

DIVISION OF COMPLIANCE

INSPECTION FINDINGS AND LICENSEE ACKNOWLEDGMENT

| | | | |
|---|--|--|--|
| 1. LICENSEE Northern Virginia Doctors Hospital Department of Nuclear Medicine 601 South Carlin Springs Road Arlington, Virginia 22204 | | U.S. Nuclear Regulatory Commission Office of Inspection and Enforcement Region II Suite 3100 101 Marietta Street NW Atlanta Georgia 30303 | |
| 3. DOCKET NUMBER(S) 030-09932 | | 4. LICENSE NUMBER(S) 45-16222-01 | |
| 5. DATE OF INSPECTION 9/3/81 | | | |
| 6. INSPECTION FINDINGS The inspection was an examination of the activities conducted under your license as they relate to radiation safety and to compliance with the Commission's rules and regulations and the conditions of your license. The inspection consisted of selective examinations of procedures and representative records, interviews with personnel, and observations by the inspector. The findings as a result of this inspection are as follows: | | | |
| <input checked="" type="checkbox"/> No items of noncompliance or unsafe conditions were found. | | | |
| The following items of noncompliance related to records, signs, and labels were found: | | | |
| <input type="checkbox"/> A. Rooms or areas were not properly posted to indicate the presence of a RADIATION AREA. 10 CFR 20.203(b) or 34.42 | | | |
| <input type="checkbox"/> B. Rooms or areas were not properly posted to indicate the presence of a HIGH RADIATION AREA. 10 CFR 20.203(c) (1) or 34.42 | | | |
| <input type="checkbox"/> C. Rooms or areas were not properly posted to indicate the presence of an AIRBORNE RADIOACTIVITY AREA. 10 CFR 20.203(d) | | | |
| <input type="checkbox"/> D. Rooms or areas were not properly posted to indicate the presence of RADIOACTIVE MATERIAL. 10 CFR 20.203(e) | | | |
| <input type="checkbox"/> E. Containers were not properly labeled to indicate the presence of RADIOACTIVE MATERIAL. 10 CFR 20.203(f) (1) or (f) (2) | | | |
| <input type="checkbox"/> F. A current copy of 10 CFR 20, a copy of the license, or a copy of the operating procedures was not properly posted or made available. 10 CFR 20.206(b) | | | |
| <input type="checkbox"/> G. Form AEC-3 was not properly posted. 10 CFR 20.206(c) | | | |
| <input type="checkbox"/> H. Records of the radiation exposure of individuals were not properly maintained. 10 CFR 20.401(a) or 34.33(b) | | | |
| <input type="checkbox"/> I. Records of surveys or disposals were not properly maintained. 10 CFR 20.401(b) or 34.43(d) | | | |
| <input type="checkbox"/> J. Records of receipt, transfer, disposal, export or inventory of licensed material were not properly maintained. 10 CFR 30.51, 40.61 or 70.51 | | | |
| <input type="checkbox"/> K. Records of leak tests were not maintained as prescribed in your license, or 10 CFR 34.25(c) | | | |
| <input type="checkbox"/> L. Records of inventories were not maintained. 10 CFR 34.26 | | | |
| <input type="checkbox"/> M. Utilization logs were not maintained. 10 CFR 34.27 | | | |
| <input type="checkbox"/> N. Records of radiation survey instrument calibration were not maintained. 10 CFR 34.24 | | | |
| <input type="checkbox"/> O. Records of teletherapy electrical interlock tests were not maintained as prescribed in your license. | | | |
| <input type="checkbox"/> P. Other _____ | | | |
| _____ (AEC Compliance Inspector) | | | |
| 7. The AEC Compliance Inspector has explained and I understand the items of noncompliance listed above. The items of noncompliance will be corrected within the next 30 days. | | | |
| 8506110407 850109 PDR FOIA ENGEL84-789 PDR | | | |
| _____ (Date) | | _____ (Licensee Representative - Title or Position) | |

INSPECTION REPORT NO. 2001Attached☐ Appendix A☐ Appendix B☐ Appendix C☐ MemoLicensee contact: J. GarciaTelephone no. License no. Last amendment and date: 11/10/81Category: 2and Priority: II

as of last amendment.

Inspection date(s): 11/10/81Type of inspection: Routine

SUMMARY OF FINDINGS AND ACTION

☒ No noncompliance, clear 591 issued☐ Noncompliance, 591 issued☐ Noncompliance, Appendix A☐ Regional action ☐ Hq action☐ Action on previous noncompliance, Appendix B☐ Supplemental info, Appendix C

RECOMMENDATIONS

See basis in Appendix C or attached memo.

☐ Change Category to: ☐ Change Priority to: ☐ Next inspection date: 3/84

PERSONS CONTACTED

Dr. GarciaGeorge Paul (Head)Martin Spencer - surgeryInspector: Approved: 9/18/81

INSPECTION PLAN AND REPORT NUMBER

81-01Plan approved: Date: License no: 45-16222-01Licensee: No. Va. Doctor Hospital

| Inspection Items | Scheduled for inspection | Post-inspection status | Module no. | 766 Time Info |
|---|--------------------------|------------------------|------------|---------------|
| Management meeting - Entrance and Exit Interviews [REQUIRED] | ✓ | | 30703B | 1/2 hr |
| Initial Management Meeting | | | | |
| Program requirements, MC 28 [REQUIRED] | ✓ | | 78710B | 2 hr |
| Licensee Event Followup | | | 92700B | |
| Followup on Inspector-identified problems | | | 92701B | |
| Followup on Noncompliance and Deviations | | | 92702B | |
| IE Bulletin/Immediate Action Letter Followup | | | 92703B | |
| Followup on Headquarters Requests | | | 92704B | |
| Followup on Regional Requests | | | 92705B | |
| Independent Inspection Effort [REQUIRED] | ✓ | | 92706B | 1/2 hr |
| Inspector Dispatched to Site | | | 93700B | |
| Followup on Significant Event Occurring During Inspection | | | 93701B | |

* Mr. E. Hoover - Ident. tests

* Dr. Pennington - Chief of Radiology

+ Dr. Garman - RSC - Chief on
the field.

outgoing message - 10/10/52

Isotope Comm.

Mr. Hoover
Mr. Pennington

* 10/10/52

Joyce H. Cochran - Chief of

Isotope Comm.

Mr. Pennington

Mr. Garman

AREAS INSPECTED AND FINDINGS

Licensee: No. Va Doctors Hospital License no: 45-16222-1 Amendment no: 10

| INSPECTION ITEMS | CRITERIA | FINDING |
|------------------|----------|-----------|
| | | <u>OK</u> |

1. Organization

Structure of organization as described in requirements?

Lic Cond

NOTES & REMARKS:

See opposite page

2. Licensee internal audits

Scope and frequency of audits as required?
Conducted by appropriate persons? Records maintained? Reviewed by management?
Deficiencies identified & corrected?

Lic Cond

NOTES & REMARKS:

HPSE - consultant - monthly visits -

Not de Comm - see opposite page

Meets quarterly last meeting 6/81:

3. Training and qualification of personnel

Training & retraining conducted as required?
Written & oral exams conducted? Examination results reviewed by management?
Instructions to workers per 19.12?

Lic Cond

NOTES & REMARKS:

Nursing staff trained re therapy procedures

2 techs are certified -

HPSE provides annual training - covers regs etc

4. Radiation protection procedures

Procedures available and implemented? Identify radiopharmaceutical and dose(s)? Cover handling of patients receiving therapeutic doses? Cover handling of cadavers?
Emergency procedures for spills, etc?
Personnel understand procedures?

Lic Cond

NOTES & REMARKS:

Procedure manual available - covers spills, Surveys, Emergency spill

Procedure + tech on wall

Almost all material rec. from
Western Diagnostics. Procedures
available for after hours receipt which
doesn't happen often.

~ 135 to 150 mCi of Tc^{99m} per day

I^{23} -

I^{131} Therapy - carcinoma - ~ 4 x 3 per year
150 mCi usual dose

- private room used
- 30 or 4 day hospitalization
- room serves as isolation - barriers
- use liquid - opened under hood.
- in-service training for nursing staff.

butyroidine ~ 1 x 1 per year

Ga^{67}

Rn^{222} -

Se^{75} rarely ~ 2 or 3 x year

- No Xenon

- I^{123} diagnostic - as needed -

- Tl^{201} -

AREAS INSPECTED AND FINDINGS

Licensee: Mr. V. D. D. H. F. License no: 45-1622-4 Amendment no: 10

| INSPECTION ITEM | CRITERIA | FINDING |
|--|---|------------------|
| <p>5. <u>Use of materials</u></p> <p>Procurement and use as required?</p> <p>Special tests (moly breakthrough, leak tests, etc) required?</p> <p>Dose calibration checks performed?</p> <p>Posting & labeling as required?</p> <p>NOTES & REMARKS:</p> | <p>Lic Cond <u> </u></p> <p>20.203</p> | <p><u>OK</u></p> |
| <p>6. <u>Storage of materials</u></p> <p>Material secured in both restricted and unrestricted areas? Adequately?</p> <p>NOTES & REMARKS:</p> | <p>20.207</p> | <p><u>OK</u></p> |
| <p>7. <u>Facilities</u></p> <p>As described in lic cond or application?</p> <p>Any changes made? Adequacy?</p> <p>NOTES & REMARKS:</p> | <p>Lic Cond <u> </u></p> | <p><u>OK</u></p> |
| <p>8. <u>Instruments</u></p> <p>Survey meters & instruments adequate for program?</p> <p>Instruments & meters operable? Calibrated?</p> <p>Calibration adequate?</p> <p>NOTES & REMARKS:</p> | <p>Lic Cond <u> </u></p> | <p><u>OK</u></p> |

AREAS INSPECTED AND FINDINGS

Licensee: H. H. [unclear] License no: _____ Amendment no: _____

| INSPECTION ITEMS | CRITERIA | FINDING |
|---|--------------|-----------|
| 9. Receipt and transfer of material | | <u>OK</u> |
| Written procedures for pickup, receiving, opening packages? | 20.205 | |
| Survey of packages when received? | 20.205(c)(1) | |
| Records of survey of packages? | 20.401(b) | |
| Transfer of materials proper? Transfer records maintained? | 30.41, 30.51 | |
| Authorized containers used? Shipping papers & package labels proper for packages on hand? | 71.5 | |
| NOTES & REMARKS: | | |

| | | |
|--|----------------------|-----------|
| 10. Personnel protection - external | | <u>OK</u> |
| Personnel monitoring controls adequate? Exposures minimized? | 20.101, 20.202 | |
| Exposure records (NRC-4 or 5) maintained? Available for employee review? | 20.102(b), 20.401(a) | |
| Surveys conducted? Adequate? | 20.201 | |
| Records of monitoring, surveys? | 20.401 | |
| Levels in unrestricted areas within limits? | 20.1, 20.105 | |
| NOTES & REMARKS: | | |

| | | |
|--|------------------|-----------|
| 11. Personnel protection - internal | | <u>OK</u> |
| Airborne concentrations in restricted areas? | 20.103 | |
| Exposures to minors? | 20.104 | |
| Posting of airborne radioactivity areas? | 20.203(d) | |
| Survey, monitoring adequate for airborne radioactivity, surface contamination? Records maintained? | 20.201 20.401 | |
| NOTES & REMARKS: | | |

NOTES & REMARKS:

Wipe tests every week - records maintained
 contamination checks of packages maintained
 shipping labels maintained

AREAS INSPECTED AND FINDINGS

Licensee: 15. Va. Tech 7 License no: 15-00000 Amendment no: 10

| INSPECTION ITEM | CRITERIA | FINDING |
|-----------------|----------|---------|
|-----------------|----------|---------|

12. Effluent controls, waste disposal

Release of effluents controlled?

20.106, 20.303

Waste disposals controlled?

20.301, 20.303, 20.304, 20.305

Procedures, records maintained?

20.401, Lic Cond

Surveys made? Adequate?

20.401

NOTES & REMARKS:

All waste held for incineration, surveyed
in disposal - records kept. OK

13. Notifications and reports

To individuals.

19.13

Overexposures, excessive levels & concentrations,
incidents.

20.403, 20.405

Personnel exposures and monitoring, termination
reports.

20.407; 20.408

Theft or loss of licensed material.

20.402

NOTES & REMARKS:

No reports required. OK

14. Posting of notices

Part 20, license & documents, procedures,
notice of violations posted?

19.11(a)

NRC-3 posted?

19.11(c)

NOTES & REMARKS:

All notices properly posted. OK

15. Other license conditions

Lic

General work areas in hot lab are
clean, no evidence of
contamination found with tests. OK

U.S. NUCLEAR REGULATORY COMMISSION
OFFICE OF INSPECTION AND ENFORCEMENT

INSPECTION FINDINGS AND LICENSEE ACKNOWLEDGMENT

1. LICENSEE

Diagnostic Imaging Assoc.
Woodner Building
3636 16th Street NW
Washington, D.C. 20010

2. REGIONAL OFFICE

NRC - Region I
King of Prussia, Pa 19401

3. DOCKET NUMBER(S)

30-17780

4. LICENSE NUMBER(S)

08-19491-01

5. DATE OF INSPECTION

9/4/81

6. INSPECTION FINDINGS

The inspection was an examination of the activities conducted under your license as they relate to radiation safety and to compliance with the Commission's rules and regulations and the conditions of your license. The inspection consisted of selective examinations of procedures and representative records, interviews with personnel, and observations by the inspector. The findings as a result of this inspection are as follows:

☒ No items of noncompliance or unsafe conditions were found.

The following items of noncompliance related to records, signs, and labels were found:

- ☐ A. Rooms or areas were not properly posted to indicate the presence of a RADIATION AREA. 10 CFR 20.203(b) or 34.42
- ☐ B. Rooms or areas were not properly posted to indicate the presence of a HIGH RADIATION AREA. 10 CFR 20.203(c) (1) or 34.42
- ☐ C. Rooms or areas were not properly posted to indicate the presence of an AIRBORNE RADIOACTIVITY AREA. 10 CFR 20.203(d)
- ☐ D. Rooms or areas were not properly posted to indicate the presence of RADIOACTIVE MATERIAL. 10 CFR 20.203(e)
- ☐ E. Containers were not properly labeled to indicate the presence of RADIOACTIVE MATERIAL. 10 CFR 20.203(f) (1) or (f) (2)
- ☐ F. A current copy of 10 CFR 20, a copy of the license, or a copy of the operating procedures was not properly posted or made available. 10 CFR 20.206(b)
- ☐ G. Form NRC-3 was not properly posted. 10 CFR 20.206(c)
- ☐ H. Records of the radiation exposure of individuals were not properly maintained. 10 CFR 20.401(a) or 34.33(b)
- ☐ I. Records of surveys or disposals were not properly maintained. 10 CFR 20.401(b) or 34.43(d)
- ☐ J. Records of receipt, transfer, disposal, export or inventory of licensed material were not properly maintained. 10 CFR 30.51, 40.61 or 70.51
- ☐ K. Records of leak tests were not maintained as prescribed in your license, or 10 CFR 34.25(c)
- ☐ L. Records of inventories were not maintained. 10 CFR 34.26
- ☐ M. Utilization logs were not maintained. 10 CFR 34.27
- ☐ N. Records of radiation survey instrument calibration were not maintained. 10 CFR 34.24
- ☐ O. Records of teletherapy electrical interlock tests were not maintained as prescribed in your license.
- ☐ P. Other

Joy A. McInness
(NRC Inspector)

7. The NRC Inspector has explained and I understand the items of noncompliance listed above. The items of noncompliance will be corrected within the next 30 days.

8110060347

3pp

(Date)

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MEDICAL

INSPECTION REPORT NO. 81-01

Page 1 of

Attached

☐ Appendix A

☐ Appendix B

☐ Appendix C

☐ Memo

Diagnostic Imaging Center, PC
3636 16th St NW
Washington, D.C. 20010

Licensee contact: Dennis Lury, MD Telephone no. 202-357-888

License no. 18-19491-01 Last amendment and date:

Category: G, and Priority: IV, as of last amendment.

Inspection date(s): 9/4/81 Type of inspection: Initial Unannounced

SUMMARY OF FINDINGS AND ACTION

☒ No noncompliance, clear 591 issued

☐ Noncompliance, 591 issued

☐ Noncompliance, Appendix A

☐ Regional action Hq action

☐ Action on previous noncompliance, Appendix B

☐ Supplemental info, Appendix C

RECOMMENDATIONS

See basis in Appendix C or attached memo.

