

Jerry D. Kennett, MD MACC FACP FSCAI
 Dan L. Pierce, MD FACC
 John B. Baird, MD FACC
 James T. Elliott, MD FACC
 John K. Boyer, MD FACC
 James E. K. Fairclamb, MD FACC
 Henry C. Marquez, MD FACC
 Trung H. Tran, MD FACC
 Michael A. Brown, MD MS
 Mozow Y. Zuidema, MD PhD FACC
 Charles H. Tillman, MD FACP FACC
 Steven M. Mackay, DO FACC FSCAI
 Sudhi Tyagi, MD FACC



Missouri Heart Center

Missouri Cardiovascular Specialists

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Missouri Cardiovascular Specialists, LLP d/b/a Missouri Heart Center

NRC license #: 24-35185-01

1605 E. Broadway, Suite 300

Columbia, MO 65201

U.S. Nuclear Regulatory Commission Region III

Nuclear Licensing Section

2056 Westings AVE, Suite 400

Naperville, IL 60563-2657

Subject: Request for Transfer of RSO and addition of authorized user: Dr. Mozow Y. Zuidema, MD, PhD, FACC.

Date: 9/15/2025

Dear Sir/Madam,

I am writing to formally request the authorization of Dr. Mozow Y. Zuidema, MD, PhD, FACC as an Authorized User under 10 CFR 35.100 and 35.200. Dr. Zuidema has completed 80 hours of classroom and laboratory training and 700 hours of supervised clinical experience, and meets the qualifications for the requested uses as outlined in the NRC Form 313A (AUD).

Name:	NPI	Missouri license Number:	Contact Info:
Dr. Mozow Y. Zuidema, MD, PhD, FACC	1639376320	- MO License # 2007018559 - MO License # 2014007090	Office Address: 1605 E. Broadway Suite 300, Columbia, MO 65201 Office: 573-256-7700 Email: mzuidema@moheartcenter.com

Dr. Zuidema has demonstrated proficiency in the following areas:

- Imaging and localization studies (35.200)

We are also requesting the transfer of Radiation Safety Officer from Dr. John Baird, MD to Dr. Mozow Zuidema, MD, PhD, FACC for Missouri Cardiovascular Specialists, LLP d/b/a Missouri Heart Center, NRC license #: 24-35185-01

Attached to this letter, you will find the completed NRC Form 313A (AUD) along with NRC form 313A. We kindly request your review and approval of both application requests. Should you require any additional information or documentation, please contact me at 660-395-8914 or aftonm@moheartcenter.com. Thank you for your attention to this matter.

Sincerely,

Afton Miller, MHA, RDCS, RVT, RT (R)

Director of Outreach Services

Afton Miller, MHA, RDCS, RVT, RT (R)

**AUTHORIZED USER TRAINING, EXPERIENCE AND
PRECEPTOR ATTESTATION**
(for uses defined under 35.100, 35.200, and 35.500)
[10 CFR 35.57, 35.190, 35.290, and 35.590]

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 FOIA, Library, and Information Collections Branch (T-6 A10M), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by email to Infocollections.Resource@nrc.gov, and the OMB Reviewer at: OMB Office of Information and Regulatory Affairs, (3150-0120), Attn: Desk Officer for the Nuclear Regulatory Commission, 725 17th Street NW, Washington, DC 20503; email: oirs_submission@omb.eop.gov. The NRC may not conduct or sponsor, and a person is not required to respond to, a collection of information unless the document requesting or requiring the collection displays a currently valid OMB control number.

Name of Proposed Authorized User

Mozow Y., Zuidema, MD

State or Territory Where Licensed

Missouri

Requested Authorization(s) (check all that apply)

- ☐ 35.100 Uptake, dilution, and excretion studies ☒ 35.200 Imaging and localization studies
☐ 35.500 Sealed sources for diagnosis (specify device) _____

PART I -- TRAINING AND EXPERIENCE

(Select one of the three methods below)

* Training and Experience, including board certification, must have been obtained within the 7 years preceding the date of application or the individual must have obtained related continuing education and experience since the required training and experience was completed. Provide dates, duration, and description of continuing education and experience related to the uses checked above.

☐ **1. Board Certification**

- a. Provide a copy of the board certification.
- b. For a board certification issued on or before October 24, 2005 that is listed in 10 CFR 35.57(b)(2)(i), provide the following:
- (i) Documentation that the individual performed each use checked above on or before October 24, 2005.
 - (ii) Dates, duration, and description of continuing education and experience within the past seven years for each use checked above.
- c. Stop here.

