

Certification Board of Nuclear Cardiology
1401 Rockville Pike, Suite 600
Rockville MD 20852

Dr. _____ has completed training and/or experience that meets the requirements for Level 2 as outlined in the ACC Core Cardiovascular Training Statement (COCATS) 4 Task Force 6: Training in Nuclear Cardiology, revised 2015.

Dr. _____ completed Level 2 nuclear cardiology training between the dates of _____ and _____.

I attest that Dr. _____ is competent to independently function as an authorized user under NRC 10 CFR 35.200 uses.

- The above-named applicant completed a minimum of 80 hours of classroom and laboratory training that meets the Nuclear Regulatory Commission (NRC) requirements as an INTEGRAL part of his/her fellowship/residency program.
- The above-named applicant completed a minimum of 80 hours of classroom and laboratory training that meets the NRC requirements external to his/her fellowship program.

- The above-named applicant is an Authorized User listed on a current Radioactive Materials (RAM) License (if applicable).

Sincerely,

(Signature Required)

Name of Preceptor:

Title/Relationship to Applicant:

NRC/Agreement State License Number (on RAM License):

Certified by:

Certificate Number: