

From: [Lanzisera, Penny](#)
To: jasen.l.swanson.mil@mail.mil
Subject: Request for additional information
Date: Wednesday, February 14, 2018 3:32:00 PM

Licensee: Blanchfield Army Community Hospital
License No. 16-30845-01
Docket No. 03036430
Mail Control No. 602299

In regards to your request to add Dr. Gunn to your license; please submit the following additional information:

1. Page 3 of the NRC Form 313A (AUD)
2. According to the Nebraska Medical Board, Dr. Gunn is a D.O. Please confirm this is correct. If incorrect, please submit evidence to support an M.D. designation.

You may fax the additional information to my attention to 610-337-5269 or send a signed pdf letter to my email address. Please refer to Mail Control No. 602299 in your response. Thank you for your assistance.

Penny Lanzisera
Senior Health Physicist
U.S. NRC, Region I