



6-22-10

700 S. Main St.
Moscow, ID 83843
Phone: (208) 883-2228
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RECEIVED

JUL - 7 2010

DNMS

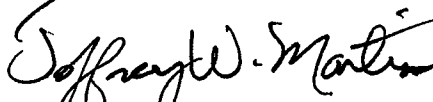
TO: Nuclear Regulatory Commission
Attn: Nuclear Materials Licensing Branch
Region IV
Arlington, Texas 76011

RE: Change in personnel.
License No# 11-27337-01
Docket No# 030-32281

This letter is to inform you of some changes we would like to make to our license.

1. Dr. Roy Romey is retiring and will no longer be our RSO. We have asked Dr Chris Reisenauer MD to assume his duties and he has graciously accepted pending your approval.
2. Please remove Dr Mark Bechtel MD from our license as he will be leaving for other opportunities.
3. Please add Dr Ben Gordon MD to our license as an authorized user. Necessary documentation is included.

Thank you
Jeff Martin CEO


Gritman Medical Center

573163

The American Board of Radiology

*Organized through the cooperation of the
American College of Radiology, the American Roentgen Ray Society,
the American Radium Society, the Radiological Society of North America,
the Section on Radiology of the American Medical Association,
the American Society for Therapeutic Radiology and Oncology, the Association of
University Radiologists, and American Association of Physicians in Medicine*

Hereby certifies that

Benjamin Hollis James Gordon, MD

*Has pursued an accepted course of graduate study
and clinical work, has met certain standards and qualifications and
has passed the examinations conducted under the authority of*

The American Board of Radiology

On this third day of June, 2008

*Thereby demonstrating to the satisfaction of the Board
that he is qualified to practice the specialty of*

Diagnostic Radiology

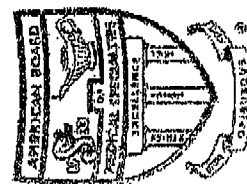
AM Eligible



H. Reed Spinnick, MD
President

Richard L. Morin
Secretary-Treasurer

Ray E. Smith
Executive Director



Valid through 2018

Certificate No. 57875

BETWEEN:

Accounts Receivable/Payable
and
Regional Licensing Branches

[FOR ARPB USE]
INFORMATION FROM LTS

Program Code: 02121
Status Code: Pending Amendment
Fee Category: 7C
Exp. Date:
Fee Comments:
Decom Fin Assur Req'd: N

License Fee Worksheet - License Fee Transmittal

A. REGION

1. APPLICATION ATTACHED

Applicant/Licensee: GRITMAN MEDICAL CENTER
Received Date: 07/19/2010
Docket Number: 3032281
Mail Control Number: 573163
License Number: 11-27337-01
Action Type: Amendment

2. FEE ATTACHED

Amount: _____
Check No.: _____

3. COMMENTS

Signed: _____

Date: _____

B. LICENSE FEE MANAGEMENT BRANCH (Check when milestone 03 is entered / /)

1. Fee Category and Amount: _____

2. Correct Fee Paid. Application may be processed for:

Amendment: _____

Renewal: _____

License: _____

3. OTHER _____

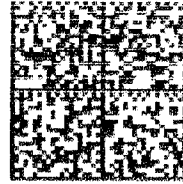
Signed: _____

Date: _____



GRITMAN
MEDICAL CENTER

700 South Main, Moscow, ID 83843-3046



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06/28/2010

Mailed From 83843

US POSTAGE

*Nuclear Regulatory Commission
Nuclear materials Licensing Branch
Region IV*

612 EAST LAMAR Rd Suite 400

Arlington Texas 76011-4125

76011#4121

