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**dms** IMAGING®

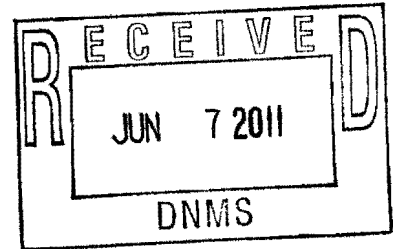
A member of the dms health group

Operations office: 109 S. Petro Avenue Sioux Falls, SD 57107 Phone: 605-330-9060 800-333-0365 Fax: 877-595-8108	Corporate office: 2101 N. University Drive Fargo, ND 58102 Phone: 701-237-9073 800-437-4628 Fax: 800-848-0990
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www.dmsgh.com

June 6, 2011

U.S. Nuclear Regulatory Commission  
Region IV  
611 Ryan Plaza Drive, Suite 400  
Arlington, Texas 76011-4005



Dear Sir or Madam:

Re: NRC Radioactive Material License #40-32477-01

At this time, DMS Health Technologies would like to add five new physicians to item 12.B. Under Material and Use please add 35.100 and 35.200. Included is documentation from a State Of Florida License to support this request.

Please add the following physicians:

Hemant D. Chheda, M.D.  
Marilyn F. Espino-Maya, M.D.  
Enrique J. Urrutia, M.D.  
David J. Germain, M.D.  
Leelakrishna Nallamshetty, M.D.

If you have any questions or need additional information regarding this request, please contact me at (605) 366-1293.

Sincerely:

*Michelle White, RSO*

Michelle White  
Radiation Safety Officer  
DMS Health Technologies

**STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
BUREAU OF RADIATION CONTROL**

**RADIOACTIVE MATERIALS LICENSE**

Pursuant to Chapter 404, Florida Statutes, and Chapter 64E-5, Florida Administrative Code (F.A.C.), and in reliance on statements and representations heretofore made by the licensee designated below, a license is hereby issued authorizing such licensee to receive, acquire, possess and transfer the radioactive material(s) designated below and to use such radioactive material(s) for the purpose(s) and at the place(s) designated below. This license is subject to all applicable rules, regulations and orders of the state of Florida, Department of Health now or hereafter in effect and to any conditions specified below.

<p style="text-align: center;">Licensee</p> <p>1. Name: <b>TOWER IMAGING, INC.</b></p>	<p>3. License Number: <b>2546-2</b></p> <p>is hereby amended in its entirety with reference to correspondence dated February 22, 2011.</p>
<p>2. Address: <b>3350 Bell-Shoals Road Brandon, FL 33511</b></p>	<p>4. Expiration Date: <b>2/28/2014</b></p> <p>5. Category: <b>5C</b></p>

6. Radioactive Material (element and mass number)	7. Chemical And/Or Physical Form	8. Maximum Quantity Licensee May Possess At Any One Time
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<p>A. Any radioactive material described in section 64E-5.626(1) and (2), F.A.C.</p>	<p>A. Any radiopharmaceutical for diagnostic use involving measurements of uptake, dilution or excretion as described in section 64E-5.626(1) and (2), F.A.C.</p>	<p>A. 500 millicuries</p>
<p>B. Any radioactive material described in section 64E-5.627(1) and (2), F.A.C.</p>	<p>B. Any radiopharmaceutical for diagnostic use involving imaging and localization as described in section 64E-5.627(1) and (2), F.A.C.</p>	<p>B. 2 curies</p>
<p>C. Any radioactive material described in section 64E-5.630(1), F.A.C.</p>	<p>C. Any radiopharmaceutical for therapeutic use as described in section 64E-5.630(1), F.A.C.</p>	<p>C. 5 curies</p>

9. Authorized Use

A. Any medical use described in section 64E-5.626(1) and (2), F.A.C.

B. Any medical use described in section 64E-5.627(1) and (2), F.A.C., except generators and reagent kits.

C. Any medical use described in section 64E-5.630(1), F.A.C.

License Number: 2546-2	<b>LICENSEE COPY</b>	Category: [5C]
Amendment No.: 5	Page 1 of 4 Page(s)	Expiration Date: 2/28/2014
Control Number: 20110311-0418		

STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
BUREAU OF RADIATION CONTROL

