



Region I Office  
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## Telephone Conversation Record

Date: 1/2/2014

License No.: 06-30537-01

Docket No.(no hyphens): 03035233

Mail Control/Report No.: 582639

Licensee Name: PriMed, LLC; d/b/a Connecticut Heart and Vascular Center, PC

Participant(s) Name/Title: Marsay S. (it is their policy not to give out last names), Office Assitant

Work Telephone No.: 230-333-8800

Business Cellphone No.: N/A

NRC Representative Name/Title: Héctor Bermúdez, Health Physicist

Subject: Clarification of Amendment Request

Discussion: The licensee clarified that their mailing address should also be amended.

Action Required: Amend license accordingly.

### SUNSI REVIEW

Document Availability: ☒ Public or ☐ Non-Public

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(select "1" value to the right)

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MD 3.4 Non-Public B.1 (Non-Sensitive)

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MD 3.4 Non-Public A.7 ( Internal)

SUNSI Review Completed by: H Bermúdez

: If applicable, add OFFICIAL USE ONLY – SECURITY RELATED INFORMATION banners and change SUNSI review to A.3.