

A. LEWIS KATZOWITZ, D.O. . JOHN KAZMERSKI, D.O. . BRIAN LITCH, D.O. . LAKRY ROTHSTHIN, D.O. . BETTI BOWLING, M.D. . BLAIR DEYOUNG, D.O. . TIMOTHY LOGAN, D.O.

· June 23, 2011

UNITED STATES NUCLEAR REGULATORY COMMISSION Region III, Material Licensing Section 243 Warrenville Road Suite 210 Lisle, IL 60532-4352

Re: Amendment to license #21-23633-01

Please amend our license to add **Timothy David Logan**, **D.O.** as an authorized user for 10CFR35.200 to our license. We have enclosed a copy of his CBNC certificate.

Thank you for your cooperation with this matter. If you have any questions or require additional information please contact our physicist, Michelle Kritzman, at (734)662-3197.

Sincerely,

Administrative Officer

General Hospital Medical Associates, PC d/b/a Macomb Cardiovascular Group, PC

F. Kayet D

## Certification Board of Nuclear Cardiology

Certifies that

## Timothy David Logan, DO

HAVING MET THE REQUIREMENTS PRESCRIBED BY THIS BOARD
FOR PHYSICIANS TRAINED 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 2007 - 2017

President



Secretary



CERTIFICATE NUMBER: 5667



A. LEWIS KATZOWITZ, D.Q. . JOHN KAZMIÉRSKI, D.Q. . BRIAN LITCH, D.Q. . LARRY ROTHSTEIN, D.Q. . BETH BOWLING, M.D. . BLAIR DEYOUNG, D.Q. . TIMOTHY LOGAN, D.Q.

## FAX COVER LETTER

## Confidentiality Statement:

This message is intended only for the individual or entity to which it is addressed. It may contain privileged, confidential information. The recipient is prohibited from disclosing the information to any other party, and is required to destroy the information after the stated need has been fulfilled.

If you are not the intended recipient, please note that you are strictly prohibited from disseminating or distributing this information (other than to the intended recipient) or copying this information. If you have received this communication in error, please notify us immediately at 586-468-8500. Thank you.

1030 HARRINGTON 16151 NINETEEN MILE RD. SUITE 101
SUITE 301

MOUNT CLEMENS CLINTON TOWNSHIP

ıs •

MICHIGAN

48043

T:586.468.8500

00

FAX:586.468.7997

NSHIP • MICHIGAN • 48038 = T:586.263.5700