

TRANSMISSION VERIFICATION REPORT

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UNITED STATES
NUCLEAR REGULATORY COMMISSION
REGION III
2443 WARRENVILLE ROAD, SUITE 210
LISLE, ILLINOIS 60532-4352

TELEFAX TRANSMITTAL

DATE June 3, 2010

NUMBER OF PAGES 3

SEND TO Cristen Tinker, Office Manager

LOCATION Cardiac Specialists of St. Luke's

FAX NUMBER (314) 205-6150

VERIFY BY CALLING

FROM: Bill Reichhold
(Sender)

TELEPHONE NUMBER (630) 829-9839

FAX NUMBER (630) 515-1078

If you do not receive the complete fax transmittal, please contact the sender as soon as possible at the telephone number provided above.

MESSAGE As we discussed by telephone, the copy of the application that we received on June 2, 2010 showing the address change, was not signed and dated by Dr. Pearson. The accompanying document is a "clear" copy of the application that was signed and dated by Dr. Pearson. Please correct the address on the application that was signed and dated by Dr. Pearson. See

The following additional information is needed to review your request. As we discussed, please correct the address on the application that was signed and dated by Dr. Pearson. Thank you.

Please call me at 630-829-9839 if you have any questions.

In accordance with 10 CFR 2.390 of the NRC's "Rules of Practice," a copy of this facsimile and the attached documents will be available electronically for public inspection in the NRC Public Document Room or from the Publicly Available Records (PARS) component of NRC's document system (ADAMS). The NRC's document system is accessible from the NRC Web site at <http://www.nrc.gov/reading-rm/adams.html> (the Public Electronic Reading Room).

From the desk of:



Bill Reichhold

APPLICATION FOR MATERIALS LICENSE

Estimated burden per response to comply with this mandatory collection request 4.3 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 infocollections@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.

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:

IF YOU ARE LOCATED IN:

OFFICE OF FEDERAL & STATE MATERIALS AND ENVIRONMENTAL MANAGEMENT PROGRAMS
DIVISION OF MATERIALS SAFETY AND STATE AGREEMENTS
U.S. NUCLEAR REGULATORY COMMISSION
WASHINGTON, DC 20555-0001

ILLINOIS, INDIANA, IOWA, MICHIGAN, MINNESOTA, MISSOURI, OHIO, OR WISCONSIN SEND APPLICATIONS TO:

ALL OTHER PERSONS FILE APPLICATIONS AS FOLLOWS:

MATERIALS LICENSING BRANCH
U.S. NUCLEAR REGULATORY COMMISSION REGION III
2443 WARRENVILLE ROAD SUITE 210
LISLE IL 60532-4352

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:

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:

LICENSING ASSISTANCE TEAM
DIVISION OF NUCLEAR MATERIALS SAFETY
U.S. NUCLEAR REGULATORY COMMISSION, REGION I
475 ALLENDALE ROAD
KING OF PRUSSIA, PA 19408-1415

NUCLEAR MATERIALS LICENSING BRANCH
U.S. NUCLEAR REGULATORY COMMISSION, REGION IV
812 E LAMAR BOULEVARD, SUITE 400
ARLINGTON TX 78011-4125

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)

- A. NEW LICENSE Contunation of prior application
- B. AMENDMENT TO LICENSE NUMBER
- C. RENEWAL OF LICENSE NUMBER

2. NAME AND MAILING ADDRESS OF APPLICANT (include ZIP code)

Cardiac Specialists of St Lukes Hospital
232 South Woods Mill Rd., Ste 500/501 North
Chesterfield, Missouri 63017
Telephone: 314.205.6699 Fax 314.205.6150

3 ADDRESS WHERE LICENSED MATERIAL WILL BE USED OR POSSESSED

Cardiac Specialists of St Lukes Hospital
232 South Woods Mill Rd., Ste 500/501 North
Chesterfield, Missouri 63017
Telephone: 314.205.6699 Fax 314.205.6150

4 NAME OF PERSON TO BE CONTACTED ABOUT THIS APPLICATION

Sandra Nissen, NCS 303.541.0044
Kristin Tinker, 314.205.6501 (alternate)
TELEPHONE NUMBER
Administrator/Applicant Dr. A. Pearson, MD
314.205.6699

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

attached

6 PURPOSE(S) FOR WHICH LICENSED MATERIAL WILL BE USED

attached

7 INDIVIDUAL(S) RESPONSIBLE FOR RADIATION SAFETY PROGRAM AND THEIR TRAINING EXPERIENCE

attached

8 TRAINING FOR INDIVIDUALS WORKING IN OR FREQUENTING RESTRICTED AREAS

attached

9 FACILITIES AND EQUIPMENT

attached

10 RADIATION SAFETY PROGRAM

attached

11 WASTE MANAGEMENT

12 LICENSE FEES (See 10 CFR 170 and Section 170.31)

FEE CATEGORY AMOUNT ENCLOSED \$ prev. submitted

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 25, 1948 82 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

Anthony Pearson, MD

SIGNATURE

DATE

10.27.9

FOR NRC USE ONLY

TYPE OF FEE FEE LOG FEE CATEGORY AMOUNT RECEIVED CHECK NUMBER COMMENTS

APPROVED BY

DATE