☐ **2. Current 35.390 Authorized User Seeking Additional 35.290 Authorization**

- a. Authorized user on Materials License _____ meeting 10 CFR 35.390, 10 CFR 35.57 for 35.300 uses, or equivalent Agreement State requirements seeking authorization for 35.290.
- b. Supervised Work Experience.

(If more than one supervising individual is necessary to document supervised work experience, provide multiple copies of this section.)

Description of Experience	Location of Experience/License or Permit Number of Facility	Clock Hours	Dates of Experience*
Eluting generator systems appropriate for the preparation of radioactive drugs for imaging and localization studies, measuring and testing the eluate for radionuclidic purity, and processing the eluate with reagent kits to prepare labeled radioactive drugs			
Total Hours of Experience:			
Supervising Individual		License/Permit Number listing supervising individual as an authorized user or authorized nuclear pharmacist	

Supervisor meets the requirements below, or equivalent Agreement State requirements (check all that apply).

- ☐ 35.290 ☐ 35.390 + generator experience in 32.290(c)(1)(ii)(G) ☐ 35.55 ☐ 35.57 for 35.200 uses

c. If board certified, provide a copy of the certificate and stop here. If not board certified, skip to and complete Part II Preceptor Attestation.

AUTHORIZED USER TRAINING, EXPERIENCE AND PRECEPTOR ATTESTATION
(for uses defined under 35.100, 35.200, and 35.500)
[10 CFR 35.57, 35.190, 35.290, and 35.590](continued)☐ **3. Training and Experience for Proposed Authorized User**

a. Classroom and Laboratory Training.

Description of Training	Location of Training	Clock Hours	Dates of Training*
Radiation physics and instrumentation	Harry S. Truman Memorial Veterans Hospital (HSTMVH) and University of Missouri- Columbia (UMO-C) Cardiology fellowship	20	Jan-Mar 2013, Aug-Nov 2013, Feb-Mar 2014
Radiation protection	HSTMVH and UMO-C Lectures	25	Jan-Mar 2013, Aug-Nov 2013, Feb-Mar 2014
Mathematics pertaining to the use and measurement of radioactivity	UMO-C Lectures	10	July 1-2011- June 30, 2012
Chemistry of byproduct material for medical use (<i>not required for 35.590</i>)	UMO-C Lectures	15	July 1-2011- June 30, 2012
Radiation biology	UMO-C Lectures	10	July 1-2011- June 30, 2012
Total Hours of Training: 80			

b. Supervised Work Experience (completion of this table is not required for 35.590).
(If more than one supervising individual is necessary to document supervised work experience, provide multiple copies of this section.)

Supervised Work Experience		Total Hours of Experience:	700
Description of Experience Must Include:	Location of Experience/License or Permit Number of Facility	Confirm	Dates of Experience*
Ordering, receiving, and unpacking radioactive materials safely and performing the related radiation surveys	Missouri Heart Center	☒ Yes ☐ No	Jan 2021-2024
Performing quality control procedures on instruments used to determine the activity of dosages and performing checks for proper operation of survey meters	Missouri Heart Center, Mid America Isotopes, Ashland MO	☒ Yes ☐ No	Jan 2021-2024

AUTHORIZED USER TRAINING, EXPERIENCE AND PRECEPTOR ATTESTATION
(for uses defined under 35.100, 35.200, and 35.500)
[10 CFR 35.57, 35.190, 35.290, and 35.590](continued)

3. Training and Experience for Proposed Authorized User (continued)

b. Supervised Work Experience. (continued)

