

STATUS REPORT ON DEFICIENCIES  
NOTED BY THE U.S. NUCLEAR REGULATORY COMMISSION  
AT GEORGETOWN UNIVERSITY MEDICAL CENTER

Prepared by

Warren W. Schadt, PH.D., CHP  
Director of Radiation Control  
Office of the Chancellor  
Georgetown University Medical Center

November 1982

8506110438 850109  
PDR FOIA  
ENGEL84-789 PDR

## I. Introductions

An inspection of Georgetown University Medical Center (GUMC) was conducted by the U.S. Nuclear Regulatory Commission (NRC) on August 24 and 25, 1982. The inspection consisted of a review of the activities conducted under the authority of NRC License No. 08-01709-04.

The purpose of this report is to: (1) describe the specific actions that have been accomplished to correct these problems, (2) describe the actions taken or planned which will correct these deficiencies, and (3) describe the policy changes that are necessary.

## II. Actions in Deficient Areas

The following is in response to the four items mentioned in Appendix A of the NRC inspection report dated November 4, 1982. (Docket 30-01315).

### Item A

- 1) Corrective action already achieved.

The door to the laboratory in the Nuclear Medicine Laboratory has been equipped with an automatic lock which secures the door when it closes. In addition the Nuclear Medicine Division staff, housekeepers and security officers have been directed to keep the door locked.

### Item B

When patients are undergoing therapy treatments with radioactive materials, it is often impossible to limit radiation levels in the hallway outside the door to the patients room to levels below 0.59 mrem/hr (100 mrem/168 hours) as required by 10CFR20.105(b)(2). The patients which are a problem in this regard are ambulatory, and all practical measures which would restrict radiation levels outside to 0.59 mrem per hour would restrict the patient to bed and surround them with additional shielding. Such action would have a devastating emotional impact on most patients.

All of these patients undergo treatment for 24 to 48 hours. Our practice has been to ensure that the radiation levels in adjacent unrestricted areas comply fully with the limit of 500 mrem per year to a person in an adjacent area (10CFR20.105a). As discussed with Ms. Johansen by telephone on August 30, 1982, this procedure will soon be submitted as a requested amendment to NRC License 08-01709-04.



### Item C

1) Daily surveys with a low-range survey meter are now being performed in the injection/preparation areas of the Nuclear Medicine Division.

2) Monthly surveys are being performed in Room 312 of the Medical-Dental Building where activities under Authorization Number 46 are conducted.

3) Monthly surveys are now being conducted in the Basic Science Building where activities under Authorization Numbers 32 and 63 are conducted.

### Item D

1) The dose calibrator in the Nuclear Medicine Division is being tested for linearity quarterly and whenever it is returned from service.

2) The entire staff of the Department using room 309 of the Basic Science Building have been advised of the prohibition against eating in room 309 or any laboratory where radioactive materials are used or stored.

3) The requirement that all users of radioactive materials submit copies of all contamination test results to the Radiation Control Office each quarter was just recently initiated. Compliance with this procedure is rapidly improving.

As requested on page two of the November 4, 1982 letter signed by Mr. T.T. Martin, the following paragraphs confirm the procedures and/or equipment specified.

1) The new lock and closure device for Nuclear Medicine are discussed under item A of this report.

2) The thyroid bioassay program for persons performing iodinations or administering therapeutic quantities of radioactive iodine will comply with the provisions of NRC Regulatory Guide 8.20.

3) A request for license amendment will be submitted shortly requesting a yearly frequency for the calibration of radiation detection instruments used in a qualitative manner and a quarterly frequency for detectors used in a quantitative manner.

4) The inspections performed by the R.C.O. will include an audit designed to identify and correct violations of NRC regulations and license conditions.

NOV 4 1982

License No. 08-01709-04

Docket No. 30-01315

MEMORANDUM FOR: Daniel J. Holody, Enforcement Specialist, Enforcement and Investigation Staff, Region I

FROM: John D. Kinneman, Chief, Materials Program Section No. 1

SUBJECT: PROPOSED ENFORCEMENT ACTION - GEORGETOWN UNIVERSITY MEDICAL CENTER

Enclosed is a proposed enforcement letter for the subject licensee which includes a violation for failure to secure licensed material against unauthorized removal.