☐ Change Category to:

☐ Change Priority to:

☒ Next inspection date: 9/84 - telephonic call

PERSONS CONTACTED

Dennis Lury, MD

Inspector: J. McGuinness

9/10/81

Approved: [Signature]

9/17/81

Plan Approved: _____

Date: _____

Licensee: _____

License No: _____

| Inspection Items | Scheduled for Inspection | Post-Inspection Status | Module No. | 766 Time Info |
|---|--------------------------|------------------------|------------|---------------|
| Management Meeting - Entrance and Exit Interviews (Required) | | | 30703B | 10 min |
| Program Requirements, MC 2860 (Required) | | | 78710B | 3/4 hr |
| Followup on Noncompliance and Deviations | | | 92702B | |
| Independent Inspection Effort (Required) | | | 92706B | |
| Transportation | | | 86740B | |
| Licensee Event Followup | | | 92700B | |
| Followup on Inspector-Identified Problems | | | 92701B | |
| IE Bulletin/Immediate Action Letter Followup | | | 92703B | |
| Followup on Headquarters Requests | | | 92704B | |
| Followup on Regional Requests | | | 92705B | |
| Inspector Dispatched to Site | | | 93700B | |
| Followup on Significant Event Occurring During Inspection | | | 93701B | |
| Initial Management Meeting | | | 38800B | |
| | | | | |

APPENDIX C - SUPPLEMENTARY INFO _____

Licensee: _____

License no: _____

☐ Uncorrected/repeated noncompliance☐ Unresolved items☐ Unusual occurrence, conditions, etc☐ Inspector's comments☐ Basis for change of Category or Priority

Initial inspection of program showed the use of byproduct materials initiated on 11/4/80 and ceased on 6/16/81. All radiopharmaceuticals were received from Pharmatopes. The office was only performing 3-4 scans/wk and the physicians didn't feel this workload was great enough to continue the program. Mostly ^{99m}Tc was used with an occasional ^{131}I (capsule form) for an uptake & scan. No hyperthyroidism Rx's done. Inspector reviewed records of program, surveys, daily checks, item badge reports, etc. All seem to have been done properly. Program had an outside consultant from Health Physics Service come to office once/month while the program was operating.

At present all camera equipment dose calibrator, meter, etc has been returned. Physicians do not anticipate immediate future of the materials but would like to get back into it some time when the need arises.

Telephone call to sup program has resulted in ~~no~~ ^{no} ~~advised~~ ^{advised}. If not a better way to terminate their license if no work is anticipated.



UNITED STATES
NUCLEAR REGULATORY COMMISSION
REGION II
101 MARIETTA ST., N.W., SUITE 3100
ATLANTA, GEORGIA 30303

NOV 19 1981

American Medical Laboratories, Inc.
ATTN: Dr. Godwin, Director
11001 Main Street
Fairfax, VA 22030

Gentlemen:

Subject: Report No. 45-13936-01/81-01

This refers to the routine safety inspection conducted by Mr. R. A. Brown of this office on November 2, 1981, of activities authorized by NRC License No. 45-13936-01 for your facility. Our preliminary findings were discussed with Mr. Fraithier of your staff at the conclusion of the inspection.

The inspection was an examination of the activities conducted under your license as they relate to radiation safety and to compliance with the Commission's rules and regulations and the conditions of your license. The inspection consisted of selective examinations of procedures and representative records, interviews with personnel, and observations by the inspector.

During the inspection, it was found that certain activities under your license appear to violate NRC requirements. This item and references to pertinent requirements are listed in the Notice of Violation enclosed herewith as Appendix A. Elements to be included in your response are delineated in Appendix A.

In accordance with 10 CFR 2.790(a), a copy of this letter and the enclosure(s) will be placed in the NRC's Public Document Room unless you notify this office, by telephone, within ten days of the date of this letter and submit written application to withhold information contained therein within thirty days of the date of this letter. Such application must be consistent with the requirements of 2.790(b)(1).

Should you have any questions concerning this letter, we will be glad to discuss them with you.

Sincerely,

Albert F. Gibson, Chief
Technical Inspection Branch
Division of Engineering and
Technical Inspection

Enclosure: See Page 2

8112310460
2pp.

NOV 10 1991

Amgen Medical Laboratories, Inc. 2

Enclosure:
Appendix A, Notice of Violation

APPENDIX ANOTICE OF VIOLATION

American Medical Laboratories, Inc.

License No. 45-13930-01

As a result of the inspection conducted on November 2, 1981, and in accordance with the Interim Enforcement Policy, 45 FR 66754 (October 7, 1980), the following violation was identified.

10 CFR 30.3 requires in part, that no person shall own, possess or use byproduct material except as authorized in a specific license. Condition 6 of your license describes the byproduct material you are authorized to possess.

Contrary to the above, on November 2, 1981, you were in possession of two Cesium-137 sources and one Barium-133 source which are not authorized by Condition 6 of your license.

This is a Severity Level V Violation (Supplement VII).

Pursuant to the provisions of 10 CFR 2.201, you are hereby required to submit to this office within thirty days of the date of this Notice, a written statement or explanation in reply, including: (1) admission or denial of the alleged violation; (2) the reasons for the violation if admitted; (3) the corrective steps which have been taken and the results achieved; (4) corrective steps which will be taken to avoid further violations; and (5) the date when full compliance will be achieved. Consideration may be given to extending your response time for good cause shown. Under the authority of Section 182 of the Atomic Energy Act of 1954, as amended, this response shall be submitted under oath or affirmation.

Date NOV 19 1981

8112310468

8 pp.

INSPECTION REPORT NO. 2101

Page 1 of

Attached

☐ Appendix A

☐ Appendix B

☐ Appendix C

☐ Memo

Licensee contact: D. G. Baker

Telephone no.

License no. 15-11111

Last amendment and date: 5-1-81

Category: C

and Priority: III, as of last amendment.

Inspection date(s): 5/1

Type of inspection: Site unannounced

SUMMARY OF FINDINGS AND ACTION

☐ No noncompliance, clear 591 issued

☒ Noncompliance, Appendix A

☐ Action on previous noncompliance, Appendix B

☐ Noncompliance, 591 issued

☐ Regional action Hq action

☐ Supplemental info, Appendix C

RECOMMENDATIONS

See basis in Appendix C or attached memo.

☐ Change Category to:

☐ Change Priority to:

☐ Next inspection date: 5/8/81

PERSONS CONTACTED

J. R. Carter

D. G. Baker

Inspector: Robert L. Brown

Approved:

11/9/81

Plan approved: _____

Date: _____

License no: _____

Licensee: _____

| Inspection Items | Scheduled for inspection | Post-inspection status | Module no. | 756 Time Info |
|---|--------------------------|------------------------|------------|---------------|
| Management meeting - Entrance and Exit Interviews [REQUIRED] | / | | 30703B | |
| Initial Management Meeting | | | | |
| Program requirements, MC 2B [REQUIRED] | / | | | |
| Licensee Event Followup | | | 92700B | |
| Followup on Inspector-identified problems | | | 92701B | |
| Followup on Noncompliance and Deviations | | | 92702B | |
| IE Bulletin/Immediate Action Letter Followup | | | 92703B | |
| Followup on Headquarters Requests | | | 92704B | |
| Followup on Regional Requests | | | 92705B | |
| Independent Inspection Effort [REQUIRED] | / | | | |
| Inspector Dispatched to Site | | | 93700B | |
| Followup on Significant Event Occurring During Inspection | | | 93701B | |

AREAS INSPECTED AND FINDINGS

Licensee: Dr. Robert L. ... License no: _____ Amendment no: _____

| INSPECTION ITEMS | CRITERIA | FINDING |
|------------------|----------|---------|
|------------------|----------|---------|

1. OrganizationOK

Structure of organization as described in requirements?

Lic Cond _____

NOTES & REMARKS:

Dr. Godwin - Director - ISO
 Dr. Cooke - President
 Mr. ... - Tech ... of ...
 ... Techs

2. Licensee internal audits

Lic Cond _____

OK

Scope and frequency of audits as required?

Conducted by appropriate persons? Records maintained? Reviewed by management?

Deficiencies identified & corrected?

NOTES & REMARKS:

No isotope committee required
 HPSI - meets monthly - reports on file.

3. Training and qualification of personnel

Lic Cond _____

OK

Training & retraining conducted as required?

Written & oral exams conducted? Examination results reviewed by management?

Instructions to workers per 19.12?

19.12

NOTES & REMARKS:

All new employees go over
 radiation safety procedures during orientation.

4. Radiation protection procedures

Lic Cond _____

OK

Procedures available and implemented? Identify radiopharmaceutical and dose(s)? Cover handling of patients receiving therapeutic doses? Cover handling of cadavers?

Emergency procedures for spills, etc?

Personnel understand procedures?

NOTES & REMARKS:

Training Manual available

I¹²⁵ < 100 μ l met. in hand. +

H₃ - < 100 μ l

357 -

RIA procedures only

1 - 15 M Li Ni⁶³ fuel in GC

30 Technologists.

Left over
from Nuc.
Pled 30 ft.

{ 97.3 μ l Cs¹³⁷ - sealed
3 μ l - typed
263 μ l Pu²³⁸ on 2/11/77

INSPECTION REPORT NUMBER _____

Page 4 of _____

787108 - Medical

AREAS INSPECTED AND FINDINGS

Licensee: _____ License no: _____ Amendment no: _____

| INSPECTION ITEM | CRITERIA | FINDING |
|-----------------|----------------|----------|
| | Lic Cond _____ | <u>I</u> |

5. Use of materials

Procurement and use as required?
Special tests (moly breakthrough, leak tests,
etc) required?
Dose calibration checks performed?
Posting & labeling as required?

20.203

NOTES & REMARKS:

6. Storage of materials

Material secured in both restricted and
unrestricted areas? Adequately?

20.207

NOTES & REMARKS:

All material stored in refrigerator & freezer

7. Facilities

As described in lic cond or application?
Any changes made? Adequacy?

NOTES & REMARKS:

*One refrigerated lab with
separate air handling*

8. Instruments

Survey meters & instruments adequate for
program?
Instruments & meters operable? Calibrated?
Calibration adequate?

NOTES & REMARKS:

*See Exhibit C over to
Calibrated quarterly by NIST - 10/1/10*

AREAS INSPECTED AND FINDINGS

Licensee: _____

License no: _____

Amendment no: _____

| INSPECTION ITEMS | CRITERIA | FINDING |
|---|--------------|--|
| <u>9. Receipt and transfer of material</u> | | <u>X</u> |
| Written procedures for pickup, receiving, opening packages? | 20.205 | <i>all packages checked for - 10/1</i> |
| Survey of packages when received? | 20.205(c)(1) | |
| Records of survey of packages? | 20.401(b) | |
| Transfer of materials proper? Transfer records maintained? | 30.41, 30.51 | |
| Authorized containers used? Shipping papers & package labels proper for packages on hand? | 71.5 | |

NOTES & REMARKS:

10. 11. 12. 13. 14. 15. 16. 17. 18. 19. 20. 21. 22. 23. 24. 25. 26. 27. 28. 29. 30. 31. 32. 33. 34. 35. 36. 37. 38. 39. 40. 41. 42. 43. 44. 45. 46. 47. 48. 49. 50. 51. 52. 53. 54. 55. 56. 57. 58. 59. 60. 61. 62. 63. 64. 65. 66. 67. 68. 69. 70. 71. 72. 73. 74. 75. 76. 77. 78. 79. 80. 81. 82. 83. 84. 85. 86. 87. 88. 89. 90. 91. 92. 93. 94. 95. 96. 97. 98. 99. 100. 101. 102. 103. 104. 105. 106. 107. 108. 109. 110. 111. 112. 113. 114. 115. 116. 117. 118. 119. 120. 121. 122. 123. 124. 125. 126. 127. 128. 129. 130. 131. 132. 133. 134. 135. 136. 137. 138. 139. 140. 141. 142. 143. 144. 145. 146. 147. 148. 149. 150. 151. 152. 153. 154. 155. 156. 157. 158. 159. 160. 161. 162. 163. 164. 165. 166. 167. 168. 169. 170. 171. 172. 173. 174. 175. 176. 177. 178. 179. 180. 181. 182. 183. 184. 185. 186. 187. 188. 189. 190. 191. 192. 193. 194. 195. 196. 197. 198. 199. 200. 201. 202. 203. 204. 205. 206. 207. 208. 209. 210. 211. 212. 213. 214. 215. 216. 217. 218. 219. 220. 221. 222. 223. 224. 225. 226. 227. 228. 229. 230. 231. 232. 233. 234. 235. 236. 237. 238. 239. 240. 241. 242. 243. 244. 245. 246. 247. 248. 249. 250. 251. 252. 253. 254. 255. 256. 257. 258. 259. 260. 261. 262. 263. 264. 265. 266. 267. 268. 269. 270. 271. 272. 273. 274. 275. 276. 277. 278. 279. 280. 281. 282. 283. 284. 285. 286. 287. 288. 289. 290. 291. 292. 293. 294. 295. 296. 297. 298. 299. 300. 301. 302. 303. 304. 305. 306. 307. 308. 309. 310. 311. 312. 313. 314. 315. 316. 317. 318. 319. 320. 321. 322. 323. 324. 325. 326. 327. 328. 329. 330. 331. 332. 333. 334. 335. 336. 337. 338. 339. 340. 341. 342. 343. 344. 345. 346. 347. 348. 349. 350. 351. 352. 353. 354. 355. 356. 357. 358. 359. 360. 361. 362. 363. 364. 365. 366. 367. 368. 369. 370. 371. 372. 373. 374. 375. 376. 377. 378. 379. 380. 381. 382. 383. 384. 385. 386. 387. 388. 389. 390. 391. 392. 393. 394. 395. 396. 397. 398. 399. 400. 401. 402. 403. 404. 405. 406. 407. 408. 409. 410. 411. 412. 413. 414. 415. 416. 417. 418. 419. 420. 421. 422. 423. 424. 425. 426. 427. 428. 429. 430. 431. 432. 433. 434. 435. 436. 437. 438. 439. 440. 441. 442. 443. 444. 445. 446. 447. 448. 449. 450. 451. 452. 453. 454. 455. 456. 457. 458. 459. 460. 461. 462. 463. 464. 465. 466. 467. 468. 469. 470. 471. 472. 473. 474. 475. 476. 477. 478. 479. 480. 481. 482. 483. 484. 485. 486. 487. 488. 489. 490. 491. 492. 493. 494. 495. 496. 497. 498. 499. 500. 501. 502. 503. 504. 505. 506. 507. 508. 509. 510. 511. 512. 513. 514. 515. 516. 517. 518. 519. 520. 521. 522. 523. 524. 525. 526. 527. 528. 529. 530. 531. 532. 533. 534. 535. 536. 537. 538. 539. 540. 541. 542. 543. 544. 545. 546. 547. 548. 549. 550. 551. 552. 553. 554. 555. 556. 557. 558. 559. 560. 561. 562. 563. 564. 565. 566. 567. 568. 569. 570. 571. 572. 573. 574. 575. 576. 577. 578. 579. 580. 581. 582. 583. 584. 585. 586. 587. 588. 589. 590. 591. 592. 593. 594. 595. 596. 597. 598. 599. 600. 601. 602. 603. 604. 605. 606. 607. 608. 609. 610. 611. 612. 613. 614. 615. 616. 617. 618. 619. 620. 621. 622. 623. 624. 625. 626. 627. 628. 629. 630. 631. 632. 633. 634. 635. 636. 637. 638. 639. 640. 641. 642. 643. 644. 645. 646. 647. 648. 649. 650. 651. 652. 653. 654. 655. 656. 657. 658. 659. 660. 661. 662. 663. 664. 665. 666. 667. 668. 669. 670. 671. 672. 673. 674. 675. 676. 677. 678. 679. 680. 681. 682. 683. 684. 685. 686. 687. 688. 689. 690. 691. 692. 693. 694. 695. 696. 697. 698. 699. 700. 701. 702. 703. 704. 705. 706. 707. 708. 709. 710. 711. 712. 713. 714. 715. 716. 717. 718. 719. 720. 721. 722. 723. 724. 725. 726. 727. 728. 729. 730. 731. 732. 733. 734. 735. 736. 737. 738. 739. 740. 741. 742. 743. 744. 745. 746. 747. 748. 749. 750. 751. 752. 753. 754. 755. 756. 757. 758. 759. 760. 761. 762. 763. 764. 765. 766. 767. 768. 769. 770. 771. 772. 773. 774. 775. 776. 777. 778. 779. 780. 781. 782. 783. 784. 785. 786. 787. 788. 789. 790. 791. 792. 793. 794. 795. 796. 797. 798. 799. 800. 801. 802. 803. 804. 805. 806. 807. 808. 809. 810. 811. 812. 813. 814. 815. 816. 817. 818. 819. 820. 821. 822. 823. 824. 825. 826. 827. 828. 829. 830. 831. 832. 833. 834. 835. 836. 837. 838. 839. 840. 841. 842. 843. 844. 845. 846. 847. 848. 849. 850. 851. 852. 853. 854. 855. 856. 857. 858. 859. 860. 861. 862. 863. 864. 865. 866. 867. 868. 869. 870. 871. 872. 873. 874. 875. 876. 877. 878. 879. 880. 881. 882. 883. 884. 885. 886. 887. 888. 889. 890. 891. 892. 893. 894. 895. 896. 897. 898. 899. 900. 901. 902. 903. 904. 905. 906. 907. 908. 909. 910. 911. 912. 913. 914. 915. 916. 917. 918. 919. 920. 921. 922. 923. 924. 925. 926. 927. 928. 929. 930. 931. 932. 933. 934. 935. 936. 937. 938. 939. 940. 941. 942. 943. 944. 945. 946. 947. 948. 949. 950. 951. 952. 953. 954. 955. 956. 957. 958. 959. 960. 961. 962. 963. 964. 965. 966. 967. 968. 969. 970. 971. 972. 973. 974. 975. 976. 977. 978. 979. 980. 981. 982. 983. 984. 985. 986. 987. 988. 989. 990. 991. 992. 993. 994. 995. 996. 997. 998. 999. 1000.