Description of Experience Must Include:	Location of Experience/License or Permit Number of Facility	Confirm	Dates of Experience*
Calculating, measuring, and safely preparing patient or human research subject dosages	Missouri Heart Center, Mid America Isotopes, Ashland MO	☒ Yes ☐ No	Jan 2013-Mar 2014; Jan 2021-2024
Using administrative controls to prevent a medical event involving the use of unsealed byproduct material	Missouri Heart Center	☒ Yes ☐ No	Jan 2021-2024
Using procedures to contain spilled byproduct material safely and using proper decontamination procedures	Missouri Heart Center	☒ Yes ☐ No	Jan 2021-2024
Administering dosages of radioactive drugs to patients or human research subjects	HSTMVH, Missouri Heart Center	☒ Yes ☐ No	Jan 2013-Mar 2014; Jan 2021-2024
Eluting generator systems appropriate for the preparation of radioactive drugs for imaging and localization studies, measuring and testing the eluate for radionuclidic purity, and processing the eluate with reagent kits to prepare labeled radioactive drugs	Missouri Heart Center, Mid America Isotopes, Ashland MO	☒ Yes ☐ No*	Jan 2021-2024
Supervising Individual John B. Baird, MD		License/Permit Number listing supervising individual as an authorized user or an authorized nuclear pharmacist for generator training 24-35185-01	
Supervisor meets the requirements below, or equivalent Agreement State requirements (<i>check one</i>). ☐ 35.190 ☒ 35.290 ☐ 35.390 ☐ 35.390 + generator experience in 35.290(c)(1)(ii)(G) ☐ 35.55 ☐ 35.57 for 35.200 uses *Not required for 10 CFR 35.100 use.			

c. For 35.590 only, provide documentation of training on use of the device.

Device	Type of Training	Location and Dates

d. For 35.500 uses only, stop here. For 35.100 and 35.200 uses, skip to and complete Part II Preceptor Attestation.

AUTHORIZED USER TRAINING, EXPERIENCE AND PRECEPTOR ATTESTATION
(for uses defined under 35.100, 35.200, and 35.500)
[10 CFR 35.57, 35.190, 35.290, and 35.590](continued)

PART II – PRECEPTOR ATTESTATION

Note: This part must be completed by the individual's preceptor. The preceptor does not have to be the supervising individual as long as the preceptor provides, directs, or verifies training and experience required. If more than one preceptor is necessary to document experience, obtain a separate preceptor statement from each. (Not required to meet training requirements in 35.590)

By checking the boxes below, the preceptor is not attesting to the individual's "general clinical competency."

First Section

Check one of the following for each use requested:

For 35.190

☐ I attest that _____ has satisfactorily completed the 60 hours of training and
Name of Proposed Authorized User

experience, including a minimum of 8 hours of classroom and laboratory training, required by 10 CFR 35.190(c)(1), and is able to independently fulfill the radiation safety-related duties as an authorized user for the medical uses authorized under 10 CFR 35.100.

For 35.290

☒ I attest that Mozow Y. Zuidema, MD has satisfactorily completed the 700 hours of training
Name of Proposed Authorized User

and experience, including a minimum of 80 hours of classroom and laboratory training, required by 10 CFR 35.290(c)(1), and is able to independently fulfill the radiation safety-related duties as an authorized user for the medical uses under 10 CFR 35.100 and 35.200.

Second Section

Complete one of the following for attestation and signature:

☒ Authorized User:

☒ I meet the requirements below, or equivalent Agreement State requirements, as an authorized user for:

☐ 35.190 ☒ 35.290 ☐ 35.390 ☐ 35.390 + generator experience ☐ 35.57 for 35.200 uses

OR

☐ Residency Program Director:

☐ I affirm that the attestation represents the consensus of the residency program faculty where at least one faculty member is an authorized user who meets the requirements below or equivalent Agreement State requirements for:

☐ 35.190 ☐ 35.290 ☐ 35.390 ☐ 35.390 + generator experience ☐ 35.57 for 35.200 uses

☐ I affirm that this facility member concurs with the attestation I am providing as program director.

☐ I affirm that the residency training program is approved by the:

☐ Residency Review Committee of the Accreditation Council for Graduate Medical Education

☐ Royal College of Physicians and Surgeons of Canada

☐ Council on Post-Graduate Training of the American Osteopathic Association

☐ I affirm that the residency training program includes training and experience specified in:

☐ 35.190 ☐ 35.290

Name of Facility: Missouri Cardiovascular Specialists, LLP d/b/a Missouri Heart Center		License/Permit Number: 24-35185-01	
Name of Preceptor or Residency Program Director (Typed or Printed) John B. Baird, MD		Telephone Number (573) 256-7700	Date 9/12/2025
Signature 			

**RADIATION SAFETY OFFICER OR
ASSOCIATE RADIATION SAFETY OFFICER
TRAINING, EXPERIENCE AND PRECEPTOR ATTESTATION**
[10 CFR 35.57, 35.50]

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 FOIA, Library, and Information Collections Branch (T-6 A10M), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by email to Infocollections.Resource@nrc.gov, and the OMB Reviewer at: OMB Office of Information and Regulatory Affairs, (3150-0120), Attn: Desk Officer for the Nuclear Regulatory Commission, 725 17th Street NW, Washington, DC 20503; email: omb_submission@omb.eop.gov. The NRC may not conduct or sponsor, and a person is not required to respond to, a collection of information unless the document requesting or requiring the collection displays a currently valid OMB control number.