During the inspection, the inspectors went directly from the front door of the hospital to the Nuclear Medicine Department. They were able to enter the Department's "Hot Lab" where millicurie quantities of radiopharmaceuticals were stored, without being observed or challenged by employees in Nuclear Medicine, demonstrating that the licensee was not adequately controlling access to the licensed material stored there. However, the location of the Department within the hospital, the fact that actual radiation levels within the Department were low (less than 2 millirem per hour except for a bag of waste which measured 7 millirem per hour on contact with thin end window G-M survey meter), the half-life of most of the material was short (technetium-99m, 6 hours), and the fact that the licensed material was clearly labelled and not in an "attractive" form for theft lead us to conclude that the threat to the health and safety of the public was minimal and remote.

As of August 30, 1982, the licensee took corrective action by placing new locks on the laboratory, having a training session regarding security requirements for all personnel in the Department, establishing key control procedures and reviewing the need for an automatic door closer for the laboratory door. This leads us to conclude that classification of this violation in Severity Level IV is appropriate.

The licensee was last inspected on August 28-29, 1980; no violations were identified. Please give this matter your prompt attention.

Original Signed By:

JACK DAVIS

for John D. Kinneman, Chief  
Materials Program Section No. 1

cc:  
J. Lieberman, IE ✓  
D. Holody, RI

RI:DETP  
Johansen/lp  
10/25/82

RI:DETP  
Kinneman  
11/1/82

8211190234  
IP.

IE:07

NOV 4 1982

Docket No. 30-01315

License No. 08-01709-04

Georgetown University Medical Center  
ATTN: Matthew F. McNaulty, Sc.D.  
Chancellor, The Medical Center  
3800 Reservoir Road  
Washington, D.C. 20007

Gentlemen:

Subject: Inspection No. 82-01

This refers to the routine safety inspection conducted by Ms. J. Johansen and Mr. R. Ladun of this office on August 24 and 25, 1982, of activities authorized by NRC License No. 08-01709-04 and to the discussions of our findings held by Ms. Johansen with Mr. Greenbaum of your staff at the conclusion of the inspection, and to a subsequent telephone discussion between Ms. J. Johansen and Mr. J. Grolton on August 30, 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.

In addition, our inspector examined those activities conducted under your license relating to the subject covered in your letters to USNRC Region I dated June 11, 1982, July 7, 1981, July 29, 1981, January 25, 1982, February 12, 1982, and April 13, 1982. We have no further questions regarding these matters.

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 described in the attached Notice of Violation, involving control of licensed material, is classified as a Severity Level IV violation. As indicated in Supplement IV of the NRC Enforcement Policy, significant violations of this type are normally classified as Severity Level III. However, after careful consideration of the factors involved in this specific instance, we have exercised our judgement under the NRC Enforcement Policy and have classified this violation as Severity Level IV. Similar violations of this type in the future may result in additional enforcement action.

821190237  
3pp.

NOV 4 1982

In addition, from the August 30, 1982, telephone conversation, we understand that: (1) new locks have been installed on the Nuclear Medicine "Hot Lab", a training session regarding security was attended by all personnel in the Nuclear Medicine Department, and that you will review the need for an automatic door closer for this laboratory; (2) you will take measures to assure that individuals performing iodinations with one or more millicuries of iodine-125, and physicians administering therapeutic amounts of liquid iodine-131, have thyroid monitoring performed at the frequency stated in Regulatory Guide 8.20; (3) you will either perform calibrations of survey instruments quarterly or seek a license amendment to allow for yearly calibrations; and (4) your quarterly Radiation Control Office Surveys of the authorized user's laboratories will include an audit designed to identify and correct violations of NRC regulations and conditions of your license. You are advised that any new procedures developed as a result of these audits should be submitted to the NRC's Material Licensing Branch, Division of Fuel Cycle and Materials Safety, Washington, D.C. 20555, with a request that your license be amended to include them. Please confirm these understandings in your reply to this letter.

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:

*for* JACK DAVIS  
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 ✓

Georgetown University Medical Center  
ATTN: Warren Schadt, Ph.D. ✓  
Director Radiation Control  
305 Kober Cogan Building  
3750 Reservoir Road  
Washington, D.C. 20007

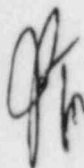
NOV 4 1982

Georgetown University Medical Center 3

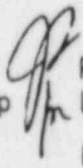
bcc w/encl:

Region I Docket Room (with concurrences) ✓

Chief, Operational Support Section (w/o encl) ✓



RI:DETP  
Johansen/lp  
9/15/82  
11/2/82



RI:DETP  
Ladun  
11/2/82



RI:DETP  
Kinneman  
11/2/82



NOV 4 1982

APPENDIX A

NOTICE OF VIOLATION

Georgetown University Medical Center  
Washington, D.C. 20007

Docket No. 30-01315  
License No. 08-01709-04

As a result of the inspection conducted on August 24, 25, 1982, and in accordance with the NRC Enforcement Policy (10 CFR 2, Appendix C), the following violations were identified:

- A. 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(a)(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 the above, on August 25, 1982, the Nuclear Medicine Laboratory, which contained millicurie quantities of licensed material was unlocked when it was not under constant surveillance and immediate control.