CONDITIONS

10. The authorized place of use is the licensee's facility located at the address in Item 2.
11. Failure to comply with the provisions of this license is a felony of the third degree pursuant to section 404.161, Florida Statutes. Also, violations may warrant an administrative fine of up to \$1,000.00 per violation per day, pursuant to section 404.162, Florida Statutes.
12. A. The following individuals are authorized for the materials and uses as indicated:

Authorized Material and Uses as Described in Items 6, 7, 8 and 9	Names
64E-5.626(1), (2), 64E-5.627(1), (2) and 64E-5.630(1)	Hemant D. Chheda, M.D. Marilyn F. Espino-Maya, M.D. A. Raymond Brooker, M.D. Shelly P. Baumann, M.D. Raul Otero, M.D. Jerry Poklepovic, M.D.
64E-5.626(1), (2), 64E-5.627(1), (2) and 64E-5.630(2), (3)	Stephen Stenzler, M.D. Enrique J. Urrutia, M.D. Carlos A. Rojas, M.D.
64E-5.626(1), (2), 64E-5.627(1), (2) and 64E-5.630(2)	Bharat U. Patel, M.D.
64E-5.626(1), (2), 64E-5.627(1), (2) and 64E-5.630(3)	Gregg Baran, M.D.
64E-5.626(1), (2) and 64E-5.627(1), (2)	Carlos Martinez, M.D. Miguel Del Toro, M.D. Bruce Zwiebel, M.D. Douglas Rodriguez, M.D.

STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
BUREAU OF RADIATION CONTROL

12. A. Continued:

Authorized Material and Uses as Described in Items 6, 7, 8, and 9	Names
64E-5.626(1), (2) and 64E-5.627(1), (2)	Rajendra Kedar, M.D. Scott R. Anderson, M.D. David Picca, M.D. Ajay Pancholy, M.D. Robert Andrew Zamore, M.D. Jeffery A. Gage, M.D. David J. Germain, M.D. Neelesh Prakash, M.D. Leelakrishna Nallamshetty, M.D. Todd Kumm, M.D.
64E-5.626(1) and 64E-5.627(1)	Nisha Rao, M.D. John R. Gaughen, Jr., M.D. JoAnn M. Gierbolini, M.D.

B. The radiation safety officer is Enrique J. Urrutia, M.D.

C. Radiologic technologists who use and administer radioactive materials or perform brachytherapy or teletherapy procedures under the general supervision of an authorized user shall hold a valid certificate as required by Chapter 468, F.S.

13. Radioactive material transported on public thoroughfares shall be packaged, prepared for shipment, and transported in accordance with Title 49, Code of Federal Regulations and Chapter 64E-5, F.A.C.

14. Sealed sources containing licensed material shall not be opened.

15. The licensee shall not authorize release from confinement for medical care any patient administered a radiopharmaceutical until:

A. The dose rate is less than 5 millirem (50 microsieverts) per hour at a distance of 1 meter; or

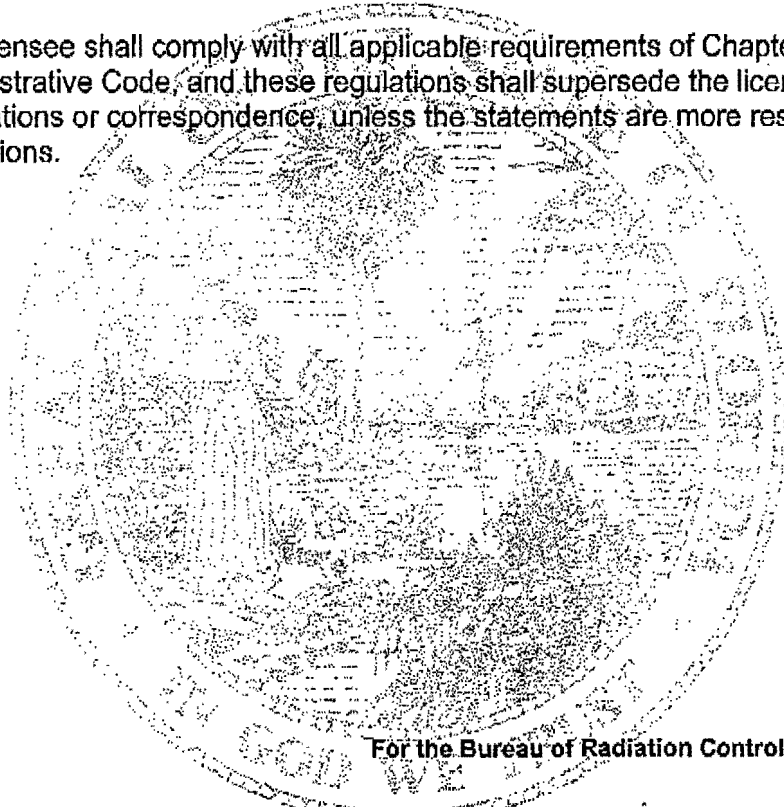
B. The amount of radioactive material in the patient is less than 30 millicuries.