Name of Individual

☒ RSO☐ ARSO

Mozow Y. Zuidema, MD

Requested Authorization(s) *The license authorizes the following medical uses (check all that apply):*

- ☐ 35.100 ☒ 35.200 ☐ 35.300 ☐ 35.400 ☐ 35.500 ☐ 35.600 (remote afterloader)
☐ 35.600 (teletherapy) ☐ 35.600 (gamma stereotactic radiosurgery) ☐ 35.1000 (_____)

PART I -- TRAINING AND EXPERIENCE
(Select one of the five methods below)

*Training and Experience, including board certification, must have been obtained within the 7 years preceding the date of application or the individual must have obtained related continuing education and experience since the required training and experience was completed. Provide dates, duration, and description of continuing education and experience related to the uses checked above.

☐ **1. Board Certification**

- Provide a copy of the board certification.
- If the board certification process has been recognized by the Commission or an Agreement State under 10 CFR 35.50;
 - Go to the table in 5c and describe training provider and dates of training for each type of use for which authorization is sought.
 - Stop here
- If the board certification was issued on or before October 24, 2005 and is listed in 10 CFR 35.57 (a)(2);
 - Provide documentation demonstrating that the individual was using the requested materials and uses on or before October 24, 2005;
 - Stop here

OR☐ **2. Current Radiation Safety Officer (RSO) or Associate Radiation Safety Officer (ARSO) Seeking Authorization to Be Recognized as a RSO or ARSO for the Additional Medical Uses Checked Above**

- Use the table in section 5.c. to describe training in radiation safety, regulatory issues, and emergency procedures for the additional types of medical use for which recognition as RSO or ARSO is sought.
- If board certified, provide a copy of the certificate and stop here.
- If not board certified and not listed on a medical use license as an RSO before January 14, 2019, skip to and complete Part II Preceptor Attestation.

OR☐ **3. Authorized User (AU), Authorized Medical Physicist (AMP), or Authorized Nuclear Pharmacist (ANP) identified on a license or permit in accordance with 10 CFR 35.50 (c)(2)**

- Provide license number.
- Use the table in section 5.c. to describe training in radiation safety, regulatory issues, and emergency procedures for all types of medical use on the license.
- Stop here.

OR

**RADIATION SAFETY OFFICER OR
ASSOCIATE RADIATION SAFETY OFFICER
TRAINING, EXPERIENCE AND PRECEPTOR ATTESTATION [10 CFR 35.57, 35.50] (continued)**

☐ **4. Individuals applying simultaneously to be the RSO and AU on a new license**

- ☐ a. Documentation of training and experience to be a new AU is attached
- ☐ b. The new license application is attached.
- c. Stop here.

OR

☒ **5. Structured Educational Program for Proposed RSO or ARSO**

a. Classroom and Laboratory Training

Description of Training	Location of Training	Clock Hours	Dates of Training*
Radiation physics and instrumentation	Harry S. Truman Memorial Veterans Hospital (HSTMVH) and University of Missouri- Columbia (UMO-C) Cardiology Fellowship lectures	20	Jan-Mar 2013 Aug-Nov 2013 Feb-Mar 2014
Radiation protection	HSTMVH and UMO-C lectures	25	Jan-Mar 2013 Aug-Nov 2013 Feb-Mar 2014
Mathematics pertaining to the use and measurement of radioactivity	UMO-C lectures	10	July 1 2011-June 30, 2012
Radiation biology	UMO-C lectures	10	July 1 2011-June 30, 2012
Radiation dosimetry	UMO-C lectures	15	July 1 2011-June 30, 2012
Total Hours of Training:		80	

**RADIATION SAFETY OFFICER OR
ASSOCIATE RADIATION SAFETY OFFICER
TRAINING, EXPERIENCE AND PRECEPTOR ATTESTATION [10 CFR 35.57, 35.50] (continued)**

5. Structured Educational Program for Proposed RSO or ARSO (continued)**b. Supervised Radiation Safety Experience**

(If more than one supervising individual is necessary to document supervised work experience, provide multiple copies of this section.)