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

- B. 10 CFR 20.105(b) requires that radiation levels in unrestricted areas be limited so that an individual who was continuously present in the area could not receive a dose in excess of 2 millirems in any hour or 100 millirems in any seven consecutive days.

Contrary to the above, on July 7, 1982, August 9, 1982, August 17, 1982, and August 18, 1982, radiation levels of 1.9 millirem per hour, 2.2 millirem per hour, 2.5 millirem per hour, and 2.8 millirem per hour existed in the hallways outside of the doors of rooms C5-214, M7312, M5614, and M6108, in which patients were undergoing therapy treatment with 77 millicuries of iridium-192, 100 millicuries of iodine-131, 60 millicuries of iridium-192 and 60 millicuries of iridium-192, respectively.

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

- C. 10 CFR 20.201(b) requires that each licensee make such surveys as may be necessary for you to comply with all sections of Part 20. As defined in 10 CFR 20.201(a), "survey" means an evaluation of the radiation hazards incident to the production, use, release, disposal, or presence of radioactive materials or other sources of radiation under a specific set of conditions.

82119024/  
13pp



Contrary to the above, as of August 25, 1982, daily surveys with a low-range survey meter were not performed in the injection/preparation areas of the Nuclear Medicine Department, weekly surveys were not performed in Room 312 of the Medical-Dental Building where licensed materials are used under Authorization No. 46, and monthly surveys were not performed in the Rooms in the Basic Science Building where licensed material was used under Authorization Nos. 32 and 63. The inspector identified radiation levels of 7 millirem per hour in the Nuclear Medicine hot laboratory, and radiation levels of 3 millirem per hour due to phosphorus-32 contamination in Room 312.

- D. Condition 22 of License No. 08-01709-04 requires that licensed material be possessed and used in accordance with statements, representations and procedures contained in application dated May 8, 1980, and letters dated May 20, 1980, October 28, 1980, and ALARA Program dated October 28, 1980.

1. Block 10 of this application requires that the dose calibrator 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 linearity of the dose calibrator be determined at installation and quarterly thereafter.

Contrary to the above, as of August 25, 1982, dose calibrator linearity had not been determined since November 19, 1980, a period of more than a calendar quarter.

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

2. Item 15 of this application requires that the "General Rules for Safe Use of Radioactive Materials," contained in Appendix G of Regulatory Guide 10.8 be followed, with two exceptions.

Item 5 of Appendix G prohibits eating, drinking, smoking, or the application of cosmetics in any area where radioactive material is stored or used.

Contrary to the above, on August 25, 1982, food was being eaten in Room 309 of the Basic Science Building, a room posted with a Caution Radioactive Material sign.

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

3. Item No. 23 of this application contains additional radiation safety procedures for the use of radioactive materials.

Item 5 of these procedures requires that authorized users submit written results of contamination surveys to the Radiation Safety Office and that the Radiation Control Office inspect laboratories at

least quarterly to determine contamination levels, external radiation levels, records, signs, fumes hood function, security and general radiation safety requirements.

Contrary to the above, as of August 25, 1982, over 30 authorized users had not submitted written reports of contamination surveys for the first two quarters of 1982 and the Radiation Control Office inspections were performed annually rather than at a quarterly frequency.

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

Pursuant to the provisions of 10 CFR 2.201, Georgetown University Medical Center 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.

LICENSE NO: 08-01709-04

DOCKET NO. (s) 30-01315

PAGE \_\_\_\_\_ OF \_\_\_\_\_

ATTACHED

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

INSPECTION REPORT NO. 82-01

Georgetown Med. Ctr

3750 Reservoir Road (RSO-305 Kober Logan)

WASHINGTON, D.C. 20007

LICENSEE CONTACT: Warren Schadt

Dir. Rad Control

Telephone No: 202-625-2107 (57# 3 yrs)

LICENSE NO: 08-01709-04

CATEGORY G1A

PRIORITY: III

CATEGORY \_\_\_\_\_

PRIORITY: \_\_\_\_\_

CATEGORY \_\_\_\_\_

PRIORITY: \_\_\_\_\_

INSPECTION DATE (s): August 24, 25, 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: \_\_\_\_\_