10. Personnel protection - external

| | | |
|---|----------------------|--|
| Personnel monitoring controls adequate? | 20.101, 20.202 | <i>OK</i> <i>Survey film has been checked - West is correct</i> |
| Exposures minimized? | | |
| Exposure records (NRC-4 or 5) maintained? | 20.102(b), 20.401(a) | |
| Available for employee review? | | |
| Surveys conducted? Adequate? | 20.201 | |
| Records of monitoring, surveys? | 20.401 | <i>West is correct</i> |
| Levels in unrestricted areas within limits? | 20.1, 20.105 | |

NOTES & REMARKS:

Monthly read - level in eye = 10.101, 20.202

11. Personnel protection - internal

| | |
|--|------------------|
| Airborne concentrations in restricted areas? | 20.103 |
| Exposures to minors? | 20.104 |
| Posting of airborne radioactivity areas? | 20.203(d) |
| Survey, monitoring adequate for airborne radioactivity, surface contamination? Records maintained? | 20.201 20.401 |

NOTES & REMARKS:

Weekly wipe test - - Records kept.
Wipe test - installed in 11/1/83

INSPECTION REPORT NUMBER

AREAS INSPECTED AND FINDINGS

Licensee: License no: Amendment no:

| INSPECTION ITEM | CRITERIA | FINDING |
|---------------------------------------|---|---------|
| 12. Effluent controls, waste disposal | | |
| Release of effluents controlled? | 20.106, 20.303 | OK |
| Waste disposals controlled? | 20.301, 20.303, 20.304, 20.305 | OK |
| Procedures, records maintained? | 20.401, Lic Cond | |
| Surveys made? Adequate? | 20.401 | |
| NOTES & REMARKS: | <p>Handwritten notes: "I reviewed the records and found them adequate." "H's records were adequate." "OK"</p> | |

| | |
|--|----------------|
| 13. <u>Notifications and reports</u> | 19.13 |
| To individuals. | 20.403, 20.405 |
| Overexposures, excessive levels & concentrations, incidents. | 20.407; 20.408 |
| Personnel exposures and monitoring, termination reports. | 20.402 |
| Theft or loss of licensed material. | |
| NOTES & REMARKS: | |

| | |
|---|----------|
| 14. <u>Posting of notices</u> | |
| Part 20, license & documents, procedures, notice of violations posted? | 19.11(a) |
| NRC-3 posted? | 19.11(c) |
| NOTES & REMARKS: | |

15. Other license conditions

Lic

Reviewed records with licensee

Handwritten note: "Licensee was properly informed of all conditions." "OK"



UNITED STATES
NUCLEAR REGULATORY COMMISSION
REGION II
101 MARIETTA ST., N.W., SUITE 3100
ATLANTA, GEORGIA 30303

NOV 20 1981

Arlington Hospital
ATTN: Mr. Sverha, Administrator
1701 North George Mason Drive
Arlington, VA 22205

Gentlemen:

Subject: Report No. 45-01099-01/81-01

This refers to the routine safety inspection conducted by Mr. R. A. Brown of this office on November 5, 1981, of activities authorized by NRC License No. 45-01099-01 for your facility. Our preliminary findings were discussed with you and members of your staff at the conclusion of the inspection.

The inspection was an examination of the activities conducted under your license as they relate to radiation safety and to compliance with the Commission's rules and regulations and the conditions of your license. The inspection consisted of selective examinations of procedures and representative records, interviews with personnel, and observations by the inspector.

During the inspection, it was found that certain activities under your license appear to violate NRC requirements. This item and references to pertinent requirements are listed in the Notice of Violation enclosed herewith as Appendix A. Elements to be included in your response are delineated in Appendix A.

In accordance with 10 CFR 2.790(a), a copy of this letter and the enclosure(s) will be placed in the NRC's Public Document Room unless you notify this office, by telephone, within ten days of the date of this letter and submit written application to withhold information contained therein within thirty days of the date of this letter. Such application must be consistent with the requirements of 2.790(b)(1).

Should you have any questions concerning this letter, we will be glad to discuss them with you.

Sincerely,

Albert F. Gibson, Chief
Technical Inspection Branch
Division of Engineering and
Technical Inspection

Enclosure: See Page 2

8112310203 28

2pp.

NOV 20 1981

2

Arlington Hospital

Enclosure:
Appendix A, Notice of Violation

APPENDIX A
NOTICE OF VIOLATION

License No. 45-01099-01

Arlington Hospital

As a result of the inspection conducted on November 5, 1981, and in accordance with the Interim Enforcement Policy, 45 FR 66754 (October 7, 1980), the following violation was identified.

License Condition 17 requires that licensed material be used in accordance with statements and procedures contained in your application dated October 27, 1977. One statement in your application requires your Medical Isotopes Committee to meet quarterly.

Contrary to the above, your Medical Isotopes Committee has met on only one occasion in the first 10 months of 1981.

This is a Severity Level V Violation (Supplement VII).

Pursuant to the provisions of 10 CFR 2.201, you are hereby required to submit to this office within thirty days of the date of this Notice, a written statement or explanation in reply, including: (1) admission or denial of the alleged violation; (2) the reasons for the violation if admitted; (3) the corrective steps which have been taken and the results achieved; (4) corrective steps which will be taken to avoid further violations; and (5) the date when full compliance will be achieved. Consideration may be given to extending your response time for good cause shown. Under the authority of Section 182 of the Atomic Energy Act of 1954, as amended, this response shall be submitted under oath or affirmation.

Date: NOV 20 1981

8112310206

10pp.

Attached

- ☐ Appendix A
☐ Appendix B
☐ Appendix C
☐ Memo

INSPECTION REPORT NO. 81-01

Arlington Hospital
1701 N. George Mason Dr.
Arlington, Va 22203

Licensee contact: K LandisTelephone no. 703-558-5558License no. 10-000000Last amendment and date: 1/15/81Category: G, and Priority: TV, as of last amendment.Inspection date(s): 11/5/81Type of inspection: routine-unannounced

SUMMARY OF FINDINGS AND ACTION

- ☐ No noncompliance, clear 591 issued
☒ Noncompliance, Appendix A
☐ Action on previous noncompliance, Appendix B

- ☐ Noncompliance, 591 issued
☐ Regional action Hq action
☐ Supplemental info, Appendix C

RECOMMENDATIONS

See basis in Appendix C or attached memo.

☐ Change Category to: 5/84☐ Change Priority to: ☐ Next inspection date: 5/84

PERSONS CONTACTED

Dr. LandisMr. SushaD. LinderMrs. HersonMr. YoungInspector: Robert G. BrownApproved: 11/9/81

INSPECTION PLAN AND REPORT NUMBER

Plan approved: _____

Date: _____

License no: _____

Licensee: _____

| Inspection Items | Scheduled for inspection | Post-inspection status | Module no. | 766 Time Info |
|---|--------------------------|------------------------|------------|---------------|
| Management meeting - Entrance and Exit Interviews [REQUIRED] | ✓ | | 30703B | 1/16 |
| Initial Management Meeting | | | | |
| Program requirements, MC 28 [REQUIRED] | ✓ | | | 1/16 |
| Licensee Event Followup | | | 92700B | |
| Followup on Inspector-identified problems | | | 92701B | |
| Followup on Noncompliance and Deviations | | | 92702B | |
| IE Bulletin/Immediate Action Letter Followup | | | 92703B | |
| Followup on Headquarters Requests | | | 92704B | |
| Followup on Regional Requests | | | 92705B | |
| Independent Inspection Effort [REQUIRED] | ✓ | | 92706B | 1/16 |
| Inspector Dispatched to Site | | | 93700B | |
| Followup on Significant Event Occurring During Inspection | | | 93701B | |

Mr J. Swacha - Administrator

Mr R. McIntyre - assistant

Dr. McWilliam - Chief of Medicine

Dr. Landes - Chief of Nuc Med.

Dr. Lundeen
Jim Young - Chief Tech
Glen - physicist

— Ms. Hixson - Chief Tech
Susan Matson

Chris Jaskowicz
Anwar Rizvi - part time

Isotopic Comm:

Dr. Smith

Dr. Becker - RSO

Dr. Linn - Pathology

Dr. Gaydos - internal med.

Dr. Lundeen - physicist

Jeff Thuring

Mr. McIntyre -

Dr. Cummings
Dr. Dolan

meetings:

10/27/80

12/17/80

2/12/80

2/4/80

11/6/79

7/1/80

Licensee: Antington Hospital License no: 45 2107-0 Amendment no:

AREAS INSPECTED AND FINDINGS

CRITERIA

FINDING

INSPECTION ITEMS

1. Organization

Structure of organization as described in requirements?

Lic Cond

NOTES & REMARKS:

See opposite page

2. Licensee internal audits

Scope and frequency of audits as required?
Conducted by appropriate persons? Records maintained? Reviewed by management?
Deficiencies identified & corrected?Lic Cond

NOTES & REMARKS:

*HPSI visits monthly - reports maintained**Isotope Committee - see opposite*

3. Training and qualification of personnel

Training & retraining conducted as required?
Written & oral exams conducted? Examination results reviewed by management?
Instructions to workers per 19.12?Lic Cond

NOTES & REMARKS:

all techs registered.

19.12

HPSI training for nursing, housekeeping staff → radiation safety, therapy procedures, etc

4. Radiation protection procedures

Procedures available and implemented? Identify radiopharmaceutical and dose(s)? Cover handling of patients receiving therapeutic doses? Cover handling of cadavers?
Emergency procedures for spills, etc?
Personnel understand procedures?Lic Cond

NOTES & REMARKS:

Procedure manual available - covers doses, calibration, safety, etc

Material received from Plowdoff -
Delivered at 6:00 AM each day -

Standing order: 300 lbs

I¹³¹ → 20 to 30 per year. hypothyroid - 300 g M¹³¹ usual dose

I¹³¹ → 30-40 per year - Carcinoma - serial doses, 30 M¹³¹ per dose for 3 days in a row.

Xe¹³³ → no use in past 3 months.

Lungs, Bones, Brain etc
~ 350 procedures per month
~ 25 M¹³¹ for brain scans

✓ ventilation rate checked quarterly
records.

- C¹³² - 1 or 2 per month

- Au¹⁹⁸ - 2 or 3 per year

- I¹²⁵ - 2 or 3 per year

- T^{99m} - 2 or 3 per year

AREAS INSPECTED AND FINDINGS

Licensee: Wilmington Hospital License no: 12-000001 Amendment no: 45

| INSPECTION ITEM | CRITERIA | FINDING |
|--|--|---|
| <p><u>5. Use of materials</u></p> <p>Procurement and use as required?</p> <p>Special tests (moly breakthrough, leak tests, etc) required?</p> <p>Dose calibration checks performed?</p> <p>Posting & labeling as required?</p> <p>NOTES & REMARKS:</p> | <p>Lic Cond <u> </u></p> <p><i>Moly breakthrough recorded on QC sheet for Pham at 10:20</i></p> <p>20.203</p> <p><i>Linearity checks quarterly</i></p> <p><i>Daily constancy checks</i></p> | <p><u>OK</u></p> <p><i>Records kept.</i></p> <p><u>OK</u></p> |
| <p><u>6. Storage of materials</u></p> <p>Material secured in both restricted and unrestricted areas? Adequately?</p> <p>NOTES & REMARKS:</p> | <p>20.207</p> <p><i>All NM material stored in hot lab, therapy sources stored in Linac Room</i></p> | <p><u>OK</u></p> |
| <p><u>7. Facilities</u></p> <p>As described in lic cond or application?</p> <p>Any changes made? Adequacy?</p> <p>NOTES & REMARKS:</p> | <p>Lic Cond <u> </u></p> <p><i>Small hot lab with fume hood</i></p> <p><i>Camera room</i></p> | <p><u>OK</u></p> |
| <p><u>8. Instruments</u></p> <p>Survey meters & instruments adequate for program?</p> <p>Instruments & meters operable? Calibrated?</p> <p>Calibration adequate?</p> <p>NOTES & REMARKS:</p> | <p>Lic Cond <u> </u></p> <p><i>1 ea Eberline 6170N5130</i></p> <p><i>calibrated quarterly by 115</i></p> | <p><u>OK</u></p> <p><i>Records kept.</i></p> |

Group VI Sources

- Use Wipe applicator for I^{125} & Au^{198}
- 10 Co^{137} Sources total of 52.26 mCi
Rec in Feb. 1977
- Dedicated oncology unit - 2 rooms
used for implant. Nursing staff
trained.
- Inventories before & after each
procedure - also surveys conducted,
records kept.
- Storage area in LINAC room
- 12 Ir^{192} seeds rec. on 11/4/81 = 149 mCi
-

AREAS INSPECTED AND FINDINGS

Licensee: Burlington Hospital License no: 11-010927 Amendment no: 11

| INSPECTION ITEMS | CRITERIA | FINDING |
|---|--------------|---|
| 9. Receipt and transfer of material | | <u>OK</u> |
| Written procedures for pickup, receiving, opening packages? | 20.205 | Packages surveyed upon receipt, wife tested also. Records kept. |
| Survey of packages when received? | 20.205(c)(1) | |
| Records of survey of packages? | 20.401(b) | |
| Transfer of materials proper? Transfer records maintained? | 30.41, 30.51 | |
| Authorized containers used? Shipping papers & package labels proper for packages on hand? | 71.5 | |
| NOTES & REMARKS: | | |

| | | |
|---|----------------------|--|
| 10. Personnel protection - external | | <u>OK</u> |
| Personnel monitoring controls adequate? | 20.101, 20.202 | Siemens T5 since 5/80 - improves 2.4 - extremities - also 800 - WBS |
| Exposures minimized? | 20.102(b), 20.401(a) | |
| Exposure records (NRC-4 or 5) maintained? | 20.201 | |
| Available for employee review? | 20.401 | |
| Surveys conducted? Adequate? | 20.1, 20.105 | |
| Records of monitoring, surveys? | | <u>OK</u> |
| Levels in unrestricted areas within limits? | | |
| NOTES & REMARKS: | | |
| Daily grad. level surveys - records kept | | |

| | | |
|--|------------------|---|
| 11. <u>Personnel protection - internal</u> | | |
| Airborne concentrations in restricted areas? | 20.103 | Sealed source Leak test by HPSI 5/9/80, 8/4/80, 11/20/80. Records kept. |
| Exposures to minors? | 20.104 | |
| Posting of airborne radioactivity areas? | 20.203(d) | |
| Survey, monitoring adequate for airborne radioactivity, surface contamination? Records maintained? | 20.201 20.401 | |
| NOTES & REMARKS: | | |
| Weekly wipe test of. Health Dept. | | |

INSPECTION REPORT NUMBER -01

Page 6 of

787108 - Medical

AREAS INSPECTED AND FINDINGS

Licensee: Adelphi Hospital License no: 500000 Amendment no: 5

| INSPECTION ITEM | CRITERIA | FINDING |
|-----------------|----------|---------|
|-----------------|----------|---------|

12. Effluent controls, waste disposal

Release of effluents controlled?

20.106, 20.303

Waste disposals controlled?

20.301, 20.303, 20.304, 20.305

Procedures, records maintained?

20.401, Lic Cond

Surveys made? Adequate?

20.401

NOTES & REMARKS:

*Solid waste held for decay - surveyed
prior to disposal - recorded & disposed
Surveys etc. returned in information.*

OK

13. Notifications and reports

To individuals.

19.13

Overexposures, excessive levels & concentrations,
incidents.

20.403, 20.405

Personnel exposures and monitoring, termination
reports.

20.407; 20.408

Theft or loss of licensed material.

20.402

NOTES & REMARKS:

No reports required.

OK

14. Posting of notices

Part 20, license & documents, procedures,
notice of violations posted?

19.11(a)

NRC-3 posted?

19.11(c)

NOTES & REMARKS:

All areas properly posted.

OK

15. Other license conditions

Lic

*Radiation levels in hot lab are generally
less than 1 mR/hr, therapy source storage
area < 5.0 mR/hr*

are maintained within limits

TEPA

IE: 1/2

File

1 DEC 1981

Docket Nos: 30-00128 ✓
30-14754 ✓

Sibley Memorial Hospital
ATTN: Mr. J. Shriver
Assistant Administrator
5255 Loughboro Road, N.W.
Washington, D.C. 20016

Gentlemen:

Subject: Combined Inspection 30-00128, 30-14754/81-01

This refers to your letter dated October 20, 1981, in response to our letter dated September 29, 1981.

Based upon a telephone conversation between Dr. Baselga and Mr. Nicolosi of this office on November 5, 1981, it is our understanding that you will evaluate the use of surgical gloves to assure that the hands of your personnel do not become contaminated during the administration of radiopharmaceuticals. We will review this matter during the next inspection of your licensed program.

Your cooperation with us is appreciated.

Sincerely,

Original Signed By:

John D. Kinneman, Chief, Materials
Radiological Protection Section

cc:
Public Document Room (PDR)
Nuclear Safety Information Center (NSIC)
District of Columbia

bcc:
Region I Docket Room (with concurrences)

Kinneman
11/30/81

~~8112160011~~
/p.

