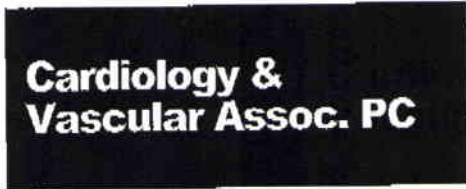


645 Barclay Circle
Rochester Hills MI 48307
248-844-1010 x 204 Phone
248-844-9089 Fax
248-396-5336 Cellular



Fax

To: US NRC	From: Joe Mueller, RSO
Fax: 630-829-9782	Pages: 4 + cover
Phone:	Date: 08/06/2008
Re: NRC Lic. # 21-3217701	CC:

Urgent For Review Please Comment Please Reply Please Recycle

This facsimile transmission contains information, which is confidential and/or privileged. This information is intended for use only by the addressee indicated above. If you are not the intended recipient, please be advised that any disclosure, copying, distribution, or use of the contents of this information is strictly prohibited, and that any misdirected or improperly received information must be returned to this company immediately. Your cooperation in phoning us of erroneous receipt is requested.

Thank you

Sincerely,

Joe Mueller, RSO

NRC FORM 313 (4-2008) 10 CFR 30, 32, 33, 34, 35, 36, 39, and 40	U.S. NUCLEAR REGULATORY COMMISSION	APPROVED BY OMB: NO. 3160-0120 EXPIRES: 10/31/2008 Estimated burden per response to comply with this mandatory collection request: 4.4 hours. Submittal of the application is necessary to determine that the applicant is qualified and that adequate procedures exist to protect the public health and safety. Send comments regarding burden estimate to the Records and FOIA/Privacy Services Branch (T-5 F53), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by internet e-mail to infocollects@nrc.gov , and to the Desk Officer, Office of Information and Regulatory Affairs, NEOB-10202, (3150-0120), Office of Management and Budget, Washington, DC 20503. If a means used to impose an information collection does not display a currently valid OMB control number, the NRC may not conduct or sponsor, and a person is not required to respond to, the information collection.
APPLICATION FOR MATERIALS LICENSE		

INSTRUCTIONS: SEE THE APPROPRIATE LICENSE APPLICATION GUIDE FOR DETAILED INSTRUCTIONS FOR COMPLETING APPLICATION. SEND TWO COPIES OF THE ENTIRE COMPLETED APPLICATION TO THE NRC OFFICE SPECIFIED BELOW.

APPLICATION FOR DISTRIBUTION OF EXEMPT PRODUCTS FILE APPLICATIONS WITH: DIVISION OF INDUSTRIAL AND MEDICAL NUCLEAR SAFETY OFFICE OF NUCLEAR MATERIALS SAFETY AND SAFEGUARDS U.S. NUCLEAR REGULATORY COMMISSION WASHINGTON, DC 20555-0001 ALL OTHER PERSONS FILE APPLICATIONS AS FOLLOWS: IF YOU ARE LOCATED IN: ALABAMA, CONNECTICUT, DELAWARE, DISTRICT OF COLUMBIA, FLORIDA, GEORGIA, KENTUCKY, MAINE, MARYLAND, MASSACHUSETTS, NEW HAMPSHIRE, NEW JERSEY, NEW YORK, NORTH CAROLINA, PENNSYLVANIA, PUERTO RICO, RHODE ISLAND, SOUTH CAROLINA, TENNESSEE, VERMONT, VIRGINIA, VIRGIN ISLANDS, OR WEST VIRGINIA, SEND APPLICATIONS TO: LICENSING ASSISTANCE TEAM DIVISION OF NUCLEAR MATERIALS SAFETY U.S. NUCLEAR REGULATORY COMMISSION, REGION I 475 ALLENDALE ROAD KING OF PRUSSIA, PA 19406-1415	IF YOU ARE LOCATED IN: ILLINOIS, INDIANA, IOWA, MICHIGAN, MINNESOTA, MISSOURI, OHIO, OR WISCONSIN, SEND APPLICATIONS TO: MATERIALS LICENSING BRANCH U.S. NUCLEAR REGULATORY COMMISSION, REGION III 2443 WARRENVILLE ROAD, SUITE 210 LISLE, IL 60832-4352 ALASKA, ARIZONA, ARKANSAS, CALIFORNIA, COLORADO, HAWAII, IDAHO, KANSAS, LOUISIANA, MISSISSIPPI, MONTANA, NEBRASKA, NEVADA, NEW MEXICO, NORTH DAKOTA, OKLAHOMA, OREGON, PACIFIC TRUST TERRITORIES, SOUTH DAKOTA, TEXAS, UTAH, WASHINGTON, OR WYOMING, SEND APPLICATIONS TO: NUCLEAR MATERIALS LICENSING BRANCH U.S. NUCLEAR REGULATORY COMMISSION, REGION IV 612 E. LAMAR BOULEVARD, SUITE 400 ARLINGTON, TX 76011-4126
---	--

PERSONS LOCATED IN AGREEMENT STATES SEND APPLICATIONS TO THE U.S. NUCLEAR REGULATORY COMMISSION ONLY IF THEY WISH TO POSSESS AND USE LICENSED MATERIAL IN STATES SUBJECT TO U.S. NUCLEAR REGULATORY COMMISSION JURISDICTIONS.