16. Any therapeutic dose of iodine 131 shall be received in capsule form only.

17. The licensee shall implement the quality management program (QMP) as stated in Condition 18 and section 64E-5.611, F.A.C.

**STATE OF FLORIDA**  
**DEPARTMENT OF HEALTH**  
**BUREAU OF RADIATION CONTROL**

18. A. Except as specifically provided otherwise by this license, the licensee shall possess and use licensed material described in Items 6, 7, 8, and 9 of this license in accordance with statements, representations and procedures contained in the licensee's application dated October 20, 2008, signed by Bruce Zwiebel, M.D., and correspondence dated: December 31, 2008 (Appx. I & T), signed by Bruce Zweibel, M.D., Director; and April 7, 2009 (delegation of legal authority – Enrique Urrutia, M.D. and Bruce Zwiebel, M.D.), signed by Larry Smith, Chief Executive Officer.
- B. The licensee shall comply with all applicable requirements of Chapter 64E-5, Florida Administrative Code, and these regulations shall supersede the licensee's statements in applications or correspondence, unless the statements are more restrictive than the regulations.



For the Bureau of Radiation Control:

*Caleb Smith*

Issuance Date: MAR 24 2011

**Caleb Smith**  
**Environmental Specialist II**  
**4052 Bald Cypress Way – Bin C21**  
**Tallahassee, FL 32399-1741**  
**(850) 245-4545**

A party whose substantial interest is affected by this order may petition for an administrative hearing pursuant to sections 120.569 and 120.57, Florida Statutes. Such proceedings are governed by Rule 28-106, Florida Administrative Code. A petition for administrative hearing must be in writing and must be received by the Agency Clerk for the Department, within twenty-one (21) days from the receipt of this order. The address of the Agency Clerk is: Agency Clerk, 4052 Bald Cypress Way, BIN # A02, Tallahassee, Florida 32399-1703. The Agency Clerk's facsimile number is 850-410-1448. A copy of the petition should also be sent to: Bureau Chief, Bureau of Radiation Control, 4052 Bald Cypress Way, BIN # C21, Tallahassee, FL 32399-1741. The Bureau Chief's facsimile number is 850-487-0435. Mediation is not available as an alternative remedy. Your failure to submit a petition for hearing within 21 days from receipt of this order will constitute a waiver of your right to an administrative hearing, and this order shall become a "final order." Should this order become a final order, a party who is adversely affected by it is entitled to judicial review pursuant to Section 120.68, Florida Statutes. Review proceedings are governed by the Florida Rules of Appellate Procedure. Such proceedings may be commenced by filing one copy of a Notice of Appeal with the Agency Clerk of the Department of Health and a second copy, accompanied by the filing fees required by law, with the Court of Appeal in the appropriate District Court. The notice must be filed within 30 days of rendition of the final order.

License Number: 2546-2  
 Amendment No.: 5  
 Control Number: 20110211 0418

**LICENSEE COPY**

Category: [5C]

JUN 21 2011

DATE

This is to acknowledge the receipt of your letter/application dated 6/21/11, and to inform you that the initial processing, which includes an administrative review, has been performed.

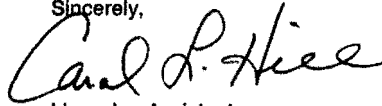
- There were no administrative omissions. Your application will be assigned to a technical reviewer. Please note that the technical review may identify additional omissions or require additional information.
- Please provide to this office within 30 days of your receipt of this card:

The action you requested is normally processed within 90 days.

- 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** 575380.  
When calling to inquire about this action, please refer to this mail control number.  
You may call me at 817-860-8103.

Sincerely,



Licensing Assistant

BETWEEN:

Accounts Receivable/Payable  
and  
Regional Licensing Branches

[ FOR ARPB USE ]  
INFORMATION FROM LTS ...