RIDS - 1E107
29

Sirry Memorial Hospital

5255 Loughboro Road, N.W.

Washington, D.C. 20016

202-537-4000

October 20, 1981

Mr. John D. Kinneman
Chief, Materials Radiological
Protection Section
Technical Inspection Branch
U. S. Regulatory Commission
631 Park Avenue
King of Prussia, Pennsylvania 19406

Dear Mr. Kinneman:

Thank you for your letter of September 29, 1981 regarding the visit by Miss J. McGinness on September 3, 1981.

With reference to the comments set forth in Appendix A of your letter, we have taken the following actions:

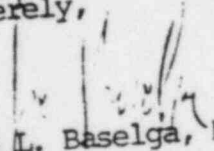
- A. We realize the importance of wearing gloves when handling radioactive materials. However, you must realize the difficulty in locating a vein when wearing gloves. In order not to cause undue pain to the patient, it is almost always necessary to remove a glove and locate the vein. To try and replace the glove with the needle in the vein would be impossible.

It is proposed that the technologist wear a finger cot on the finger that is used to apply pressure on the gauze pad at the injection site whenever it is deemed too difficult to inject with both gloves on. We intend to implement this immediately. Closer supervision will be applied in the future to ensure that this is adhered to.

- B. Both technicians have been instructed to withdraw the key from the therapy console whenever they are not present. In addition, a sign will be posted in plain view to remind them of this item.

We hope that these actions meet with your approval.

Sincerely,


Jose L. Baselga, M.D.
Radiation Safety Officer

JLB:lt

8112160018
1p.

29 SEP 1981

Docket Nos. 30-128
30-14754 ✓

Sibley Memorial Hospital
ATTN: Mr. J. Shriver
Assistant Administrator
5255 Loughboro Road, N.W.
Washington, D.C. 20016

Gentlemen:

Subject: Inspection 81-01

This refers to the routine safety inspection conducted by Miss J. McGinness of this office on September 3, 1981 of activities authorized by NRC License Nos. 08-7398-01 and 08-7398-03 and to the discussions of our findings held by Miss McGinness with yourself and members of your staff at the conclusion of the inspection.

The inspection was an examination of activities conducted under your licenses as they relate to radiation safety and to compliance with the Commission's rules and regulations and the conditions of your licenses. The inspection consisted of selective examinations of procedures and representative records, interviews with personnel, measurements made by the inspector, and observations by the inspector.

Our inspector also verified the steps you have taken to correct the items of noncompliance brought to your attention in the enclosure to our letter dated January 31, 1979. We have no further questions regarding the steps you took to correct items A.1 and A.3. With regard to item A.2, this item has recurred.

In addition, our inspector examined those activities conducted under License No. 08-7398-03 relating to the subject covered in your letter to the NRC dated January 8, 1981. We have no further questions regarding this matter.

Based on the results of this inspection, it appears that certain of your activities were not conducted in full compliance with NRC requirements, as set forth in the Notice of Violation, enclosed herewith as Appendix A. These items of noncompliance have been categorized into the levels described in the Federal Register Notice (45 FR 66754) dated October 7, 1980. You are required to respond to this letter and in preparing your response, you should follow the instructions in Appendix A.

RI:DE&TI
McGinness/cg1

9/24/81

McGinness
9-25-81

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2pp.

29 SEP 1981

A in the Notice of Violation enclosed with this letter was identified as a previous inspection of your licensed activities on January 10, 1979 was documented in the enclosure to our letter dated January 31, 1979. Our September 3, 1981 inspection, it appears your corrective actions in response to our January 31, 1979 letter were not effective since this item has recurred. Recurrent and uncorrected items of noncompliance are given additional weight in the consideration and selection of appropriate enforcement action. Therefore, in your response to this letter, you should give particular attention to those actions taken or planned to ensure that identified items of noncompliance be completely corrective and will not recur.

In accordance with Section 2.790 of the NRC's "Rules of Practice," Part 2, Rule 10, Code of Federal Regulations, a copy of this letter and your reply will be placed in the Public Document Room.

If you have any questions concerning this inspection, we will be pleased to discuss them with you.

Sincerely,

Original Signed By:

John D. Kinneman, Chief, Materials
Radiological Protection Section,
Technical Inspection Branch

Enclosure: Appendix A, Notice of Violation

CC:
Public Document Room (PDR)
Nuclear Safety Information Center (NSIC)
District of Columbia

CC:
Region I Docket Room (with concurrences)
Chief, Operational Support Branch (w/o encls)

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APPENDIX A

NOTICE OF VIOLATION

Sibley Memorial Hospital
Washington, D.C. 20016

Docket Nos. 30-00128
30-14754
License Nos. 08-7398-01
08-7398-03

As a result of the inspection conducted on September 3, 1981, and in accordance with the Interim Enforcement Policy, 45 FR 66754 (October 7, 1980), the following violations were identified:

- A. Condition 16 of your license requires that licensed material be possessed and used in accordance with statements, representations and procedures contained in your application dated August 25, 1978.

Item 15.5 of this application, entitled "Radioisotope Laboratory Procedures", requires that technicians wear gloves when working with radioactive materials.

Contrary to this requirement, on the day of the inspection, September 3, 1981, gloves were not worn by your technicians during the administration of radioactive materials to patients.

This is a Severity Level IV Violation Supplement VII.

- B. 10 CFR 20.207(a) requires that licensed materials stored in an unrestricted area be secured against unauthorized removal from the place of storage. 10 CFR 20.207(b) requires that materials not in storage be under constant surveillance and immediate control of the licensee. As defined in 10 CFR 20.3(17), an unrestricted area is any area access to which is not controlled by the licensee for purposes of protection of individuals from exposure to radiation and radioactive materials.

Contrary to this requirement, as of the day of the inspection, September 3, 1981, your radiation therapy technicians routinely left the key to the teletherapy unit in the console when it was not under your constant surveillance and immediate control.

This a Severity Level IV Violation (Supplement IV)

Pursuant to the provisions of 10 CFR 2.201, the Sibley Memorial Hospital is hereby required to submit to this office, within thirty days of the date of this Notice, a written statement or explanation in reply, including: (1) the corrective steps which have been taken and the results achieved; (2) corrective

OFFICIAL RECORD COPY

8117200652
13pp.

steps which will be taken to avoid further violations; and (3) the date when full compliance will be achieved. Under the authority of Section 182 of the Atomic Energy Act of 1954, as amended, this response shall be submitted under oath or affirmation. Where good cause is shown, consideration will be given to extending your response time.

The responses directed by this Notice are not subject to the clearance procedures of the Office of Management and Budget as required by the Paperwork Reduction Act of 1980, PL 96-511.

Dated 29 SEP 1981

Original Signed By:
John D. Kinneman, Chief, Materials
Radiological Protection Section,
Technical Inspection Branch

MEDICAL

Page 1 of

Attached

- ☐ Appendix A
- ☐ Appendix B
- ☐ Appendix C
- ☐ Memo

INSPECTION REPORT NO. 81-01

Libby Memorial
5255 Leightme Rd
Washington, D. C. 20016

Licensee contact: Dr Wm Battelle Telephone no. 202 - 537-4000

License no. 28-07398-63 Last amendment and date: 4 - 7/24/81

Category: Q and Priority: IV as of last amendment.

Inspection date(s): 9/13/81 Type of inspection: Routine
Unannounced

SUMMARY OF FINDINGS AND ACTION

- | | |
|---|--|
| <input type="checkbox"/> No noncompliance, clear 591 issued | <input type="checkbox"/> Noncompliance, 591 issued |
| <input checked="" type="checkbox"/> Noncompliance, Appendix A | <input type="checkbox"/> Regional action Hq action |
| <input type="checkbox"/> Action on previous noncompliance, Appendix B | <input type="checkbox"/> Supplemental info, Appendix C |

RECOMMENDATIONS

See basis in Appendix C or attached memo.

☐ Change Category to:

☐ Change Priority to:

☒ Next inspection date: 9/84

PERSONS CONTACTED

| | |
|--|--------------------------------|
| <u>Danice Reid - supervisor named.</u> | |
| * <u>Dr Battelle - nurse</u> | <u>Dr. Jussup - ADMN ASST.</u> |
| <u>G. Brooker - M.T.</u> | |
| * <u>J. Skinner - ASST ADMN</u> | |

Inspector: J. Malinowski

Approved: [Signature]

9/14/81
9/17/81

Date: _____

License No: _____

| Inspection Items | Scheduled for Inspection | Post-Inspection Status | Module No. | 766 Time Info |
|---|--------------------------|------------------------|------------|---------------|
| Management Meeting - Entrance and Exit Interviews (Required) | / | | 30703B | 10 min |
| Program Requirements, MC 2860 (Required) | / | | 78710B | 1 1/2 |
| Followup on Noncompliance and Deviations | / | | 92702B | 10 min |
| Independent Inspection Effort (Required) | / | | 92706B | 3/4 |
| Transportation | | | 86740B | |
| Licensee Event Followup | | | 92700B | |
| Followup on Inspector-Identified Problems | | | 92701B | |
| IE Bulletin/Immediate Action Letter Followup | | | 92703B | |
| Followup on Headquarters Requests | | | 92704B | |
| Followup on Regional Requests | | | 92705B | |
| Inspector Dispatched to Site | | | 93700B | |
| Followup on Significant Event Occurring During Inspection | | | 93701B | |
| Initial Management Meeting | | | 38800B | |
| | | | | |

AREAS INSPECTED AND FINDINGS

Licensee: _____ License no: _____ Amendment no: _____

| INSPECTION ITEMS | CRITERIA | FINDING |
|---|--------------------|----------|
| 1. <u>Organization</u> | | <u>C</u> |
| Structure of organization as described in requirements? | Lic Cond <u>17</u> | |

NOTES & REMARKS:

2. Licensee internal auditsLic Cond 17C

- Scope and frequency of audits as required?
- Conducted by appropriate persons? Records maintained? Reviewed by management?
- Deficiencies identified & corrected?

NOTES & REMARKS:

*PM & consultants - monthly visits.*3. Training and qualification of personnelLic Cond 17C

- Training & retraining conducted as required?
- Written & oral exams conducted? Examination results reviewed by management?
- Instructions to workers per 19.12?

19.12

NOTES & REMARKS:

*technologists very well informed, conscientious, etc.*4. Radiation protection proceduresLic Cond 17C

- Procedures available and implemented? Identify radiopharmaceutical and dose(s)? Cover handling of patients receiving therapeutic doses? Cover handling of cadavers?
- Emergency procedures for spills, etc?
- Personnel understand procedures?

NOTES & REMARKS:

INSPECTION REPORT NUMBER _____

Page 4 of

787108 - Medical

AREAS INSPECTED AND FINDINGS

Licensee: _____ License no: _____ Amendment no: _____

| INSPECTION ITEM | CRITERIA | FINDING |
|-----------------|----------|---------|
|-----------------|----------|---------|

5. Use of materials

Lic Cond 17

C

Procurement and use as required?

Special tests (moly breakthrough, leak tests, etc) required?

Dose calibration checks performed?

Posting & labeling as required?

NOTES & REMARKS:

-using Western Diagnostic Services
daily
20.203
activity performed w/100 mCi source.

6. Storage of materials

20.207

Material secured in both restricted and unrestricted areas? Adequately?

NOTES & REMARKS:

C

7. Facilities

Lic Cond 17

C

As described in lic cond or application?

Any changes made? Adequacy?

NOTES & REMARKS:

8. Instruments

Lic Cond 17

C

Survey meters & instruments adequate for program?

Instruments & meters operable? Calibrated?

Calibration adequate?

NOTES & REMARKS:

RMC calibrating survey meters.

AREAS INSPECTED AND FINDINGS

Licensee: _____ License no: _____ Amendment no: _____

| INSPECTION ITEMS | CRITERIA | FINDING |
|---|--------------|---------|
| <u>9. Receipt and transfer of material</u> | | |
| Written procedures for pickup, receiving, opening packages? | 20.205 | |
| Survey of packages when received? | 20.205(c)(1) | |
| Records of survey of packages? | 20.401(b) | |
| Transfer of materials proper? Transfer records maintained? | 30.41, 30.51 | |
| Authorized containers used? Shipping papers & package labels proper for packages on hand? | 71.5 | |
| NOTES & REMARKS: | | |

10. Personnel protection - external

| | |
|---|----------------------|
| Personnel monitoring controls adequate? | 20.101, 20.202 |
| Exposures minimized? | |
| Exposure records (NRC-4 or 5) maintained? | 20.102(b), 20.401(a) |
| Available for employee review? | |
| Surveys conducted? Adequate? <i>daily</i> | 20.201 |
| Records of monitoring, surveys? <i>weekly</i> | 20.401 |
| Levels in unrestricted areas within limits? | 20.1, 20.105 |

NOTES & REMARKS:

11. Personnel protection - internal

| | |
|--|------------------|
| Airborne concentrations in restricted areas? | 20.103 |
| Exposures to minors? | 20.103 |
| Posting of airborne radioactivity areas? | 20.203(d) |
| Survey, monitoring adequate for airborne radioactivity, surface contamination? Records maintained? | 20.201 20.401 |

NOTES & REMARKS:

*using capsule form #121. taking
thyroid cancer tx about 4 months.*

INSPECTION REPORT NUMBER _____

Page 6 of _____

787108 - Medical

AREAS INSPECTED AND FINDINGS

Licensee: _____ License no: _____ Amendment no: _____

| INSPECTION ITEM | CRITERIA | FINDING |
|-----------------|----------|---------|
|-----------------|----------|---------|

12. Effluent controls, waste disposal

Release of effluents controlled?

20.106, 20.303

Waste disposals controlled?

20.301, 20.303, 20.304, 20.305

Procedures, records maintained?

20.401, Lic Cond _____

Surveys made? Adequate?

20.401

NOTES & REMARKS:

decaying waste (syringes, shields, syringes,
sent Back to Western Diagnostic Services)

13. Notifications and reports

To individuals.

19.13

Overexposures, excessive levels & concentrations,
incidents.

20.403, 20.405

Personnel exposures and monitoring, termination
reports.

20.407, 20.408

Theft or loss of licensed material.

20.402

NOTES & REMARKS:14. Posting of noticesPart 20, license & documents, procedures,
notice of violations posted?

19.11(a)

NRC-3 posted?

19.11(c)

NOTES & REMARKS:15. Other license conditions

Lic

AREAS INSPECTED AND FINDINGS

Licensee: _____ License no: _____ Amendment no: _____

| INSPECTION ITEMS | CRITERIA | FINDING |
|--------------------------------------|----------|---------|
| 16. <u>Confirmatory measurements</u> | | _____ |

17. Independent inspection effort

Accountability for emergency response
Special One Call notifications
Wyes
Laboratories
X. procedures

18. Incidents and events

Any incidents of misadministrations,
contamination, etc, not otherwise
covered by reports?

INSPECTION REPORT NUMBER _____

Page ____ of ____

APPENDIX A - DOCUMENTATION OF NONCOMPLIANCE

Licensee: _____

License no: _____

| Reference | Basis for noncompliance |
|-----------|-------------------------|
|-----------|-------------------------|

Report item _____

10 CFR _____

Lic Cond 17

Type n/c _____

gloves not worn during inspection
of RADIO PHARMACEUTICALS.
ROUTINELY.

Report item _____

10 CFR _____

Lic Cond _____

Type n/c _____

Report item _____

10 CFR _____

Lic Cond _____

Type n/c _____

Report item _____

10 CFR _____

Lic Cond _____

Type n/c _____

Report item _____

10 CFR _____

Lic Cond _____

Type n/c _____

APPENDIX B - LICENSEE ACTION ON PREVIOUS INSPECTION FINDINGS

Licensee: _____

License no: _____

Identification and summary of action taken

Status

Report no: 79-01 Type n/c: _____ Describe: syringe shields

Action taken:

OPEN

used during all phases of
working with pharmaceuticals.

CLOSED

Report no: 79-01 Type n/c: _____ Describe: g/cics

Action taken:

OPEN

recurrent:

CLOSED

Report no: 79-01 Type n/c: _____ Describe: monitoring

Action taken:

OPEN

techs monitoring selves for
contamination routinely 2/day and any other
time they feel a possibility of
increased contamination.

CLOSED

Report no: _____ Type n/c: _____ Describe: _____

Action taken:

OPEN

CLOSED

Report no: _____ Type n/c: _____ Describe: _____

Action taken:

OPEN

CLOSED

APPENDIX C - SUPPLEMENTARY INFO _____

Licensee: _____

License no: _____

- ☐ Uncorrected/repeated noncompliance
☐ Unusual occurrence, conditions, etc
☐ Basis for change of Category or Priority

- ☐ Unresolved items
☐ Inspector's comments

Small program with 2 cameras. Technician well well informed in all aspects of program & radiation safety. Consultant (R.H.) coming monthly. The hospital is now using Western Diagnostic ~~and~~ services - radiopharmacy out of Alexandria, Va. since August 1981. Prior to this time using Plex matopes (On at least 3 occasions used mislabeled doses from them - Assaying of doses caught ~~one~~ of these doses - the second was injected & reported in letter to NRC dated 1/8/81.
(3) I-131 capsules labeled as I-123 capsules; technician caught due to fact of color of capsule. - - - -
No other problem foreseen in program.