Description of Experience	Location of Training/ License or Permit Number of Facility	Dates of Training*
Shipping, receiving, and performing related radiation surveys	Missouri Heart Center	Jan 2021-2024
Using and performing checks for proper operation of instruments used to determine the activity of dosages, survey meters, and instruments used to measure radionuclides	Mid America Isotopes, Ashland, MO Missouri Heart Center	Jan 2021-2024
Securing and controlling byproduct material	Missouri Heart Center	Jan 2021-2024
Using administrative controls to avoid mistakes in administration of byproduct material	Missouri Heart Center	Jan 2021-2024
Using procedures to prevent or minimize radioactive contamination and using proper decontamination procedures	Missouri Heart Center	Jan 2021-2024
Using emergency procedures to control byproduct material	Missouri Heart Center	Jan 2021-2024
Disposing of byproduct material	Missouri Heart Center	Jan 2021-2024
Licensed Material Used (e.g., 35.100, 35.200, etc.)+ 35.200	Mid America Isotopes, Ashland, MO	3/4/2014

+ Choose all applicable sections of 10 CFR Part 35 to describe radioisotopes and quantities used: 35.100, 35.200, 35.300, 35.400, 35.500, 35.600 remote afterloader units, 35.600 teletherapy units, 35.600 gamma stereotactic radiosurgery units, emerging technologies (provide list of devices).

**RADIATION SAFETY OFFICER OR
ASSOCIATE RADIATION SAFETY OFFICER
TRAINING, EXPERIENCE AND PRECEPTOR ATTESTATION [10 CFR 35.57, 35.50] (continued)**

5. Structured Educational Program for Proposed RSO or ARSO (continued)

b. Supervised Radiation Safety Experience (continued)

(If more than one supervising individual is necessary to document supervised work experience, provide multiple copies of this section.)

Supervising Individual John B. Baird, MD	License/Permit Number listing supervising individual as a Radiation Safety Officer or Associate Radiation Safety Officer 34-35185-01
The supervising individual is authorized as the for the following medical uses:	
☐ 35.100 ☒ 35.200 ☐ 35.300 ☐ 35.500 ☐ 35.600 (remote afterloader) ☐ 35.600 (gamma stereotactic radiosurgery) ☒ Radiation Safety Officer or the ☐ Associate Radiation Safety Officer ☐ 35.400 ☐ 35.600 (teletherapy) ☐ 35.1000 (_____)	

c. Describe training in radiation safety, regulatory issues, and emergency procedures for all types of medical use on the license for the RSO or types of use for which the ARSO will be listed on the license.

Description of Training	Training Provided By	Dates of Training*
Radiation safety, regulatory issues, and emergency procedures for 35.100, 35.200, and 35.500 uses	Mid America Isotopes	Aug-Sept 2025
Radiation safety, regulatory issues, and emergency procedures for 35.300 uses		
Radiation safety, regulatory issues, and emergency procedures for 35.400 uses		
Radiation safety, regulatory issues, and emergency procedures for 35.600 - teletherapy uses		
Radiation safety, regulatory issues, and emergency procedures for 35.600 - remote afterloader uses		
Radiation safety, regulatory issues, and emergency procedures for 35.600 - gamma stereotactic radiosurgery uses		
Radiation safety, regulatory issues, and emergency procedures for 35.1000, specify use(s):		

**RADIATION SAFETY OFFICER OR
ASSOCIATE RADIATION SAFETY OFFICER
TRAINING, EXPERIENCE AND PRECEPTOR ATTESTATION [10 CFR 35.57, 35.50] (continued)**

5. Structured Educational Program for Proposed RSO or ARSO (continued)

c. Training in radiation safety, regulatory issues, and emergency procedures for all types of medical use on the license (continued)

Supervising Individual <i>If training was provided by supervising RSO, ARSO, AU, AMP, or ANP. (If more than one supervising individual is necessary to document supervised training, provide multiple copies of this page.)</i> Brent McHugh, PharmD	License/Permit Number listing supervising individual 24-26241-01MD
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License/Permit lists supervising individual as:

- ☐ Radiation Safety Officer ☐ Associate Radiation Safety Officer
☐ Authorized User ☒ Authorized Nuclear Pharmacist ☐ Authorized Medical Physicist

Authorized as RSO, ARSO, AU, ANP, or AMP for the following medical uses:

- ☐ 35.100 ☐ 35.200 ☐ 35.300 ☐ 35.400
☐ 35.500 ☐ 35.600 (remote afterloader) ☐ 35.600 (teletherapy)
☐ 35.600 (gamma stereotactic radiosurgery) ☐ 35.1000 (_____)

d. Skip to and complete Part II Preceptor Attestation.