Program Code: 02220  
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: DMS HEALTH TECHNOLOGIES  
Received Date: 06/07/2011  
Docket Number: 3036404  
Mail Control Number: 575380  
License Number: 40-32477-01  
Action Type: Amendment

##### 2. FEE ATTACHED

Amount: \_\_\_\_\_  
Check No.: \_\_\_\_\_

##### 3. COMMENTS

Signed: Carol L. Heie  
Date: 6/21/11

#### 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: \_\_\_\_\_

# Terms And Conditions

**Definitions** On this Airbill, "we," "our," "us," and "FedEx" refer to Federal Express Corporation, its employees, and agents. "You" and "your" refer to the sender, its employees, and agents.

**Agreement To Terms** By giving us your package to deliver, you agree to all the terms on this Airbill and in the current FedEx Service Guide, which is available upon request. You also agree to those terms on behalf of any third party with an interest in the package. If there is a conflict between the current FedEx Service Guide and this Airbill, the current FedEx Service Guide will control. No one is authorized to change the terms of our Agreement.

**Responsibility For Packaging And Completing Airbill** You are responsible for adequately packaging your goods and properly filling out this Airbill. If you omit the number of packages and/or weight per package, our billing will be based on our best estimate of the number of packages we received and/or an estimated "retail" weight per package as determined by us.

**Responsibility For Payment** Even if you give us different payment instructions, you will always be primarily responsible for all delivery costs, as well as any cost we incur in either returning your package to you or warehousing it pending disposition.

**Limitations On Our Liability And Liabilities That Assumer**

- Our liability in connection with this shipment is limited to the lesser of your actual damages or \$100, unless you declare a higher value, pay an additional charge, and document your actual loss in a timely manner. You may pay an additional charge for each additional \$100 of declared value. The declared value does not constitute, nor do we provide, cargo liability insurance.

- In any event, we will not be liable for any damage, whether direct, incidental, special, or consequential, in excess of the declared value of a shipment, whether or not FedEx had knowledge that such damages might be incurred, including but not limited to loss of income or profits.

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- value, in v

- is \$1,000.

- Items of extr

- such items as artwork, jewelry, furs, precious metals, negotiable instruments, and other items listed in the current FedEx Service Guide.

- You may send more than one package on this Airbill and fill in the total declared value for all packages, not to exceed the \$500, \$1,000, or \$50,000 per package limit described above. [Example: 5 packages can have a total declared value of up to \$250,000.] In that case, our liability is limited to the actual value of the package(s) lost or damaged, but may not exceed the maximum allowable declared value(s) or the total declared value, whichever is less. You are responsible for proving the actual loss or damage.

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 JUN 7 2011  
 TX-US  
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**Air Transportation Tax Included** A federal excise tax when required by the Internal Revenue Code on the air transportation portion of this service, if any, is paid by us.

**Money-Back Guarantee** In the event of untimely delivery, FedEx will, at your request and with some limitations, refund or credit all transportation charges. See the current FedEx Service Guide for more information.



EXPRESS

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8736 0109 4872

0200

Form 10 No.

FedEx Retrieval Copy

**From** Date 6/6/11 Sender's FedEx Account Number 121152059

Sender's Name Michelle White Phone 605 266-1793

Company Dns Health Technologies

Address 100 S. Parko Ave.

City Sioux Falls State SD ZIP 57107

**2 Your Internal Billing Reference**

**To** Recipient's Name Region IV

Company U.S. Nuclear Regulatory Commission

Address 611 Ryan Plaza Drive, Suite 1000

City Amriton State IX ZIP 96011-4205



8736 0109 4872

**4a Express Package Service**  **01** FedEx Priority Overnight  **05** FedEx Standard Overnight  **06** FedEx First Overnight

**03** FedEx 2Day  **20** FedEx Express Saver

**70** FedEx 1Day Freight  **83** FedEx 3Day Freight

**80** FedEx 2Day Freight  **06** FedEx Pak\* Envelope\*

**03** SATURDAY DELIVERY

**6** Special Handling and Delivery Signature Options

**10** Direct Signature  **34** Indirect Signature

**04** No Signature Required  **09** Dry Ice  **19** Cargot Aircraft Only

**04** No Signature Required  **09** Dry Ice  **19** Cargot Aircraft Only

**7** Payment Bill to:  Shipper  Recipient  Third Party  Credit Card  Cash/Check

Total Packages 1 Total Weight 1.0 lbs

**606**