U. S. NUCLEAR REGULATORY COMMISSION
OFFICE OF INSPECTION AND ENFORCEMENT

REGION I

Docket No.:

License No.:

Licensee:

Inspection dates:

Inspector(s):

Scope of Inspection:

Summary of findings and proposed enforcement action:

Package inspection results:

Number of packages opened: _____ (If none, explain why)

Results:

Docket Nos: 30-00128 ✓
30-14754

1 DEC 1981

Sibley Memorial Hospital
ATTN: Mr. J. Shriver
Assistant Administrator
5255 Loughboro Road, N.W.
Washington, D.C. 20016

Gentlemen:

Subject: Combined Inspection 30-00128, 30-14754/81-01

This refers to your letter dated October 20, 1981, in response to our letter dated September 29, 1981.

Based upon a telephone conversation between Dr. Baselga and Mr. Nicolosi of this office on November 5, 1981, it is our understanding that you will evaluate the use of surgical gloves to assure that the hands of your personnel do not become contaminated during the administration of radiopharmaceuticals. We will review this matter during the next inspection of your licensed program.

Your cooperation with us is appreciated.

Sincerely,

Original Signed By:

John D. Kinneman, Chief, Materials
Radiological Protection Section

cc:
Public Document Room (PDR)
Nuclear Safety Information Center (NSIC)
District of Columbia

bcc:
Region I Docket Room (with concurrences)

Kinneman
11/30/81

RIDS - 1E:07

~~8112160011~~

1P.

S. 'ley Memorial Hospital

5255 Longshore Road, N.W.

Washington, D.C. 20016

202-537-4000

October 20, 1981

Mr. John D. Kinneman
Chief, Materials Radiological
Protection Section
Technical Inspection Branch
U. S. Regulatory Commission
631 Park Avenue
King of Prussia, Pennsylvania 19406

Dear Mr. Kinneman:

Thank you for your letter of September 29, 1981 regarding the visit by Miss J. McGinness on September 3, 1981.

With reference to the comments set forth in Appendix A of your letter, we have taken the following actions:

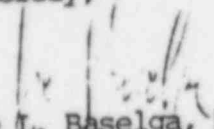
- A. We realize the importance of wearing gloves when handling radioactive materials. However, you must realize the difficulty in locating a vein when wearing gloves. In order not to cause undue pain to the patient, it is almost always necessary to remove a glove and locate the vein. To try and replace the glove with the needle in the vein would be impossible.

It is proposed that the technologist wear a finger cot on the finger that is used to apply pressure on the gauze pad at the injection site whenever it is deemed too difficult to inject with both gloves on. We intend to implement this immediately. Closer supervision will be applied in the future to ensure that this is adhered to.

- B. Both technicians have been instructed to withdraw the key from the therapy console whenever they are not present. In addition, a sign will be posted in plain view to remind them of this item.

We hope that these actions meet with your approval.

Sincerely,


Jose L. Baselga, M.D.
Radiation Safety Officer

JLB:lt

8112160018
1/p

29 SEP 1981

Docket Nos. 30-128 ✓
30-14754

Sibley Memorial Hospital
ATTN: Mr. J. Shriver
Assistant Administrator
5255 Loughboro Road, N.W.
Washington, D.C. 20016

Gentlemen:

Subject: Inspection 81-01

This refers to the routine safety inspection conducted by Miss J. McGinness of this office on September 3, 1981 of activities authorized by NRC License Nos. 08-7398-01 and 08-7398-03 and to the discussions of our findings held by Miss McGinness with yourself and members of your staff at the conclusion of the inspection.

The inspection was an examination of activities conducted under your licenses as they relate to radiation safety and to compliance with the Commission's rules and regulations and the conditions of your licenses. The inspection consisted of selective examinations of procedures and representative records, interviews with personnel, measurements made by the inspector, and observations by the inspector.

Our inspector also verified the steps you have taken to correct the items of noncompliance brought to your attention in the enclosure to our letter dated January 31, 1979. We have no further questions regarding the steps you took to correct items A.1 and A.3. With regard to item A.2, this item has recurred.

In addition, our inspector examined those activities conducted under License No. 08-7398-03 relating to the subject covered in your letter to the NRC dated January 8, 1981. We have no further questions regarding this matter.

Based on the results of this inspection, it appears that certain of your activities were not conducted in full compliance with NRC requirements, as set forth in the Notice of Violation, enclosed herewith as Appendix A. These items of noncompliance have been categorized into the levels described in the Federal Register Notice (45 FR 66754) dated October 7, 1980. You are required to respond to this letter and in preparing your response, you should follow the instructions in Appendix A.

RI:DE&TI
McGinness/cgl

9/24/81

Kinnema
9-25-81

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Jpp.

29 SEP 1981

Item A in the Notice of Violation enclosed with this letter was identified during a previous inspection of your licensed activities on January 10, 1979 and was documented in the enclosure to our letter dated January 31, 1979. From our September 3, 1981 inspection, it appears your corrective actions in response to our January 31, 1979 letter were not effective since this item has recurred. Recurrent and uncorrected items of noncompliance are given additional weight in the consideration and selection of appropriate enforcement action. Therefore, in your response to this letter, you should give particular attention to those actions taken or planned to ensure that identified items of noncompliance will be completely corrective and will not recur.

In accordance with Section 2.790 of the NRC's "Rules of Practice," Part 2, Title 10, Code of Federal Regulations, a copy of this letter and your reply will be placed in the Public Document Room.

Should you have any questions concerning this inspection, we will be pleased to discuss them with you.

Sincerely,

Original Signed By:

John D. Kinneman, Chief, Materials
Radiological Protection Section,
Technical Inspection Branch

Enclosure: Appendix A, Notice of Violation

cc:
Public Document Room (PDR)
Nuclear Safety Information Center (NSIC)
District of Columbia ✓

bcc:
Region I Docket Room (with concurrences)
Chief, Operational Support Branch (w/o encls) ✓

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APPENDIX A

NOTICE OF VIOLATION

Sibley Memorial Hospital
Washington, D.C. 20016

Docket Nos. 30-00128
30-14754
License Nos. 08-7398-01
08-7398-03

As a result of the inspection conducted on September 3, 1981, and in accordance with the Interim Enforcement Policy, 45 FR 66754 (October 7, 1980), the following violations were identified:

- A. Condition 16 of your license requires that licensed material be possessed and used in accordance with statements, representations and procedures contained in your application dated August 25, 1978.

Item 15.5 of this application, entitled "Radioisotope Laboratory Procedures", requires that technicians wear gloves when working with radioactive materials.

Contrary to this requirement, on the day of the inspection, September 3, 1981, gloves were not worn by your technicians during the administration of radioactive materials to patients.

This is a Severity Level IV Violation Supplement VII.

- B. 10 CFR 20.207(a) requires that licensed materials stored in an unrestricted area be secured against unauthorized removal from the place of storage. 10 CFR 20.207(b) requires that materials not in storage be under constant surveillance and immediate control of the licensee. As defined in 10 CFR 20.3(17), an unrestricted area is any area access to which is not controlled by the licensee for purposes of protection of individuals from exposure to radiation and radioactive materials.

Contrary to this requirement, as of the day of the inspection, September 3, 1981, your radiation therapy technicians routinely left the key to the teletherapy unit in the console when it was not under your constant surveillance and immediate control.

This a Severity Level IV Violation (Supplement IV)

Pursuant to the provisions of 10 CFR 2.201, the Sibley Memorial Hospital is hereby required to submit to this office, within thirty days of the date of this Notice, a written statement or explanation in reply, including: (1) the corrective steps which have been taken and the results achieved; (2) corrective

OFFICIAL RECORD COPY

~~811 0200652~~
9/99

steps which will be taken to avoid further violations; and (3) the date when full compliance will be achieved. Under the authority of Section 182 of the Atomic Energy Act of 1954, as amended, this response shall be submitted under oath or affirmation. Where good cause is shown, consideration will be given to extending your response time.

The responses directed by this Notice are not subject to the clearance procedures of the Office of Management and Budget as required by the Paperwork Reduction Act of 1980, PL 96-511.

Dated 29 SEP 1981

Original Signed By:
John D. Kinneman, Chief, Materials
Radiological Protection Section,
Technical Inspection Branch

Page 1 of INSPECTION REPORT NO. 87-01

Attached

☐ Appendix A☐ Appendix B☐ Appendix C☐ Memo

Sibley Memorial Hospital
5255 Leigh Road
Washington, D.C. 20016

Licensee contact: Dr. Wilcox Telephone no. (202) 537-4272License no. 08-7398-01 Last amendment and date: 9-9/14/87Category: C-3, and Priority: 5, as of last amendment.Inspection date(s): 9/3/87 Type of inspection: Routine
Unannounced

SUMMARY OF FINDINGS AND ACTION

☐ No noncompliance, clear 591 issued☒ Noncompliance, Appendix A☐ Action on previous noncompliance, Appendix B☐ Noncompliance, 591 issued☐ Regional action Hq action☐ Supplemental info, Appendix C

RECOMMENDATIONS

See basis in Appendix C or attached memo.

☐ Change Category to: ☐ Change Priority to: ☒ Next inspection date: 9/87

PERSONS CONTACTED

Dr. Wilcox - owner
Phil Vincent - Cat. Therapy
demonstration

Inspector: J. McFaddenApproved: J. McFadden9/14/879/17/87

AREAS INSPECTED AND FINDINGS

Licensee: _____ License no: _____ Amendment no: _____

| INSPECTION ITEM | CRITERIA | FINDING |
|------------------------------------|----------------|----------|
| 1. <u>Organization</u> | Lic Cond _____ | <u>C</u> |
| Management organization. | | |
| Radiation protection organization. | | |
| NOTES & REMARKS: | | |

2. Training and instructions to employees

Training program, scope and frequency, retraining.

Required tests administered, scores satisfactory.

Instructions to workers.

Lic Cond _____

19.12

NOTES & REMARKS:

3. Radiation protection procedures

Operating and emergency procedures implemented; interlock failure, handling malfunctions during operations.

5-year maintenance.

Leak tests of sealed sources. - *semiannually* - - -

NOTES & REMARKS:

4. Materials, facilities and instruments

Teletherapy unit location, interlock system operational, required tests.

Access controls, posting of areas & rooms.

Survey instruments & dosimeters operable, properly calibrated.

checked Lic Cond _____

20.203

Lic Cond _____

NOTES & REMARKS:

in calibration
access - key to teletherapy unit was left in console - in an uncontrolled area. When techs left for lunch period.

AREAS INSPECTED AND FINDINGS

Licensee: _____ License no: _____ Amendment no: _____

| INSPECTION ITEM | CRITERIA | FINDING |
|--|--------------|----------|
| 5. <u>Receipt and transfer of material</u> | | <u>C</u> |
| Transfer of licensed material; records. | 30.41, 30.51 | |

NOTES & REMARKS:

6. Personnel protection - external

Personnel monitoring control; minimize exposures, control of accumulated dose.
Surveys conducted, adequate.
Records of monitoring, surveys.
Levels in unrestricted areas.

20.101, 20.102, 20.202

20.201

20.401; Lic Cond _____

20.1, 20.105

NOTES & REMARKS:

7. Leak tests of sourcesLic Cond _____ C

Performed by authorized persons & method.
Performed at 6-month (or other) interval.
Records maintained; reports submitted of leaking sources; corrective action taken.

NOTES & REMARKS:

8. Notifications and reports

To individuals.
Overexposures, excessive levels, incidents.
Personnel exposures and monitoring, termination reports.
• Theft or loss of licensed material.

19.13

20.403, 20.405

20.407, 20.408

20.402

NOTES & REMARKS:

INSPECTION REPORT NUMBER _____

Page 5 of _____

787208 - Medical-Teletherapy

AREAS INSPECTED AND FINDINGS

Licensee: _____ License no: _____ Amendment no: _____

| INSPECTION ITEM | CRITERIA | FINDING |
|--|----------|---------|
| 9. <u>Posting of notices</u> | | |
| Part 20, license & documents, procedures, notice of violations. | 19.11(a) | |
| NRC-3. | 19.11(c) | |

NOTES & REMARKS:

10. Other license conditions

Lic

NOTES & REMARKS:

11. Confirmatory measurements

12. Independent inspection effort

APPENDIX A - DOCUMENTATION OF NONCOMPLIANCE

Licensee: _____

License no: _____

| Reference | Basis for noncompliance |
|---|---|
| Report item _____ 10 CFR <u>26.267</u> Lic Cond _____ Type n/c _____ | <i>key to teletherapy console is left there from 8am-5pm every day, techs do leave area frequently. Access to hallway is unrestricted</i> |
| Report item _____ 10 CFR _____ Lic Cond _____ Type n/c _____ | |
| Report item _____ 10 CFR _____ Lic Cond _____ Type n/c _____ | |
| Report item _____ 10 CFR _____ Lic Cond _____ Type n/c _____ | |
| Report item _____ 10 CFR _____ Lic Cond _____ Type n/c _____ | |
| Report item _____ 10 CFR _____ Lic Cond _____ Type n/c _____ | |

APPENDIX B - LICENSEE ACTION ON PREVIOUS INSPECTION FINDINGS

Licensee: _____

License no: _____

Status

Identification and summary of action taken

Report no: _____ Type n/c: _____ Describe: _____
Action taken: _____ OPEN
CLOSED

Report no: _____ Type n/c: _____ Describe: _____
Action taken: _____ OPEN
CLOSED

Report no: _____ Type n/c: _____ Describe: _____
Action taken: _____ OPEN
CLOSED

Report no: _____ Type n/c: _____ Describe: _____
Action taken: _____ OPEN
CLOSED

Report no: _____ Type n/c: _____ Describe: _____
Action taken: _____ OPEN
CLOSED

APPENDIX C - SUPPLEMENTARY INFO _____

Licensee: _____

License no: _____

- ☐ Uncorrected/repeated noncompliance
☐ Unusual occurrence, conditions, etc
☐ Basis for change of Category or Priority

- ☐ Unresolved items
☐ Inspector's comments

Program is good condition. Have a
consulting ABR physicist coming
monthly to perform checks (leak tests, monthly
output checks, interlocks, etc.)
No problems present.

SAFETY INSPECTION

CENSEE

Commonwealth Doctors Hospital
Nuclear Medicine Department
315 Chain Bridge Road
Fairfax, VA 22030

2 REGIONAL OFFICE

U. S. Nuclear Regulatory Commission
Region II, Suite 3100
101 Marietta Street, N. W.
Atlanta, GA 30303

3 LICENSE NUMBER(S)

45-18184-01

5 DATE OF INSPECTION

Sept 23, 1982

30-14628

icensee

The inspection was an examination of the activities conducted under your license as they relate to radiation safety and to compliance with the Nuclear Regulatory Commission's (NRC) rules and regulations and the conditions of your license. The inspection consisted of selective examinations of procedures and representative records, interviews with personnel, and observations by the inspector. The findings as a result of this inspection are as follows:

- 1 Within the scope of this inspection, no violations were observed.
- 2 The inspector also verified the steps you have taken to correct the violations identified during the last inspection. We have no further questions on those actions at this time.
- 3 During this inspection certain of your activities, as checked below, were in violation of NRC requirements.

THIS IS A NOTICE OF VIOLATION which is required to be posted in accordance with 10 CFR 19.11.

☐ A _____ was not properly posted to indicate the presence of _____ 10 CFR 20.203(b), (c), (d), (e) or 34.42

☐ B Containers located in _____ were not properly labeled to indicate the presence of radioactive material. 10 CFR 20.203(f)(1), or (f)(2).

☐ C _____ of sealed sources were not performed at the proper License Condition Number _____ frequencies. 10 CFR _____

☐ D Records of _____ or License Condition Number _____ were not properly maintained. 10 CFR _____

☐ E Documents were not properly posted or otherwise made available. 10 CFR 19.11.

☐ F Reports or notifications of _____ or License Condition Number _____ were not made in accordance with 10 CFR _____

☒ H Isotopes committee has met semi-annually since 1/80 instead of quarterly as required.

☒ I Surveys have not been made of fixed source containers of radioactive packages received in the lab.

☐ J _____

☐ K _____

8210150321
11pp.

I hereby state that within 30 days the actions described by me to the inspector will be taken to correct the violations identified in the items checked above. This statement of corrective actions is made in accordance with the requirements of 10 CFR 2.201. No further response will be submitted unless required by the NRC.

Robert L. [Signature]
SIGNATURE - LICENSEE

9/23/82
DATE

[Signature]
SIGNATURE - NRC INSPECTOR

30
9-23-82
DATE

ATTN: 3/ES

Attached

☐ Appendix A☐ Appendix B☐ Appendix C☐ MemoINSPECTION REPORT NO. 76-0Licensee contact: 3000 1st St. S.W.Telephone no. License no. 77-0Last amendment and date: 5-3-80Category: , and Priority: , as of last amendment.Inspection date(s): 7-3-80Type of inspection:

SUMMARY OF FINDINGS AND ACTION

- ☐ No noncompliance, clear 591 issued
☐ Noncompliance, Appendix A
☐ Action on previous noncompliance, Appendix B

- ☒ Noncompliance, 591 issued
☐ Regional action Hq action
☐ Supplemental info, Appendix C

RECOMMENDATIONS

See basis in Appendix C or attached memo.

