



CONVERSATION RECORD

4/2/15

NAME OF PERSON(S) CONTACTED OR IN CONTACT WITH YOU

Vincent McCormick

DATE OF CONTACT

4/2/15

TYPE OF CONVERSATION

E-MAIL

TELEPHONE

INCOMING

OUTGOING

E-MAIL ADDRESS

v_mccormick@comcast.net

TELEPHONE NUMBER

(734) 395-9323

ORGANIZATION

Salahi Heart Clinic

DOCKET NUMBER(S)

030-37602

LICENSE NUMBER(S)

21-32672-01

CONTROL NUMBER(S)

586313

SUBJECT

Our review of your license amendment request dated March 14, 2015

SUMMARY

We have reviewed your request for termination of your license and find that we are unable to continue this action until we have received additional information outlined below. Include your response in a signed and dated cover letter. The letter can either be faxed to 630-515-1259 or it can be scanned into a pdf and emailed to the email address below.

If you have any questions, you can reach me at (630) 829-9862 or vered.shaffer@nrc.gov.

As discussed, we expect to receive your written response on or before April 17, 2015.

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ACTION REQUIRED (IF ANY)

SUMMARY and ACTION REQUIRED

Please provide a cover letter with the header of Salahi Heart Clinic facility. In this cover letter please have Dr. Salahi confirm that he is terminating his license and is transferring his sealed sources and his Washington, MI facility to Dr. Shahbandar, license #21-35169-01.

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NAME OF PERSON DOCUMENTING CONVERSATION

Vered A. Shaffer, Materials Licensing Branch, Region III Office, 2443 Warrenville Road, Suite 210, Lisle, Illinois 60532

SIGNATURE