1. THIS IS AN APPLICATION FOR (Check appropriate item) <input type="checkbox"/> A. NEW LICENSE <input checked="" type="checkbox"/> B. AMENDMENT TO LICENSE NUMBER <u>21-32177-01</u> <input type="checkbox"/> C. RENEWAL OF LICENSE NUMBER _____	2. NAME AND MAILING ADDRESS OF APPLICANT (Include ZIP code) CARDIOLOGY AND VASCULAR ASSOCIATES 43344 Woodward Ave Suite 111 Bloomfield Hills, MI 48302
---	--

3. ADDRESS WHERE LICENSED MATERIAL WILL BE USED OR POSSESSED CARDIOLOGY AND VASCULAR ASSOCIATES 43344 Woodward Ave Suite 111 Bloomfield Hills, MI 48302	4. NAME OF PERSON TO BE CONTACTED ABOUT THIS APPLICATION Joesph Mueller, RSO TELEPHONE NUMBER <p style="text-align: center; font-weight: bold;">(248) 844-1010</p>
---	--

SUBMIT ITEMS 5 THROUGH 11 ON 8-1/2 X 11" PAPER. THE TYPE AND SCOPE OF INFORMATION TO BE PROVIDED IS DESCRIBED IN THE LICENSE APPLICATION GUIDE.

5. RADIOACTIVE MATERIAL a. Element and mass number, b. chemical and/or physical form; and c. maximum amount which will be possessed at any one time.	6. PURPOSE(S) FOR WHICH LICENSED MATERIAL WILL BE USED.
7. INDIVIDUAL(S) RESPONSIBLE FOR RADIATION SAFETY PROGRAM AND THEIR TRAINING EXPERIENCE.	8. TRAINING FOR INDIVIDUALS WORKING IN OR FREQUENTING RESTRICTED AREAS.
9. FACILITIES AND EQUIPMENT.	10. RADIATION SAFETY PROGRAM.
11. WASTE MANAGEMENT.	12. LICENSE FEES (See 10 CFR 170 and Section 170.31) FEE CATEGORY <u>7c</u> AMOUNT ENCLOSED \$ _____

13. CERTIFICATION. (Must be completed by applicant) THE APPLICANT UNDERSTANDS THAT ALL STATEMENTS AND REPRESENTATIONS MADE IN THIS APPLICATION ARE BINDING UPON THE APPLICANT.

 THE APPLICANT AND ANY OFFICIAL EXECUTING THIS CERTIFICATION ON BEHALF OF THE APPLICANT, NAMED IN ITEM 2, CERTIFY THAT THIS APPLICATION IS PREPARED IN CONFORMITY WITH TITLE 10, CODE OF FEDERAL REGULATIONS, PARTS 30, 32, 33, 34, 35, 36, 39, AND 40, AND THAT ALL INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE BEST OF THEIR KNOWLEDGE AND BELIEF.

 WARNING: 18 U.S.C. SECTION 1001 ACT OF JUNE 26, 1948 62 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 JURISDICTION.

CERTIFYING OFFICER - TYPED/PRINTED NAME AND TITLE	SIGNATURE	DATE
---	-----------	------

FOR NRC USE ONLY					
TYPE OF FEE	FEE LOG	FEE CATEGORY	AMOUNT RECEIVED	CHECK NUMBER	COMMENTS
			\$		
APPROVED BY				DATE	



Cardiology and Vascular Associates, P.C.

Russell Steinman, M.D., F.A.C.C.
 Rajendra Prasad, M.D.
 Kirit C. Patel, M.D., F.A.C.C.
 Divakar Pai, M.D., F.A.C.C.
 Joe H. Yun, M.D., F.A.C.C.
 Nishit Choksi, M.D., F.A.C.C.
 Abdul Hasan, M.D., F.A.C.C.
 Farouk Salehi, M.D., F.A.C.C.
 Sharath Chandra, M.D., F.A.C.C.
 Michele DeGregorio, M.D.
 Zakwan Mahjoub, M.D., F.A.C.C.
 Anil Goel, M.D.
 Patrick D. Poole, M.D., F.A.C.C.
 Randall Reher, M.D., F.A.C.C.
 www.cava.cc