PART II – PRECEPTOR ATTESTATION

Note: This part must be completed by the individual's preceptor. The preceptor does not have to be the supervising individual as long as the preceptor provides, directs, or verifies training and experience required. If more than one preceptor is necessary to document experience, obtain a separate preceptor statement from each.

First Section

Structured Educational Program for Proposed RSO or ARSO

☒ I attest that Mozow Y. Zuidema, MD has satisfactorily completed
Name of Proposed RSO/ARSO
 a structural educational program consisting of both 200 hours of classroom and laboratory training and one year of full-time radiation safety experience as required by 10 CFR 35.50(b)(1).

AND

Second Section

☒ I attest that Mozow Y. Zuidema, MD has training in
Name of Proposed RSO/ARSO

radiation safety, regulatory issues, and emergency procedures for the following types of use:

Check all that apply:

- ☐ 35.100 ☒ 35.200
☐ 35.300 oral administration of less than or equal to 33 millicuries of sodium iodide I-131, for which a written directive is required
☐ 35.300 oral administration of greater than 33 millicuries of sodium iodide I-131
☐ 35.300 Parenteral administration of any radioactive drug that contains a radionuclide that is primarily used for its electron emission, beta radiation characteristics, alpha radiation characteristics, or photon energy of less than 150 keV, for which a written directive is required

**RADIATION SAFETY OFFICER OR
ASSOCIATE RADIATION SAFETY OFFICER
TRAINING, EXPERIENCE AND PRECEPTOR ATTESTATION [10 CFR 35.57, 35.50] (continued)**

PART II – PRECEPTOR ATTESTATION (continued)

Check all that apply:

- ☐ 35.400
- ☐ 35.500
- ☐ 35.600 remote afterloader units
- ☐ 35.600 teletherapy units
- ☐ 35.600 gamma stereotactic radiosurgery units
- ☐ 35.1000 emerging technologies, including:

Third Section

AND

☒ I attest that

Mozow Y. Zuidema, MD

Name of Proposed Radiation Safety Officer or Associate Radiation Safety Officer

is able to independently fulfill the radiation safety-related duties as:

☒ A Radiation Safety Officer for a medical use licensee.

OR

☐ An Associate Radiation Safety Officer for a medical use licensee.

Fourth Section

Complete the following for Preceptor Attestation and signature

☒ I am the Radiation Safety Officer for

☐ I am the Associate Radiation Safety Officer for

Name of Facility: Missouri Cardiovascular Specialists, LLP d/b/a Missouri Heart Center

License/Permit Number: 24-35185-01

Name of Preceptor (Typed or printed)

John B. Baird, MD

Telephone Number

(573) 256-7700

Date

09/12/2025

Signature



From: [Magdalena Gryglak](#)
To: [Martha Pavon](#)
Cc: [Tammy Tomczak](#); [Sandy Pavon](#)
Subject: FW: Re: RE: Amendment request for add a new AU and RSO- NRC license no. 24-35185-01 for Missouri Heart Center
Date: Monday, September 15, 2025 4:18:51 PM
Attachments: nrc rso aud submit 2025.pdf
665 647735 Additional Information.pdf

Hello,

Please place in ADAMS.

Thank you

Magda

From: Afton Miller <aftonm@moheartcenter.com>
Sent: Monday, September 15, 2025 11:31 AM
To: Magdalena Gryglak <Magdalena.Gryglak@nrc.gov>
Cc: Brian McVey <bmcvey@radiopharmacy.com>
Subject: [External_Sender] Re: RE: Amendment request for add a new AU and RSO- NRC license no. 24-35185-01 for Missouri Heart Center

Good morning Magdalena,

Please find the attached (signed) amendments requested to add Dr. Mozow Y. Zuidema, MD as an authorized user and to transfer RSO from Dr. John Baird, MD to Dr. Mozow Y. Zuidema, MD.

Please find the attached documentation.

We look forward to hearing from you.

Sincerely,

Afton Miller

Missouri Heart Center

Director of North Central Outreach Services

573-881-5257 cell

660-395-8914 office