



ACKNOWLEDGEMENT - RECEIPT OF CORRESPONDENCE

Name and Address of Applicant and/or Licensee

Sibley Memorial Hospital
5255 Loughboro Road, N.W.
Washington DC 20016-2695
mdibba1@jhmi.edu

Date

07/29/2026

License Number(s)

08-07398-03

Mail Control Number(s)

660266

Licensing and/or Technical Reviewer or Branch

Medical Licensing Assistance Branch

This is to acknowledge receipt of your: ☒ Letter and/or ☐ Application Dated: 07/16/2026

The initial processing, which included an administrative review, has been performed.

☒ Amendment ☐ Termination ☐ New License ☐ Renewal

☐ There were no administrative omissions identified during our initial review.

☐ This is to acknowledge receipt of your application for renewal of the material(s) license identified above. Your application is deemed timely filed, and accordingly, the license will not expire until final action has been taken by this office.

☐ Your application for a new NRC license did not include your taxpayer identification number. Please complete and submit NRC Form 531, Request for Taxpayer Identification Number, located at the following link: <http://www.nrc.gov/reading-rm/doc-collections/forms/nrc531.pdf>
Follow the instructions on the form for submission.

☐ The following administrative omissions have been identified:

Your application has been assigned the above listed MAIL CONTROL NUMBER. When calling to inquire about this action, please refer to this control number. Your application has been forwarded to a technical reviewer. Please note that the technical review, which is normally completed within 180 days for a renewal application (90 days for all other requests), may identify additional omissions or require additional information. If you have any questions concerning the processing of your application, our contact information is listed below:

Region I
U. S. Nuclear Regulatory Commission
Division of Radiological Safety and Security
475 Allendale Road, Suite 102
King of Prussia, PA 19406-1415
R1DRSSMail.Resource@nrc.gov or (610) 337-5000