☐ Change Category to: ☐ Change Priority to: ☒ Next inspection date: 3/85

PERSONS CONTACTED

Lynn Garrison, Chief TechDr. Mero, Chief RadLarry Leitch, Chief Rad Services (non-M.D.)Inspector: Approved: 93/28/84300

Plan approved:

Date:

License no:

licensee:

| Inspection Items | Scheduled for inspection | Post-inspection status | Module no. | 766 Time Info |
|---|--------------------------|------------------------|------------|---------------|
| Management meeting - Entrance and Exit Interviews [REQUIRED] | ✓ | | 307038 | |
| Initial Management Meeting | | | | |
| Program requirements. MC 28 [REQUIRED] | | | 787013 | 30 |
| Licensee Event Followup | | | 927008 | |
| Followup on Inspector-identified problems | | | 927018 | |
| Followup on Noncompliance and Deviations | | | 927028 | |
| IE Bulletin/Immediate Action Letter Followup | | | 927035 | |
| Followup on Headquarters Requests | | | 927048 | |
| Followup on Regional Requests | | | 927058 | |
| Independent Inspection Effort [REQUIRED] | | | 787060 | 30 |
| Inspector Dispatched to Site | | | 937003 | |
| Followup on Significant Event Occurring During Inspection | | | 937018 | |

Organization

Al Whitaker
Administrator

|

Greg Taylor
Asst Administrator

|

Dr. S. Mero

Chief of Radiology

| Larry Leetch, RT. Dir Rad Room

Dr. Weiss

Dr. Moss

Dr. Ferris

Dr. McCabe

} all part of
rad group retake
Illus Hospital

Isotopes Committee

Greg Taylor, Asst Admin

M. Weiss, M.D. Chairman

J. Mero, M.D.

Larry Cooper, Health Physicist

Larry Leetch, RT Dir. Rad
Rm.

Michael Ball, M.D. Internist

P. Harner, M.D. Pathologist

|
Lynn Garrison, RT

Board Nuclear Medicine
Eligible

~7 years at Hosp

not yet in Rad Room

AREAS INSPECTED AND FINDINGS

Licensee: Community Health Center, Inc. License no: 78-108 Amendment no: 1

| INSPECTION ITEMS | CRITERIA | FINDING |
|------------------|----------|-----------|
| | | <u>OK</u> |

1. Organization

Structure of organization as described in requirements?

Lic Cond _____

NOTES & REMARKS: See Back Page (2)

2. Licensee internal audits

Scope and frequency of audits as required?
Conducted by appropriate persons? Records maintained? Reviewed by management?
Deficiencies identified & corrected?

Lic Cond _____

NOTES & REMARKS: Isotope Committee
meetings since 11/79 last
inspection
5/80, 10/80, 4/81, 10/81, 7/82,*N/C.
Monthly visits by consultants,
Health Physics Services Inc.
and records submitted
to Hospital.

3. Training and qualification of personnel

Training & retraining conducted as required?
Written & oral exams conducted? Examination results reviewed by management?
Instructions to workers per 19.12?

Lic Cond _____

NOTES & REMARKS: Training In-house given by Larry Cooper of HPS
(or et al.) approx ea 6 months
19.12 training provided to Admin, housekeeping, etc.

4. Radiation protection procedures

Procedures available and implemented? Identify radiopharmaceutical and dose(s)? Cover handling of patients receiving therapeutic doses? Cover handling of cadavers?
Emergency procedures for spills, etc?
Personnel understand procedures?

Lic Cond _____

NOTES & REMARKS: Procedures manual w/ doses, scans, procedures, etc.

Procurement & Use -

— ^{99m}Tc - Disofarm (Disolab) (relatively new)
(Hepatobiliary Tracer)

~ 6-8 this year

all
ordered
doses
daily
as
needed

— Liver Scan ~ 25 month

— Bone Scan ~ 40-45 month

— Lung Scan (Perfusion only) ~ 20 month

— Thyroid ~ 15 month

All radiopharmaceuticals rec'd from
Pharmatopes Nuclear Pharmacy, Inc.

I^{131} - liquid therapy ~ 2-6 year

~ Hyper. 4-8-10 mCi

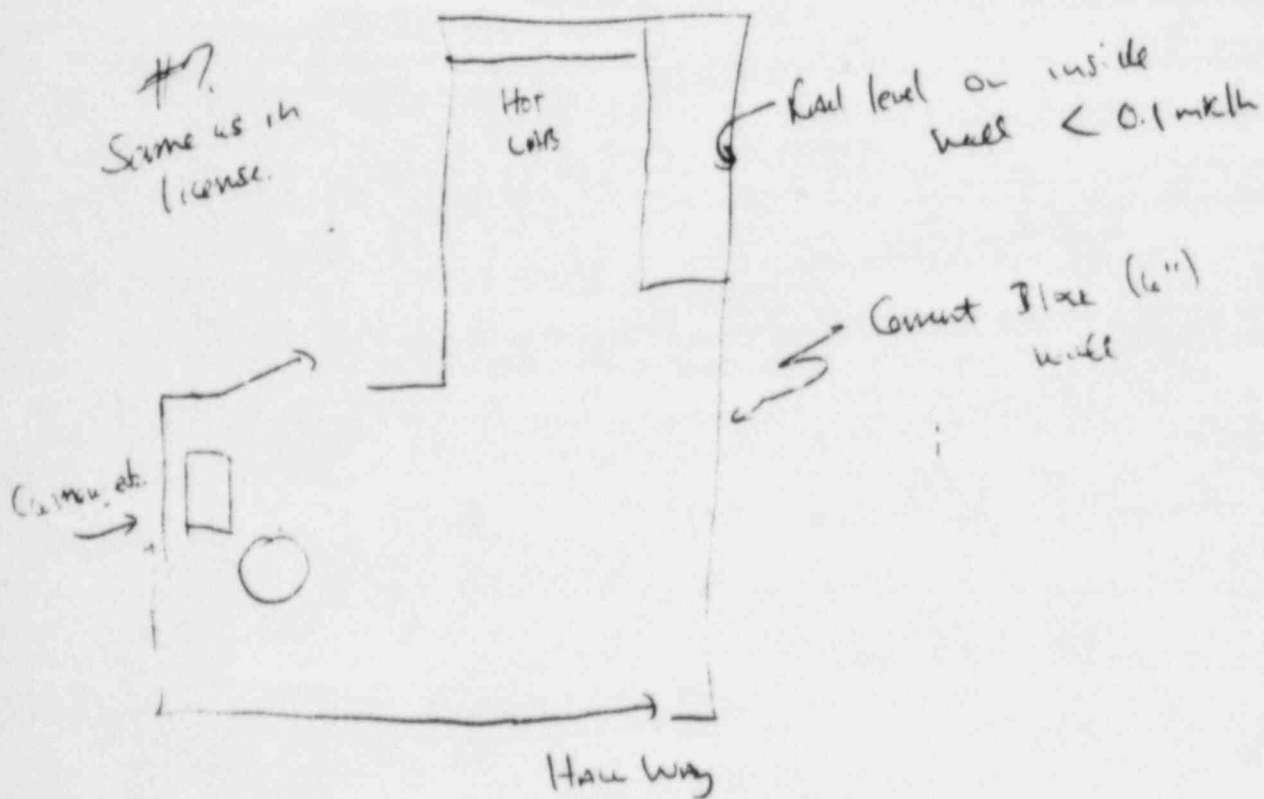
no total destruction

AREAS INSPECTED AND FINDINGS

Licensee: Commonwealth Doctor Hosp License no: 45-15154-1 Amendment no: 12

| INSPECTION ITEM | CRITERIA | FINDING |
|---|----------------------|---|
| <u>5. Use of materials</u> | Lic Cond <u> </u> | <u>OK</u> |
| Procurement and use as required? <u>See B.p 9</u> | | |
| Special tests (only breakthrough, leak tests, etc) required? | | <u>Two sealed sources on hand. Cs 137 - 270mc</u> |
| Dose calibration checks performed? <u>Daily constant OK</u> | | <u>Co 57 - 567mc</u> |
| Posting & labeling as required? <u>w/ quarterly inventory 20.203</u> | | <u>BOTH LEAK TESTED</u> |
| NOTES & REMARKS: <u>Notes done by Thermaplates</u> | | <u>@ 6 months w/ records</u> |
| <u>Records sent along w/ doses</u> | | |
| <u>6. Storage of materials</u> | 20.207 | <u>OK</u> |
| Material secured in both restricted and unrestricted areas? Adequately? | | |
| NOTES & REMARKS: <u>Materials securely stored in</u> | | |
| <u>Hot Lab w/ limited keys available</u> | | |
| <u>7. Facilities</u> | Lic Cond <u> </u> | <u>OK</u> |
| As described in lic cond or application? | | |
| Any changes made? Adequacy? | | |
| NOTES & REMARKS: <u>See Back Page (4)</u> | | |
| <u>8. Instruments</u> | Lic Cond <u> </u> | <u>(?) OK w/ Deviation</u> |
| Survey meters & instruments adequate for program? | | |
| Instruments & meters operable? Calibrated? | | <u>Two survey instruments</u> |
| Calibration adequate? | | <u>Relative E-120 & E on sum</u> |
| NOTES & REMARKS: <u>0-1000 mR/h</u> | | <u>0-1000 mR/h</u> |
| <u>Calibrated quarterly by HPS, Inc w/ records</u> | | |
| <u>using Cs 137</u> | | |
| <u>E-120 does not reach 1000 mR/h as in application</u> | | |
| <u>only 0-50 mR/h</u> | | |
| | | <u>Deviation</u> |

#7.
Same as in
license.



AREAS INSPECTED AND FINDINGS

Licensee: James M. Smith, DVM, MS, LMS License no: 75-13187 Amendment no: 02

| INSPECTION ITEMS | CRITERIA | FINDING |
|--|--------------|------------|
| 9. Receipt and transfer of material | | <u>N/A</u> |
| Written procedures for pickup, receiving, opening packages? | 20.205 | |
| Survey of packages when received? | 20.205(c)(1) | |
| Records of survey of packages? <u>See below</u> | 20.401(b) | |
| Transfer of materials proper? Transfer records maintained? | 30.41, 30.51 | |
| Authorized containers used? Shipping papers & package labels proper for packages on hand? | 71.5 | |
| NOTES & REMARKS: Package surveyed on calibration w/ meter + swipe w/ records. No swipe made on final source container is required by Attachment 6D # (7) | | |

10. Personnel protection - external

Personnel monitoring controls adequate?
Exposures minimized?
Exposure records (NRC-4 or 5) maintained?
Available for employee review?
Surveys conducted? Adequate?

20.101, 20.202

20.102(b), 20.401(a)

20.201

20.401

20.1, 20.105

Simmons monthly
i.B. + 100 for
Garrison

Max-70 ne/ma w.B.
-100me/hour Extr.

Records of monitoring, surveys?

Levels in unrestricted areas within limits? OK

NOTES & REMARKS: Weekly total lab survey, w/ meter and swipes + records. Daily swipes of preparation + injection areas w/ records.

Syringe shields used w/ practical

OK

11. Personnel protection - internal

Airborne concentrations in restricted areas? N/A
Exposures to minors? N/A
Posting of airborne radioactivity areas? N/A
Survey, monitoring adequate for airborne radioactivity, surface contamination? Records maintained?

20.103

20.104

20.203(d)

20.201

20.401

w/ Records

NOTES & REMARKS:

I¹³¹ thing at Smith

Browsing done on

~3 times

~ 21st Sept AB

Technician as per procedures

this year < 5mCi

Weekly + Daily swipe tests for removable

AREAS INSPECTED AND FINDINGS

Licensee: Immunivaccination Doctors Hosp License no: 45-78154 Amendment no: 02

| INSPECTION ITEM | CRITERIA | FINDING |
|---|--------------------------------|-----------|
| 12. <u>Effluent controls, waste disposal</u> | | <u>OK</u> |
| Release of effluents controlled? | 20.106, 20.303 | |
| Waste disposals controlled? | 20.301, 20.303, 20.304, 20.305 | |
| Procedures, records maintained? | 20.401, Lic Cond | |
| Surveys made? Adequate? | 20.401 | |
| NOTES & REMARKS: <u>No RTA work done in this hospital</u> <u>Syringes returned in shields to pharmacists</u> <u>Other waste, held for decay, surgical then released</u> | | |

13. Notifications and reports

| | |
|--|----------------|
| To individuals. <u>OK</u> | 19.13 |
| Overexposures, excessive levels & concentrations, incidents. <u>NA</u> | 20.403, 20.405 |
| Personnel exposures and monitoring, termination reports. <u>NA</u> | 20.407; 20.408 |
| Theft or loss of licensed material. <u>NA</u> | 20.402 |

NOTES & REMARKS: All OK14. Posting of notices

| | |
|--|----------|
| Part 20, license & documents, procedures, notice of violations posted? | 19.11(a) |
| NRC-3 posted? | 19.11(c) |

NOTES & REMARKS: NRC-3 all documents & areas properly posted15. Other license conditionsALARA

Ltc

ALARA program approved in Oct. 1981
& implemented.No investigation levels exceeded
for nuc medicine work.(Possibly some x-ray personnel exceeded levels)

INSPECTION REPORT NUMBER 52-01

Page 7 of

761128 - 4-11-82

AREAS INSPECTED AND FINDINGS

Licensee: Commonwealth Doctors Hosp License no: 45-18184-01 Ac. no: 02

| INSPECTION ITEMS | CRITERIA | FINDING |
|------------------|----------|---------|
|------------------|----------|---------|

16. Confirmatory measurements

XETEX Cal 6/82

Rad levels in Het LAB
+ unrestricted areas O.K.

OK

17. Independent inspection effort

Disc. survey procedures of
package w/ Garrison

OK

18. Incidents and events

Any incidents of misadministrations,
contamination, etc. not otherwise
covered by reports?

None to report. to DATE.

OK

SEP 30 1982

License No. 08-18450-01

Docket No. 30-15105

Yater Clinic
ATTN: Mr. Ian M. Gower
Business Manager
1780 Massachusetts Ave. N.W.
Washington, D.C. 20036

Gentlemen:

Subject: Inspection No. 82-01

This refers to the routine safety inspection conducted by Mrs. Darden of this office on July 30, 1982 of activities authorized by NRC License No. 08-18450-01 and to the discussions of our findings held by Mrs. Darden with yourself at the conclusion of the inspection, and to a subsequent telephone discussion between Mrs. Darden and Ms. Ismael on August 5, 1982.

The inspection was an examination of activities conducted under your license as they relate to radiation safety and to compliance with the Commission's rules and regulations and the conditions of your license. The inspection consisted of selective examinations of procedures and representative records, interviews with personnel, measurements made by the inspector, and observations by the inspector.

Our inspector also verified the steps you have taken to correct the violations brought to your attention in a letter dated October 23, 1979. We have no further questions regarding the steps you took to correct items A, B.1, and B.2. With regard to item B.3 this item has recurred.

Based on the results of this inspection, it appears that certain of your activities were not conducted in full compliance with NRC requirements, as set forth in the Notice of Violation, enclosed herewith as Appendix A. These violations have been categorized by severity level in accordance with the NRC Enforcement policy (10 CFR 2, Appendix C) published in the Federal Register Notice (47 FR 9987) dated March 9, 1982. You are required to respond to this letter and in preparing your response, you should follow the instructions in Appendix A.

Item A in the Notice of Violation enclosed with this letter was identified during a previous inspection of your licensed activities on October 3, 1979, and was documented in the enclosure to our letter dated October 23, 1979. Your letter to this office dated November 28, 1979 stated that technicians would use protective clothing and gloves. From our July 30, 1982 inspection

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31 299
J.E.O.

SEP 30 1982

it appears that the stated corrective actions were not effective since these items have recurred. Recurrent and uncorrected violations are given additional weight in the consideration and selection of appropriate enforcement action. Therefore, in your response to this letter, you should give particular attention to those actions taken or planned to ensure that identified items of noncompliance will be completely corrected and will not recur.

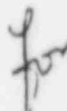
The responses directed by this letter and the accompanying Notice are not subject to the clearance procedures of the Office of Management and Budget as required by the Paperwork Reduction Act of 1980, PL-511.

In accordance with Section 2.790 of the NRC's "Rules of Practice," Part 2, Title 10, Code of Federal Regulations, a copy of this letter and your reply will be placed in the Public Document Room.

Your cooperation with us in this matter is appreciated.

Sincerely,

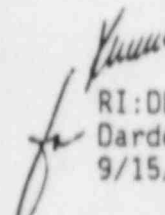
Original Signed By:
John D. Kinneman


 Thomas T. Martin, Director
Division of Engineering and Technical
Programs

Enclosure: Appendix A, Notice of Violation

cc w/encl:
Public Document Room (PDR)
Nuclear Safety Information Center (NSIC)
District of Columbia

bcc w/encl:
Region I Docket Room (with concurrences)
Chief, Operational Support Section (w/o encl)

 RI:DETP
Darden/gwc
9/15/82

 RI:DETP
Kinneman
9/24/82

SEP 30 1982

APPENDIX A

NOTICE OF VIOLATION

Yater Clinic
Washington, D.C. 20036

Docket No. 30-15105
License No. 08-18450-01

As a result of the inspection conducted on July 30, 1982, and in accordance with the NRC Enforcement Policy (10 CFR 2, Appendix C), the following violations were identified:

- A. Condition 14 of License No. 08-18450-01 requires that licensed material be possessed and used in accordance with statements, representations and procedures contained in application dated May 8, 1979.