☐ CHANGE PRIORITY TO: \_\_\_\_\_

PERSONS CONTACTED

James Grolton, RSO

Herbert Lane, RS Tech

Pete Dmoch, NMT

John Gachioch, Chief NMT

Le Tuan, NMT

Saroj Patel, NMT

Dr. John Harbort, Nuc Med

Dr. Hill - Rad Therapy

Mr. John Greenbaum, Director \*

Physical Service and Budget

\* Close out

INSPECTOR: Johansen, Ladum

APPROVED: W. Campbell

August 30, 1982

Sept 10, 1982

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	N/A	N/A	92702B
Independent Inspection Effort (Required)	✓	✓	92706B
Transportation	✓	✓	86740B

INSPECTION REPORT NUMBER \_\_\_\_\_

78710B - Medical

AREAS INSPECTED AND FINDINGS

Licensee: \_\_\_\_\_ License No: \_\_\_\_\_ Amendment No: \_\_\_\_\_

INSPECTION ITEMS	CRITERIA	FINDING
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1. Organization

Lic Cond \_\_\_\_\_

Structure of organization as described in requirements? *yes*

*McNaulty → Schadt → Grolton*

Scope of Program? Patient load? *15-20/day*

NOTES & REMARKS:

2. Licensee Internal Audits

Lic Cond ✓

Scope and frequency of audits as required?

*No audit - Ed, correction of MC*

Conducted by appropriate persons? *yes*

*but LIC requires quarterly RCO*

Records maintained? *NO*

Reviewed by management? *NO*

*Survey - not being done quarterly*

Deficiencies identified and corrected? *NO*

*but annually*

NOTES & REMARKS:

*Understanding - include Q audit which Ed's and corrects*

*Violations of REC regarding LIC's*

3. Training and Qualification of Personnel

Lic Cond 23

Training & retraining conducted as required?

Written & oral exams conducted? *yes*

Examination results reviewed by management?

Instructions to workers per 19.12?

*Underway - new 1982 manual internal RSO has been printed training session scheduled*

Authorized users? On license? Available in emergency? *OK*

Lic Cond 23

NOTES & REMARKS:

4. Radiation Protection Procedures

Lic Cond 23

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

*Standard for packaging intact Phosphorus indivi dual*

Close out Surveys on Patients receiving temporary implants? *OK*

*35.14 (b)(5)(v) Sgromys*

Emergency procedures for spills, etc? Personnel understand procedures? *OK*

*Now drug procedure review by Human Research Committee and Med Isotope Committee*

NOTES & REMARKS:



## 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? <u>OK</u> <u>OK</u>	35.14(b)	
Special tests (moly breakthrough, leak tests, etc) required? <u>N/A</u>	35.14(b)(4)	
Inventory of brachytherapy sources? <u>OK</u>	35.14(b)(5)	
Dose calibration checks performed? <u>NO</u> nearly dose calibrators since Nov 19, 1980		
Posting & labeling as required?	20.203	
NOTES & REMARKS:	Corrected dose lab and Nov 30, 219	
6. <u>Storage of Materials</u>		<u>N/C</u>
Material secured in both restricted and unrestricted areas? Adequately?	20.207	
NOTES & REMARKS:	at 7:29 AM inspectors walked from front door of Gorman Building directly into open blue. Med. Dept and found that lab door was open, NO tech or auxiliary (housekeeping) person was around and inspectors were not challenged. Over	
7. <u>Facilities</u>	Lic Cond <u>22</u>	<u>C</u>
As described in lic cond or application?		
Any changes made? Adequacy?		
NOTES & REMARKS:		
8. <u>Instruments</u>	Lic Cond <u>22</u>	<u>C</u>
Survey meters & instruments adequate for program?		
Instruments & meters operable? Calibrated? Calibration adequate?		
NOTES & REMARKS:	Understanding will do or get adjustment Some Survey meters done at greater than 3 month calibration frequency. 4 1/2 months greatest over repair - discussed need for relief due to increase number of meters since 1980. Applicant	



## 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>OK</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: 1 package I-131 didn't have results down for surface 3 ft but all other records did - Rad Oncology does receive packages besides RCB and Nuc. Med will change this on list		
<u>10. Personnel Protection - External</u>		
Personnel monitoring controls adequate? Exposures minimized?	20.101, 20.202	<u>N/C</u>
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: Daily surveys were kept - for contamination wipe not rad room levels as required in Appendix I of Reg Guide 10.6. They're not found in hot lab. Users do not do weekly surveys. - P-32 levels of 3 mR/h found which had been there in room 312 Med. Dept for 48 hours. Several users admitted to monthly surveys as required.		
<u>11. Personnel Protection - Internal</u>		
Airborne concentrations in restricted areas? (Xe-133, patients treated with I-131)	20.103	<u>OK</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?	However - HC require thyroid	
NOTES & REMARKS: Monitoring Reg Guide 8.20. - Understanding to assure T.M. for persons radiation with T.M. or time I-131 and MDs giving liquid I-131 dose therapy. See Appendix C		



