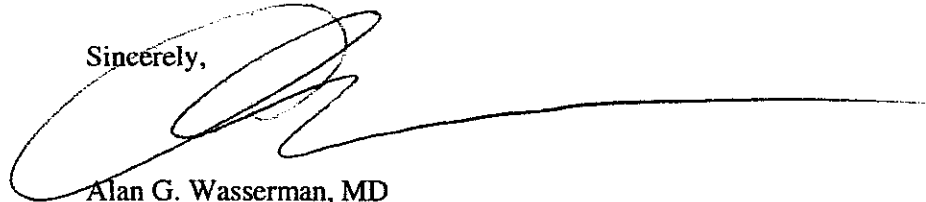
Certification Board of Nuclear Medicine
19562 Club House Road
Montgomery Village, MD 20886

To Whom It May Concern:

Dr. John Sunew has completed a training program in nuclear cardiology that meets the requirements as outlined in the ACC/ASNC COCATS Guidelines [revised 2000].

Dr. John Sunew is competent to independently function as an authorized user under NRC 10 CFR 35.290 uses.

Sincerely,



Alan G. Wasserman, MD
Eugene Meyer Professor of Medicine
Chairman, Department of Medicine
NRC Broad Scope License Number 08-30607-01

MEDICAL FACULTY ASSOCIATES

THE GEORGE WASHINGTON UNIVERSITY

October 7, 2004

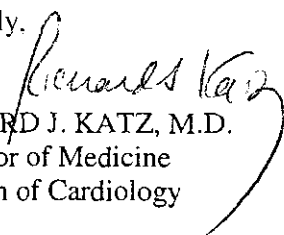
RE: John Young Sunew, M.D.

[REDACTED]

Dear Sir:

I am pleased to provide a letter verifying the training of my former cardiology fellow Dr. John Sunew in the subspecialty of nuclear cardiology. Dr. Sunew was a cardiology fellow at George Washington University from July 1997 to June 2000. During that period, he had several rotations in our noninvasive cardiology laboratory, which includes nuclear cardiology testing. Dr. Sunew performed 834 exercise stress nuclear studies during his training. These were supervised by myself and our nuclear radiologist. Dr. Sunew participated in our joint reading sessions for all of these studies. Additionally, he was able to correlate the cardiac catheterization information with many of the nuclear tests. As a part of the training, Dr. Sunew was supervised for over 700 hours in the area of nuclear cardiology. This includes exposure to our nuclear technicians who demonstrated handling preparation and the safety of the use of nuclear materials. Additionally, we provided him with education on radiation safety. By the end of his cardiology fellowship, Dr. Sunew was highly trained in the area of nuclear cardiology and has the experience to be an independent nuclear cardiac reader.

Sincerely,


RICHARD J. KATZ, M.D.
Professor of Medicine
Division of Cardiology

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Health & Radiological Seminars, Inc.

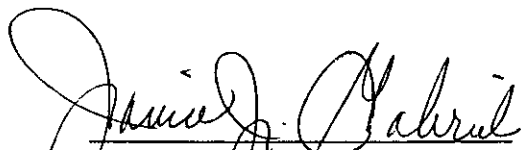
Hereby certifies that

JOHN SUNEW, MD

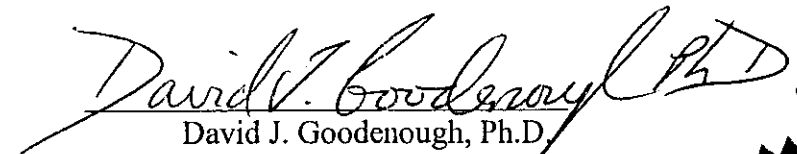
has successfully completed the 50 Hour Physician Training
Program in Basic Radioisotope Handling conducted
in accordance with the requirements of the
U.S. Nuclear Regulatory Commission (10 CFR 35).

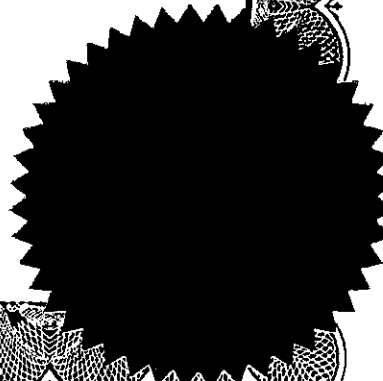
COURSE OUTLINE

Radiation Physics and Instrumentation
Mathematics pertaining to the use and measurement of radioactivity - 25 hours
Radiation Protection - 25 hours


Janice J. Gabriel
Program Director

October 10, 2004


David J. Goodenough, Ph.D.
Scientific Advisor



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

8/16/2007, and to inform you that the initial processing which includes an administrative review has been performed.

AMEND. 45-25548-d
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** 140972.
When calling to inquire about this action, please refer to this control number.
You may call us on (610) 337-5398, or 337-5260.