August 6, 2008

UNITED STATES NUCLEAR REGULATORY COMMISSION
 Region III, Materials Licensing Section
 2443 Warrenville Road
 Suite 210
 Lisle, IL 60532-4352

Re: Amendment to License No. 21-32177-01

1695 W. 12 Mile Rd., Suite 245
 Berkley, MI 48072
 Phone (248) 582-1480
 Fax (248) 582-1484

43344 Woodward Ave.
 Bloomfield Hills, MI 48302
 Phone (248) 333-1170
 Fax (248) 333-1175

43097 Woodward Ave., Suite 202
 Bloomfield Hills, MI 48302
 Phone (248) 332-9432
 Fax (248) 332-9489

1261 S. Lapeer Road, Suite 101
 Lake Orion, MI 48360
 Phone (248) 693-9522
 Fax (248) 693-7523

645 Barclay Circle
 Rochester Hills, MI 48307
 Phone (248) 844-1010
 Fax (248) 844-9089

67200 Van Dyke, Suite 203
 Washington, MI 48095
 Phone (586) 752-7575
 Fax (586) 752-0740

4000 Highland Road, Suite 109
 Waterford, MI 48328
 Phone (248) 738-9500
 Fax (248) 738-9502

6770 Dixie Highway, Suite 103
 Clarkston, MI 48346
 Phone (248) 625-5550
 Fax (248) 922-1551

1. Please add Hanna K. Al-Makhamreh, M.D. as an authorized user. We have enclosed a copy of his Board Certification and the NRC 313A (AUD) form for your review. .

Thank you for you cooperation with this matter. If you have any question please contact Joseph Mueller, RSO, at (248) 844-1010 x204.

Sincerely,

Joseph Mueller
 Radiation Safety Officer
 Cardiology and Vascular Associates

Consultation
 Surgical Cardiac Clearance
 Stress Testing
 Nuclear Cardiology
 Heart Failure Clinic

Echocardiography
 Vascular Studies
 Cardiac Catheterization
 Peripheral Vascular Interventions

Interventional Cardiology
 Coronary Angioplasty
 Atherectomy - Rotational
 Directional and Extraction
 Coronary Stents

Arrhythmia Management
 Pacemakers
 Implantable Defibrillators
 Holter Monitoring
 Ablation

Heart Disease Prevention Center
 Lipid Management
 Nutrition Counseling
 Risk Factor

NRC FORM 313A (AUD) (10-2007)	U.S. NUCLEAR REGULATORY COMMISSION
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 Hanna K AL-Makhamreh, MD	State or Territory Where Licensed Michigan
---	--

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)

NRC FORM 313A (AUD)
(10-2007)

U.S. NUCLEAR REGULATORY COMMISSION

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)

By checking the boxes below, the preceptor is attesting that the individual has knowledge to fulfill the duties of the position sought and not attesting to the individual's "general clinical competency."

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

has satisfactorily completed the requirements in

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

has satisfactorily completed the 60 hours of training and

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

Hanna Al-Makhamreh MD
Name of Proposed Authorized User

has satisfactorily completed the requirements in

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

has satisfactorily completed the 700 hours of training

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 <i>ABHINAV RAINA</i>	Signature <i>Ase Raina</i>	Telephone Number <i>212-865-9890</i>	Date <i>6/20/08</i>
---	-------------------------------	---	------------------------

License/Permit Number/Facility Name
CONSULTANTS IN CARIOLOGY LIC# 21-26635-01

THE CERTIFICATION BOARD OF NUCLEAR CARDIOLOGY

Incorporated 1996

CERTIFIES THAT

Hanna Kamal Al-Makhamreh, 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

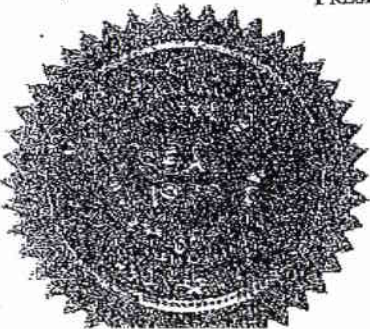
NUCLEAR CARDIOLOGY

FOR THE PERIOD 2005 THROUGH 2015

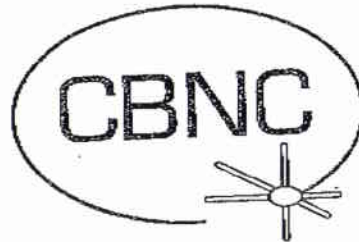
M. D. Cervera
PRESIDENT

J. A. Amighi
SECRETARY

Aug. 7. 2008 4:35PM



CERTIFICATE # 3148



OCTOBER 23, 2005