Item 15.B.1 of this application requires that technicians who draw up and inject radioactive material wear disposable gloves.

Contrary to the above, as of July 30, 1982, only one glove was worn during the handling of radioactive material.

This is a Severity Level IV violation. (Supplement VI)

- B. 10 CFR 20.401(b) requires that each licensee maintain records showing the results of surveys required by 10 CFR 20.201(b).

Contrary to the above, as of July 30, 1982, records were not maintained of the contamination and radiation surveys that were performed within the Nuclear Medicine Department.

This is a Severity Level V violation. (Supplemental IV)

Pursuant to the provisions of 10 CFR 2.201, Yater Clinic, is hereby required to submit to this office within thirty days of the date of this Notice, a written statement or explanation in reply, including: (1) the corrective steps which have been taken and the results achieved; (2) corrective steps which will be taken to avoid further violations; and (3) the date when full compliance will be achieved. Where good cause is shown, consideration will be given to extending this response time.

8210150254
11pp.

REGION I Form 198-C
(July 82)LICENSE NO: 08-18450-01DOCKET NO. (s) 30-15105

PAGE _____ OF _____

ATTACHED

- ☒ Appendix A
☐ Appendix B
☐ Appendix C
☐ Memo

INSPECTION REPORT NO. 82-01YATER CLINIC1750 Massachusetts Ave. N.W.
Washington, D.C. 20036LICENSEE CONTACT: Ms OnetaTelephone No: 202-785-2402LICENSE NO: 08-18450-01CATEGORY G PRIORITY: IV

CATEGORY _____ PRIORITY: _____

CATEGORY _____ PRIORITY: _____

INSPECTION DATE (s): July 30, 1982

TYPE OF INSPECTION: ☐ SPECIAL ☐ ANNOUNCED
☒ ROUTINE ☒ UNANNOUNCED
☐ DAYSHIFT
☐ OTHER

SUMMARY OF FINDINGS AND ACTION

- ☐ NO NONCOMPLIANCE, CLEAR 591 ISSUED
☐ NO NONCOMPLIANCE, LETTER
☒ NONCOMPLIANCE, APPENDIX A

- ☐ ACTION ON PREVIOUS NONCOMPLIANCE,
APPENDIX B
☐ NONCOMPLIANCE, 591 ISSUED
☐ SUPPLEMENTAL INFO, APPENDIX C

RECOMMENDATIONS
SEE BASIS IN APPENDIX C

- ☐ CHANGE CATEGORY TO: _____
☐ NEXT INSPECTION DATE: 2/84

☐ CHANGE PRIORITY TO: _____

PERSONS CONTACTED

Ms Oneta Israel, NMT
Mr Isaac Mc Gowan, Bus. Mgr

INSPECTOR: Personnel Services Division

APPROVED: _____

INSPECTION PLAN AND REPORT NUMBER _____

Page _____ of _____

Plan Approved: _____

Date: _____

Licensee: Gator Clinic

License No. 28-18452-01

| Inspection Items | Scheduled for Inspection | Post Inspection Status | Module No. |
|---|--------------------------|------------------------|---------------------------------------|
| Management Meeting - Entrance and Exit Interviews (Required) | ✓ | ✓ | 30703B .25 H |
| Program Requirements, MC 2860 (Required) | ✓ | ✓ | 787108 2 |
| Followup on Noncompliance and Deviations | ✓ | ✓ | 92702B .25 H 16-23 H |
| Independent Inspection Effort (Required) | ✓ | ✓ | 92706B 2 H |
| Transportation | | | 86740B |

(July 82)

INSPECTION REPORT NUMBER _____

Page ____ of ____

787108 - Medical

AREAS INSPECTED AND FINDINGS

Licensee: _____ License No: _____ Amendment No: _____

| INSPECTION ITEMS | CRITERIA | FINDING |
|--|---|----------|
| 1. <u>Organization</u> Structure of organization as described in requirements? Scope of Program? Patient load? - 10 to 15 weekly NOTES & REMARKS: | Lic Cond _____ OK | <u>C</u> |
| 2. <u>Licensee Internal Audits</u> Scope and frequency of audits as required? Conducted by appropriate persons? Records maintained? <i>gt</i> Reviewed by management? Deficiencies identified and corrected? <i>OK</i> NOTES & REMARKS: | Lic Cond _____ OK | <u>C</u> |
| 3. <u>Training and Qualification of Personnel</u> Training & retraining conducted as required? Written & oral exams conducted? <i>NA</i> Examination results reviewed by management? <i>NA</i> Instructions to workers per 19.12? Authorized users? On license? Available in emergency? NOTES & REMARKS: | Lic Cond _____ OK NA NA 19.12 Lic Cond _____ | <u>C</u> |
| 4. <u>Radiation Protection Procedures</u> Procedures available and implemented? Identify radiopharmaceutical and dose(s)? Cover handling of patients receiving therapeutic doses? Cover handling of cadavers? Close out Surveys on Patients receiving temporary implants? Emergency procedures for spills, etc? <i>OK</i> Personnel understand procedures? NOTES & REMARKS: | Lic Cond _____ OK NA 35.14 (b)(5)(v) OK | |

AREAS INSPECTED AND FINDINGS

Licensee: _____ License No: _____ Amendment No: _____

| INSPECTION ITEM | CRITERIA | FINDING |
|---|--|----------|
| 5. <u>Use of Materials</u> | | |
| Procurement and use as required? Authorized form & route of administration? | 35.14(b) | |
| Special tests (moly breakthrough, leak tests, etc) required? | 35.14(b)(4) | |
| Inventory of brachytherapy sources? <i>NA</i> | 35.14(b)(5) | |
| Dose calibration checks performed? <i>OK</i> | | |
| Posting & labeling as required? <i>OK</i> | 20.203 | |
| NOTES & REMARKS: | | |
| 6. <u>Storage of Materials</u> | | <i>C</i> |
| Material secured in both restricted and unrestricted areas? Adequately? | 20.207 | |
| NOTES & REMARKS: | <i>Restricted area secured Restricted: Locked in Hat Lab</i> | |
| 7. <u>Facilities</u> | Lic Cond _____ | <i>C</i> |
| As described in lic cond or application? | | |
| Any changes made? Adequacy? <i>OK</i> | | |
| NOTES & REMARKS: | | |
| 8. <u>Instruments</u> | Lic Cond _____ | <i>C</i> |
| Survey meters & instruments adequate for program? | <i>OK</i> | |
| Instruments & meters operable? Calibrated? | <i>OK</i> | |
| Calibration adequate? | | |
| NOTES & REMARKS: | | |

AREAS INSPECTED AND FINDINGS

Licensee: _____ License No: _____ Amendment No: _____

| INSPECTION ITEMS | CRITERIA | FINDING |
|--|----------------------|---------|
| <u>C</u> | | |
| 9. <u>Receipt and Transfer of Material</u> | | |
| Written procedures for pickup, receiving, opening packages? | 20.205 | |
| Survey of packages when received? | 20.205(c)(1) | |
| Records of survey of packages? | 20.401(b) | |
| Transfer of materials proper? Transfer records maintained? | 30.41, 30.51 | |
| Authorized containers used? Shipping papers & package labels proper for packages on hand? | 71.5 | |
| NOTES & REMARKS: | | |
| <u>NC</u> | | |
| 10. <u>Personnel Protection - External</u> | | |
| Personnel monitoring controls adequate? Exposures minimized? | 20.101, 20.202 | |
| Exposure records (NRC-4 or 5) maintained? Available for employee review? | 20.102(b), 20.401(a) | |
| Surveys conducted? Adequate? | 20.201 | |
| Records of monitoring, surveys? | 20.401 | |
| Levels in unrestricted areas within limits? (Particularly around nuclear med. hot lab rooms of brachytherapy patients) | 20.1, 20.105 | |
| NOTES & REMARKS: | | |
| Exposure Records available but not up to date gloves used improperly investigated | | |
| <u>NC</u> | | |
| 11. <u>Personnel Protection - Internal</u> | | |
| Airborne concentrations in restricted areas? (Xe-133, patients treated with I-131) | 20.103 | |
| Exposures to minors? | 20.104 | |
| Posting of airborne radioactivity areas? | 20.203(d) | |
| Survey, monitoring bioassay adequate for airborne radioactivity, surface contamination? Records maintained? | 20.201 20.401 | |
| Procedures for use of Xe-133 followed? | | |
| NOTES & REMARKS: | | |

AREAS INSPECTED AND FINDINGS

Licensee: _____ License No: _____ Amendment No: _____

| INSPECTION ITEM | CRITERIA | FINDING |
|---|---|---------|
| 12. <u>Effluent Controls, Waste Disposal</u> | | |
| Release of effluents controlled? (particularly Xe-133, radiiodine where used) | 20.106, 20.33 | |
| Waste disposals controlled? | 20.301, 20.303, 20.304, 20.305 | |
| Procedures, records maintained? | 20.401, Lic Cond _____ | |
| Surveys made? Adequate? | 20.401 | |
| NOTES & REMARKS: | <i>Waste Syringe returned to supplier Pharm to pc</i> | |

| | |
|---|----------------|
| 13. <u>Notifications and Reports</u> | |
| To individuals? | 19.13 |
| Overexposures, excessive levels & concentrations, incidents? | 20.403, 20.405 |
| Personnel exposures and monitoring, termination reports? | 20.407, 20.408 |
| Theft or loss of licensed material? | 20.402 |
| Misadministrations? | 35.41-35.45 |
| NOTES & REMARKS: | |

| | |
|---|----------|
| 14. <u>Posting of Notices</u> | |
| Part 20, license & documents, procedures, ✓ notice of violations posted? | 19.11(a) |
| NRC-3 posted? ✓ | 19.11(c) |
| NOTES & REMARKS: ✓ | |

*Part 19, 20 outdated, supplied license with new Part
will call for continued update*

15. Other License Conditions

AREAS INSPECTED AND FINDINGS

Licensee: _____ License No: _____ Amendment No: _____

| INSPECTION ITEMS | CRITERIA | FINDING |
|--------------------------------------|----------|---------|
| 16. <u>Confirmatory Measurements</u> | | |

NRC Instrument: _____

Calibration Due Date: _____

17. Independent Inspection Effort18. Incidents and Events

Any incidents of misadministrations, contamination, etc., not otherwise covered by reports?

35.41 -35.45
20.402, 20.403, 20.405

Questioned NMT about reported misadministration. "The patient and her physician were notified of the incident", there has been no supervision. The rotary radio needle was the syringe was improperly identified.

INSPECTION REPORT NUMBER _____

Page _____ of _____

APPENDIX A - DOCUMENTATION OF NONCOMPLIANCE

Licensee: _____

License No: _____

| Reference | Basis for noncompliance |
|--|---|
| Report item <u>A 1</u> 10 CFR _____ Lic Cond <u>14</u> Type n/c _____ | Item 15 - Gas Release for each day gas is used. Gloves are worn improperly while handling radioactive material. a. glove worn 2. the glove worn has a hole punctured for the finger. Base calibration - Records not up to date. - a consistency. and package is department survey records |
| Report item <u>B</u> 10 CFR <u>20.401</u> Lic Cond _____ Type n/c _____ | |
| Report item <u>A 2</u> 10 CFR _____ Lic Cond _____ Type n/c _____ | Gm meter sensitivity not evaluated to accept wipe |
| Report item _____ 10 CFR _____ Lic Cond _____ Type n/c _____ | |
| Report item _____ 10 CFR _____ Lic Cond _____ Type n/c _____ | |
| Report item _____ 10 CFR _____ Lic Cond _____ Type n/c _____ | |

INSPECTION REPORT NUMBER 82-01

Page of

APPENDIX B - LICENSEE ACTION ON PREVIOUS INSPECTION FINDINGS

Licensee: Yater Chase

License No:

Identification and summary of action taken

Status

Report No: 79-01 Type n/c: Describe: 19.12

Action taken:

*Technician training as stated
in response letter dated Nov. 28, 1979*

OPEN

CLOSED

Report No: 79-01 Type n/c: It Describe:

Action taken:

*Gloves used, but not
properly. Tech is using only
one glove and splitting the finger*

OPEN

82-01

CLOSED

Report No: 79-01 Type n/c: Describe: Don't calibrate

Action taken:

*Records show linearity checks
performed quarterly*

OPEN

CLOSED

Report No: 79-01 Type n/c: Describe: Wipe evaluation

Action taken:

*evaluated using GM survey meter
Leakage Wipes suggested using GM survey meter
Item 12 + TM still using GM meter but not as sensitive
C(1) 100dpm. Notable to know that GM meter is sensitive
enough to detect 100dpm*

OPEN

CLOSED

Report No: 82-01 Type n/c: It Describe:

Action taken:

Records not up to date

OPEN

CLOSED

Report No: 79-01 Type n/c: It Describe: Package Procedures

Action taken:

*Tech is now performing surveys
including wipe tests of incoming packages*

OPEN

CLOSED

(July 82)

INSPECTION REPORT NUMBER

82-01

Page ____ of ____

APPENDIX C - SUPPLEMENTARY INFORMATION

Licensee:

Yater Clinic

License No:

☒ Uncorrected/repeated noncompliance☒ Unresolved items☐ Unusual occurrence, conditions, etc☐ Inspector's comments☐ Basis for change of Category or Priority

Yater Clinic is a small medical program averaging 10 to 15 patients weekly. All of radionuclides are supplied by pharma tapes and can be delivered within an hour of order placement. Types of studies for are a group and include thyroid scans, lung, liver, brain scans. All radionuclides are administered intravenously.

Improper Use of gloves by the technologist when administering doses was described by her as "using one glove only and splitting ^{one of} the finger holes ^{for getting} ~~so that she could grasp~~ ^{grasping} the syringe and ^{better} feel the vein. ~~better~~

g m meter sensitivity, although not previously cited was discussed at the last inspection. The g m meter reads up to 700 cpm but no conversions have been made dpm and no evaluation was available as to the meter sensitivity:

Docket No. 30-11586

OCT 5 1982

License No. 08-16752-01

Hadley Memorial Hospital
ATTN: Mr. James Suzuki
Administrator
4601 Martin Luther King Avenue, SW
Washington, D.C. 20032

Gentlemen:

Subject: Inspection No. 82-01

This refers to the routine safety inspection conducted by Mrs. Teresa Hall Darden of this office on August 17, 1982, of activities authorized by NRC License No. 08-16752-01 and to the discussions of our findings held by Mrs. Darden with Mr. Leonard Harris and Mrs. J. O'Neil of your staff at the conclusion of the inspection, and to a subsequent telephone discussion between Mrs. Darden and Mr. John Davis on September 9, 1982.

The inspection was an examination of activities conducted under your license as they relate to radiation safety and to compliance with the Commission's rules and regulations and the conditions of your license. The inspection consisted of selective examinations of procedures and representative records, interviews with personnel, measurements made by the inspector, and observations by the inspector.

Our inspector also verified the steps you have taken to correct the violation brought to your attention in the enclosure to our letter dated October 29, 1980. We have no further questions regarding your action at this time.

Based on the results of this inspection, it appears that certain of your activities were not conducted in full compliance with NRC requirements, as set forth in the Notice of Violation, enclosed herewith as Appendix A. These violations have been categorized by severity level in accordance with the NRC Enforcement policy (10 CFR 2, Appendix C) published in the Federal Register Notice (47 FR 9987) dated March 9, 1982. You are required to respond to this letter; and, in preparing your response, you should follow the instructions in Appendix A.

From the discussions conducted during the inspection, it is our understanding that your plan to inform the U.S. Nuclear Regulatory Commission, Region I, Material Program Section No.2, 631 Park Avenue, King of Prussia, Pennsylvania 19406, of the dates that you ceased operations in the old Nuclear Medicine Department and began operations in the new one. You should perform a survey of your old facility to assure that it meets the enclosed "Guidelines for Decontamination of Facilities and Equipment." We further understand that you will submit to this office the results of your calculations of the extremity exposure received by one of your technologists on July 30, 1982. Please confirm our understandings in your reply to this letter.

8210210140
2pp.

32
1E:07

OCT 5 1982

The responses directed by this letter and the accompanying Notice are not subject to the clearance procedures of the Office of Management and Budget as required by the Paperwork Reduction Act of 1980, PL 96-511.

In accordance with Section 2.790 of the NRC's "Rules of Practice," Part 2, Title 10, Code of Federal Regulations, a copy of this letter and your reply will be placed in the Public Document Room.

Your cooperation with us in this matter is appreciated.

