

FEB 24 1997

Lawrence S. McAuliffe, M.D.  
President  
Cap Cod Cardiovascular Associates  
Yellow Brick Road  
Hyannis, MA 02601

Dear Dr. McAuliffe:

Your license has been issued in the name of an institution, please ensure that all license requests are signed by a representative of the institution's management. This will assure that management has concurred with all commitments.

In accordance with 10 CFR 35.14(a), your letter dated February 18, 1997 is accepted as notification that you have permitted John Guerin, M.D., to work as an authorized user pursuant to 10 CFR 35.13(b)(1) through (b)(4). No further correspondence on this matter is required.

Your cooperation is appreciated.

Sincerely,

Original Signed By  
Richard Gibson

Richard Gibson, Jr.  
Division of Nuclear Materials Safety

License No. 20-30253-01  
Docket No. 030-33957  
Control No. 124295

DOCUMENT NAME: R:\WPS\MLTR\2030253.01

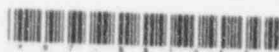
To receive a copy of this document, indicate in the box: "C" = Copy w/o attach/encl "E" = Copy w/ attach/encl "N" = No copy

OFFICE	DNMS/RI	N	DNMS/RI				
NAME	RGibson/rxg						
DATE	02/24/97	02/ /97	02/ /97	02/ /97			

OFFICIAL RECORD COPY

ML 10

9703040046 970224  
PDR ADOCK 03033957  
C PDR



CAPE COD CARDIOVASCULAR ASSOCIATES, INC.

YELLOW BRICK ROAD ♥ HYANNIS, MA 02601-3267

508-778-1829 • 1-888-HEART-58 • FAX 508-778-0113

JOHN W. tenBROEKE, M.D., F.A.C.C.  
LAWRENCE S. McAULIFFE, M.D., F.A.C.C.  
RICHARD B. ZELMAN, M.D., F.A.C.C.  
JOSEPH S. PICCONE, R.N., C., M.S.N., F.N.P.

VIKAS SAINI, M.D., F.A.C.C.  
MARK W. WOLFE, M.D., F.A.C.C.  
JOHN H. ARTHUR, M.D., F.A.C.C. @  
51 Main Street (508) 771-9178 • Fax (508) 778-6399

February 18, 1997

030-33957

License Number 20 - 30253 - 01

US Nuclear Regulatory Commission  
Region I  
475 Allendale Road  
King of Prussia, PA 19406

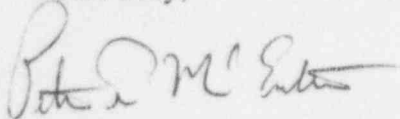
Gentlemen:

Cape Cod Cardiovascular Associates hereby notifies you that backup coverage for our single user, Dr. Vikas Saini, in this program will be provided by John Guerin, M.D. of Falmouth Cardiology Associates, currently listed for the same uses under license number 20 - 30195 - 01.

It is our understanding that you will keep this notification on file for future reference and include Dr. Guerin on the user list on our license number 20 - 30253 - 01 when it is next amended. It is further our understanding that Dr. Guerin may begin practicing under this license effective on this notification, and need not wait for license amendment.

Please don't hesitate to contact our consultant, F.X. Masse, at 617 - 253 - 9217 if further information is required.

Yours truly,



Peter T. McEntee, R.T. (N)  
Chief Technologist

OFFICIAL RECORD COPY

ML 10

124285

FEB 21 1997

LICENSE FEE MANAGEMENT BRANCH, ARM  
AND  
REGIONAL LICENSING SECTIONS

(FOR LFMS USE)  
INFORMATION FROM LITS

```

: PROGRAM CODE: 02200
: STATUS CODE: 0
: FEE CATEGORY: 7C
: EXP. DATE: 20001231
: FEE COMMENTS:
: DECOM FIN ASSUR REQD: N

```

## A. REGION

I

APPLICANT/LICENSEE: CAPE COD CARDIOVASCULAR ASSOCIATES  
RECEIVED DATE: 970221  
DOCKET NO: 3033957  
CONTROL NO.: 124295  
LICENSE NO.: 20-30253-01  
ACTION TYPE: NOTIFICATIONS

AMOUNT: \_\_\_\_\_  
CHECK NO.: \_\_\_\_\_

SIGNED

M. A. Perkins

DATE \_\_\_\_\_

2/21/97

## 1. FEE CATEGORY AND AMOUNT: \_\_\_\_\_

AMENDMENT  
RENEWAL  
LICENSE

3. OTHER -----

SIGNED

DATE \_\_\_\_\_