

JAN 13 1972

Mr. William Cavanaugh
Assistant Superintendent
ARKANSAS NUCLEAR ONE
Arkansas Power & Light Company
9th & Louisans Streets
Little Rock, Arkansas 72203

Dear Mr. Cavanaugh:

We have received and reviewed the additional medical information submitted regarding Mr. Simmons' physical condition.

Based on our review and our medical consultant's recommendation, Mr. Simmons would be eligible for licensing at the present time.

However, we would require as a condition to his license, that he submit an annual report of blood pressure, before and after exercise, pulse and weight.

I hope this information will be of use to you.

Sincerely yours,

ORIGINAL SIGNED BY
P. F. COLLINS

Paul F. Collins, Chief
Operator Licensing Branch
Division of Reactor Licensing

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OFFICE ►	OLB:DRL						
SURNAME ►	PFCollins:eh						
DATE ►	1/13/72						

State Health Commission Board
Division of Operational Safety

Date: 11/12/70

State Health Commission Board
Division of Operational Safety

RESULTS OF MEDICAL EXAMINATION, FORM NO. 98-DNA

Attached are your results to the application of Michael Simmons, S.A.
XX / Medical Board Report.

Robert M. Simmons

M.D. Your medical history indicates
that you submitted as part of my application a physician's letter for the
W/A

It is requested that the Division of Operational Safety review this medical report and indicate below its conclusions as to the applicant's physical condition and general health. Please return the report to this office.

REPORT

In accordance with the above request, a review has been completed to determine if the physical condition and general health of the applicant are not such as to be expected to cause operational errors which might endanger public health and safety. The following recommendation is submitted:

11-16-70 WJD M.D. Date DOS The physical condition and general health are satisfactory for licensing.

11-16-70 WJD M.D. Date DOS The physical condition and general health are satisfactory for licensing with the condition(s) that Coronary Artery Disease, Diabetes, Hypertension, Report to Physician, Report to Physician.

11-17-70 WJD M.D. Date DOS The physical condition and general health are not satisfactory for licensing. The adverse condition(s) is _____.

11-17-70 WJD M.D. Date DOS

A determination cannot be made until the following additional information is submitted: Liver function test, Blood urea nitrogen, Glucose tolerance test, Urea nitrogen, Cholesterol, Triglycerides, Electrocardiogram, Urinalysis, Stool sample.