Sincerely,

Original Signed By:
John D. Kinneman

for Thomas T. Martin, Director
Division of Engineering and Technical
Programs

Enclosures:

Appendix A, Notice of Violation
Guide for Decontamination of Facility

cc w/encl:

Public Document Room (PDR)
Nuclear Safety Information Center (NSIC)
District of Columbia

bcc w/encl:

Region I Docket Room (with concurrences)
Chief, Operational Support Section (w/o encl)

for RI:DEPT
Darden/lp
9/28/82

for RI:DETP
Kinneman

10/4/82

APPENDIX A
NOTICE OF VIOLATION

OCT 5 1982

Hadley Memorial Hospital
Washington, D.C. 20032

Docket No. 30-11586
License No. 08-16752-01

As a result of the inspection conducted on August 17, 1982, and in accordance with the NRC Enforcement Policy (10 CFR 2, Appendix C), the following violations were identified:

- A. Condition 17 of License No. 08-16752-01 requires that licensed material be possessed and used in accordance with statements, representations and procedures contained in application dated December 10, 1980, and letter dated June 5, 1981.

Item 10 of this application requires that dose calibrators be calibrated in accordance with procedures contained in Appendix D, Section 2, of Regulatory Guide 10.8.

Item A.1 of Appendix D, Section 2, requires that the dose calibrator linearity be determined at installation and quarterly thereafter.

Contrary to the above, as of August 17, 1982, dose calibrator linearity had not been determined quarterly.

This is a Severity Level IV violation (Supplement V).

- B. 10 CFR 20.203(f)(4) requires that, prior to disposal of an empty, uncontaminated container to an unrestricted area, the radioactive label be removed or defaced, or the container be marked as empty.

Contrary to the above, on August 17, 1982, boxes labeled as containing medical radioisotopes were disposed of without removing, defacing, or marking the labels.

This is a Severity Level V violation (Supplement IV).

- C. 10 CFR 20.401(b) requires that each licensee maintain records showing the results of surveys required by 10 CFR 20.201(b).

Contrary to the above, as of August 17, 1982, records were not maintained of those surveys performed to assure compliance with 10 CFR 20.301, which describes authorized means of disposing of radioactive waste, nor of contamination and radiation surveys performed within the Nuclear Medicine Department.

8210210145
12pp.

OCT 5 1982

This is a Severity Level V violation (Supplement IV).

Pursuant to the provisions of 10 CFR 2.201, Hadley Memorial Hospital is hereby required to submit to this office within thirty days of the date of this Notice, a written statement or explanation in reply, including: (1) the corrective steps which have been taken and the results achieved; (2) corrective steps which will be taken to avoid further violations; and (3) the date when full compliance will be achieved. Where good cause is shown, consideration will be given to extending this response time.

REGION I Form 198-C
(July 82)

LICENSE NO: 08-16752-01

DOCKET NO. (s) 30-11586

PAGE _____ OF _____

ATTACHED

- ☒ Appendix A
☐ Appendix B
☐ Appendix C
☐ Memo

INSPECTION REPORT NO. 82-01
Hadley Memorial Hospital
7601 Martin Luther King Ave. SW
Washington DC 20032

LICENSEE CONTACT: Mrs. Jeffrey O'Neil RT Telephone No: _____

LICENSE NO: _____ CATEGORY G PRIORITY: IV

CATEGORY _____ PRIORITY: _____

CATEGORY _____ PRIORITY: _____

INSPECTION DATE (s): Aug 12, 1982

TYPE OF INSPECTION: ☐ SPECIAL ☐ ANNOUNCED
☒ ROUTINE ☒ UNANNOUNCED
☐ DAYSHIFT
☐ OTHER

SUMMARY OF FINDINGS AND ACTION

- ☐ NO NONCOMPLIANCE, CLEAR 591 ISSUED
☐ NO NONCOMPLIANCE, LETTER
☒ NONCOMPLIANCE, APPENDIX A

- ☐ ACTION ON PREVIOUS NONCOMPLIANCE, APPENDIX B
☐ NONCOMPLIANCE, 591 ISSUED
☐ SUPPLEMENTAL INFO, APPENDIX C

RECOMMENDATIONS
SEE BASIS IN APPENDIX C

☐ CHANGE PRIORITY TO: _____

☐ CHANGE CATEGORY TO: _____
☒ NEXT INSPECTION DATE: 8/84

PERSONS CONTACTED

Mrs. Jeffrey O'Neil RT Chief Tech
Mr. Harold Lindholm (Trans. Tech)
Dr. T. Wilkins Davis, MD,
Director of Diagnostic Imaging

Mr. Leonard Harris Associate Admin
for Mr. James Longtree Admin.

John Davis, Consulting Physician

INSPECTOR: James A. [Signature]

APPROVED: [Signature]

9/14/82

INSPECTION PLAN AND REPORT NUMBER _____

Page _____ of _____

Plan Approved: _____

Date: _____

Licensee: _____

License No. _____

| Inspection Items | Scheduled for Inspection | Post Inspection Status | Module No. |
|--|--------------------------|------------------------|------------|
| Management Meeting - Entrance and Exit Interviews (Required) | | | 30703B |
| Program Requirements, MC 2860 (Required) | | | 78710B |
| Followup on Noncompliance and Deviations | | | 92702B |
| Independent Inspection Effort (Required) | | | 92706B |
| Transportation | | | 86740B |

INSPECTION REPORT NUMBER _____

Page ____ of ____

787108 - Medical

AREAS INSPECTED AND FINDINGS

Licensee: _____ License No: _____ Amendment No: _____

| INSPECTION ITEMS | CRITERIA | FINDING |
|--|------------------------|--|
| 1. <u>Organization</u> | Lic Cond _____ | |
| Structure of organization as described in requirements? | | Began using new rules furnished 4/1982 |
| Scope of Program? Patient load? | | |
| NOTES & REMARKS: Stanley, under I ¹²⁵ capsule (200mc) Small to medium sized groups I & II mainly use ²¹⁰ Pb. Higher personnel doses, but have notes books on hand for ²¹⁰ Pb cases. ²¹⁰ Pb include, Brain, liver, lung, heart x. 2.33 - 4/mk | | |
| 2. <u>Licensee Internal Audits</u> | Lic Cond _____ | |
| Scope and frequency of audits as required? | | |
| Conducted by appropriate persons? | | materials receipt & waste disposal |
| Records maintained? | | for, but incomplete for waste disposal |
| Reviewed by management? | | Has Consulting Physicist who reviews periodically |
| Deficiencies identified and corrected? | | up. ²¹⁰ Pb was identified & corrected. that techs were not using syringe shields |
| NOTES & REMARKS: | | |
| 3. <u>Training and Qualification of Personnel</u> | Lic Cond _____ | |
| Training & retraining conducted as required? | | |
| Written & oral exams conducted? | | |
| Examination results reviewed by management? | | |
| Instructions to workers per 19.12? ✓ | 19.12 | |
| Authorized users? On license? Available in emergency? | Lic Cond _____ | |
| NOTES & REMARKS: | | |
| 4. <u>Radiation Protection Procedures</u> | Lic Cond _____ | |
| Procedures available and implemented? | | |
| Identify radiopharmaceutical and dose(s)? | | |
| Cover handling of patients receiving therapeutic doses? Cover handling of cadavers? | 1/1 | |
| Close out Surveys on Patients receiving temporary implants? | 7/1/82 35.14 (b)(5)(v) | |
| Emergency procedures for spills, etc? ✓ | | |
| Personnel understand procedures? ✓ | | |
| NOTES & REMARKS: | | Emergency occurred 7/20/82 Letter in mail to NRC. See enclosed copy picked up at this inspection |

AREAS INSPECTED AND FINDINGS

Licensee: _____ License No: _____ Amendment No: _____

| INSPECTION ITEM | CRITERIA | FINDING |
|---|---|-------------|
| 5. <u>Use of Materials</u> | | <u>N/c</u> |
| Procurement and use as required? Authorized form & route of administration? | 35.14(b) | |
| Special tests (moly breakthrough, leak tests, etc) required? | 35.14(b)(4) | |
| Inventory of brachytherapy sources? | 35.14(b)(5) | |
| Dose calibration checks performed? | - Quarterly dose calibrator not performed | |
| Posting & labeling as required? ✓ | 20.203 | 10-8 App D. |
| NOTES & REMARKS: | | |
| 6. <u>Storage of Materials</u> | | <u>C</u> |
| Material secured in both restricted and unrestricted areas? Adequately? ✓ | 20.207 | |
| NOTES & REMARKS: | | |
| 7. <u>Facilities</u> | Lic Cond _____ | |
| As described in lic cond or application? | | |
| Any changes made? Adequacy? | | |
| NOTES & REMARKS: Moved from 5th floor lab to 1st floor, which triples the space. began using new Dept. 10/1/92 | | |
| 8. <u>Instruments</u> | Lic Cond _____ | |
| Survey meters & instruments adequate for program? ✓ | | |
| Instruments & meters operable? Calibrated? | | |
| Calibration adequate? | | |
| NOTES & REMARKS: | | |

AREAS INSPECTED AND FINDINGS

Licensee: _____ License No: _____ Amendment No _____

| INSPECTION ITEMS | CRITERIA | FINDING |
|---|----------------------|----------|
| <u>9. Receipt and Transfer of Material</u> | | |
| Written procedures for pickup, receiving, opening packages? | 20.205 | <u>C</u> |
| Survey of packages when received? | 20.205(c)(1) | |
| Records of survey of packages? | 20.401(b) | |
| Transfer of materials proper? Transfer records maintained? | 30.41, 30.51 | |
| Authorized containers used? Shipping papers & package labels proper for packages on hand? | 71.5 | |
| NOTES & REMARKS: <i>Radiation labels not duplicated in dest receipt. Labels placed in regular trash.</i> | | |
| <u>10. Personnel Protection - External</u> | | |
| Personnel monitoring controls adequate? <input checked="" type="checkbox"/> Exposures minimized? | 20.101, 20.202 | <u>C</u> |
| Exposure records (NRC-4 or 5) maintained? Available for employee review? | 20.102(b), 20.401(a) | |
| Surveys conducted? Adequate? <input checked="" type="checkbox"/> | 20.201 | |
| Records of monitoring, surveys? <input checked="" type="checkbox"/> | 20.401 | |
| Levels in unrestricted areas within limits? (Particularly around nuclear med. hot lab rooms of brachytherapy patients) <input checked="" type="checkbox"/> | 20.1, 20.105 | |
| NOTES & REMARKS: | | |
| <u>11. Personnel Protection - Internal</u> | | |
| Airborne concentrations in restricted areas? (Xe-133, patients treated with I-131) <i>1/10/82</i> | 20.103 | <u>C</u> |
| Exposures to minors? | 20.104 | |
| Posting of airborne radioactivity areas? | 20.203(d) | |
| Survey, monitoring bioassay adequate for airborne radioactivity, surface contamination? Records maintained? | 20.201 20.401 | |
| Procedures for use of Xe-133 followed? <i>yes</i> | | |
| NOTES & REMARKS: | | |

AREAS INSPECTED AND FINDINGS

Licensee: _____ License No: _____ Amendment No: _____

| INSPECTION ITEM | CRITERIA | FINDING |
|--|--|------------|
| | | <u>N/C</u> |
| 12. <u>Effluent Controls, Waste Disposal</u> | | |
| Release of effluents controlled? (particularly Xe-133, radioiodine where used) | 20.106, 20.33 | |
| Waste disposals controlled? <input checked="" type="checkbox"/> | 20.301, 20.303, 20.304, 20.305 | |
| Procedures, records maintained? <input checked="" type="checkbox"/> | 20.401, Lic Cond _____ | |
| Surveys made? Adequate? <input checked="" type="checkbox"/> | 20.401 | |
| NOTES & REMARKS: | <i>Radioactive Labels not destroyed when waste goes in normal trash. 10.8 App. 8 (3)</i> | |

| | | |
|---|---|--|
| 13. <u>Notifications and Reports</u> | | |
| To individuals? | 19.13 | |
| Overexposures, excessive levels & concentrations, incidents? | 20.403, 20.405 | |
| Personnel exposures and monitoring, termination reports? <input checked="" type="checkbox"/> | 20.407, 20.408 | |
| Theft or loss of licensed material? <input checked="" type="checkbox"/> | 20.402 | |
| Misadministrations? <input checked="" type="checkbox"/> | 35.41-35.45 | |
| NOTES & REMARKS: | <i>Emergency spill of 7/30/82 thought to render 6 Radio Techs exposed took full film case was with then transferred to other place a check and normal</i> | |

| | | |
|---|----------|--|
| 14. <u>Posting of Notices</u> | | |
| Part 20, license & documents, procedures, notice of violations posted? | 19.11(a) | |
| NRC-3 posted? | 19.11(c) | |
| NOTES & REMARKS: | | |

15. Other License Conditions

AREAS INSPECTED AND FINDINGS

Licensee: _____ License No: _____ Amendment No: _____

INSPECTION ITEMS

CRITERIA

FINDING

16. Confirmatory Measurements

NRC Instrument: _____

Calibration Due Date: _____

17. Independent Inspection Effort18. Incidents and Events

Any incidents of misadministrations,
contamination, etc., not otherwise
covered by reports?

35.41 -35.45
20.402, 20.403, 20.405

*Letter Report of "Worker
Syringe Backstop" in mail to NRC resulting from*

INSPECTION REPORT NUMBER _____

Page _____ of _____

APPENDIX A - DOCUMENTATION OF NONCOMPLIANCE

Licensee: _____

License No: _____

| Reference | Basis for noncompliance |
|--|---|
| Report item <u>A1</u> | |
| 10 CFR _____ | |
| Lic Cond <u>1-10</u> <u>I-10</u> <u>10.8</u> <u>APPD</u> | <u>Loss calibration & accuracy -</u> <u>performed annually instead of quarterly</u> |
| Type n/c _____ | |
| Report item <u>A2</u> | |
| 10 CFR _____ | |
| Lic Cond <u>17-Item 18</u> <u>10.8</u> | <u>Do not deface labels before putting</u> <u>in normal trash.</u> |
| Type n/c <u>APP. J</u> | |
| Report item <u>B</u> | |
| 10 CFR <u>20.401</u> | <u>Complete</u> <u>inadequate records of materials</u> <u>receipt and disposal during July and</u> <u>August 1982 nor departmental surveys</u> |
| Lic Cond _____ | |
| Type n/c _____ | |
| Report item _____ | |
| 10 CFR _____ | |
| Lic Cond _____ | |
| Type n/c _____ | |
| Report item _____ | |
| 10 CFR _____ | |
| Lic Cond _____ | |
| Type n/c _____ | |
| Report item _____ | |
| 10 CFR _____ | |
| Lic Cond _____ | |
| Type n/c _____ | |

(July 82)

INSPECTION REPORT NUMBER

82-01

Page ____ of ____

APPENDIX B - LICENSEE ACTION ON PREVIOUS INSPECTION FINDINGS

Licensee: _____

License No: _____

Identification and summary of action taken

Status

Report No: 80-01

Type n/c: _____

Describe: _____

Action taken:

*G.M. Motor inadequate to carry
load no*

OPEN

CLOSED

Report No: _____

Type n/c: _____

Describe: _____

Action taken:

OPEN

CLOSED

Report No: _____

Type n/c: _____

Describe: _____

Action taken:

OPEN

CLOSED

Report No: _____

Type n/c: _____

Describe: _____

Action taken:

OPEN

CLOSED

Report No: _____

Type n/c: _____

Describe: _____

Action taken:

OPEN

CLOSED

Report No: _____

Type n/c: _____

Describe: _____

Action taken:

OPEN

CLOSED

(July 82)

INSPECTION REPORT NUMBER _____

Page ____ of ____

APPENDIX C - SUPPLEMENTARY INFORMATION

Licensee: _____

License No: _____

- () Uncorrected/repeated noncompliance
() Unusual occurrence, conditions, etc
() Basis for change of Category or Priority

- () Unresolved items
(☒) Inspector's comments

Relatively well run, well controlled
Small to mid size program averaging 6 to 8 studies
daily; Switched to Phonotape Supered down
in 1980; ~~but~~ presently experiencing some technical staff
instability. The Chief Tech (Radiology department
administrator) pinch hits in spec. med when no
one else is available. They are presently using
a temporary NM Technician.

NOV 8 1982

Docket No. 30-18996

License No. 08-19624-01

Groover, Christie, and Merritt Associates
ATTN: Paul L. Chandeysson, M.D.
Radiation Safety Officer
1145 19th Street, N.W.
Washington, D. C. 20036

Gentlemen:

Subject: Inspection No. 30-18996/82-01

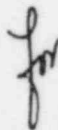
This refers to your letter dated October 11, 1982, in response to our letter dated October 5, 1982.

Thank you for informing us of the corrective and preventive actions documented in your letter. These actions will be examined during a future inspection of your licensed program.

Your cooperation with us is appreciated.

Sincerely,

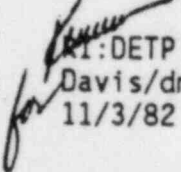
Original Signed By:
John D. Kinneman



Thomas T. Martin, Director
Division of Engineering and
Technical Programs

cc:
Public Document Room (PDR)
Nuclear Safety Information Center (NSIC)
District of Columbia ✓

bcc:
Region I Docket Room (w/concurrences)
~~Operational Support Staff~~

 RI:DETP
Davis/dmg
11/3/82

 RI:DETP
Darden
11/5/82

 RI:DETP
Kinneman
11/5/82

1K:07

33

821180327 1p.