

From: [Nguyen, Janice](#)
To: [Todd Hockemeyer](#)
Subject: NRC Request for Additional Information for Zevacor Pharma, Inc. (Mail Control Number 593112)
Date: Thursday, March 23, 2017 3:12:00 PM

Licensee: Zevacor Pharma, Inc.
License No: 45-25221-01MD
Docket No.: 030-32974
Mail Control No.: 593112

Dear Mr. Hockemeyer,

To continue our review of your request to add Luke R. Rae, Pharm.D. to your license, we require the following additional information:

1. You provided documentation to show Dr. Rae's registration in Missouri. Please provide documentation to show his registration in Kansas or West Virginia. Alternatively, you may confirm that Dr. Rae will only be working in Missouri.
2. Please provide documentation for Dr. Rae to support the degree designation in pharmacy (Pharm.D.).

Your reply must be an originally signed and dated letter. The letter may be scanned and submitted as a pdf document attached to an email; or it may be transmitted by facsimile to (610) 337-5269; or it may be sent by regular mail. If we do not receive a reply from you within 30 calendar days from the date of this e-mail, we will assume that you do not wish to pursue your amendment request.

Please respond by e-mail to acknowledge that you have received the e-mail request for additional information.

Thank you for your assistance,

Jan

Janice Nguyen
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