## AREAS INSPECTED AND FINDINGS

Licensee: \_\_\_\_\_ License No: \_\_\_\_\_ Amendment No: \_\_\_\_\_

## INSPECTION ITEMS

## CRITERIA

## FINDING

16. Confirmatory MeasurementsNC

Nuc Med. 7 mR/hr near prep area - waste bag at surface. <sup>see #10</sup>  
 Just other hut lab area 32 mR/hr. not 3.5 mR/hr  
 Rem 312 Med Dent Building found P-32 level of 3 mR/hr  
 had existed for 48 hours. Other levels less  
 than 0.5 mR/hr

NRC Instrument:

WALM 14C GM

Calibration Due Date:

9/15/8217. Independent Inspection EffortN/C

reviewed receipt, use, waste for RSC authorization  
 of 10 users labs. RSC(RSC) is active and minutes  
 show in depth consideration of projects before approval  
 given.

Items such as Over 30 users not getting survey  
 records in for 1st & 2nd Q 1982 known by RSC and he  
 was in process of contacting individuals.

~~Had~~ Had RSC done Q surveys rather than annual  
 Violation identified would have been found by licensee!

18. Incidents and Events

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

35.41 - 35.45

20.402, 20.403, 20.405

none ~~found~~ found  
 other than those reported

7/29/81 6/11/81 7/7/81

2/12/82  
 11/25/82

4/13/82

corrective action was taken in each case  
 use of pharmaceuticals individual prescribed surveys have  
 helped evaluate problem in T.W. M. is admin. Not fully

INSPECTION REPORT NUMBER \_\_\_\_\_

Page \_\_\_\_\_ of \_\_\_\_\_

APPENDIX A - DOCUMENTATION OF NONCOMPLIANCE

Licensee: \_\_\_\_\_

License No: \_\_\_\_\_

Reference	Basis for noncompliance
Report item <u>2</u> 10 CFR _____ Lic Cond <u>22</u> Type n/c <u>IV</u>	RCO didn't do survey on required Q frequency but did them annually See next page for report Item 15 on <sup>summary</sup> no reports from users.
Report item <u>5</u> 10 CFR _____ Lic Cond <u>22</u> Type n/c <u>IV</u>	No linearity Since license issued on dose calibrator (Nov 19, 1982) No posting in hot lab and room 312 <sup>209</sup> corrected by licensee before end of inspection.
Report item <u>6</u> 10 CFR <u>20.207</u> Lic Cond _____ Type n/c <u>IV</u>	Wide open Nuc Med Dept and Hot lab at 7:29 AM 8/25/82 - no individuals tech etc challenged in inspectors - 7mR/hr hotspot identified, but hot levels from 0.5 - 2mR/hr.
Report item <u>8</u> 10 CFR _____ Lic Cond _____ Type n/c _____	Understanding 8/30/82 - will calibrate survey meters quarterly or see amendment for annual due to increased # of meters since application of 1980.
Report item <u>10, 16</u> 10 CFR <u>20.201</u> Lic Cond _____ Type n/c <u>IV</u>	Nuc Med did daily wipes not G-M surveys as required, P-32 users in Room 312 used mill. airtight amount of and didn't survey weekly - level of 3mkph for at least 48 hours. Several residents using more than 200mCi I-125 on open bench (Protranbunk 51) didn't do monthly survey - admitted.
Report item <u>11</u> 10 CFR _____ Lic Cond _____ Type n/c _____	Understanding to ensure thyroid monitoring done at 8.20 Reg Circle frequency when I-131 or more I-125 iodinated and therapy doses of I-131 handled by physicians -

next page  
~~over~~

INSPECTION REPORT NUMBER \_\_\_\_\_

Page \_\_\_\_\_ of \_\_\_\_\_

*Continued*  
APPENDIX A - LICENSEE ACTION ON PREVIOUS INSPECTION FINDINGS

Licensee: \_\_\_\_\_

License No: \_\_\_\_\_

Identification and summary of action taken

Status

Report No: Item 15

Type n/c: IV

L/C 22

Action taken:

Found user eating <sup>lunch</sup> in Room 309 Basin  
which is posted RAM. <sup>Swane</sup>

~~OPEN~~  
~~CLOSED~~

Report No: 15

Type n/c: IV

L/C 22

Describe: \_\_\_\_\_

Action taken:

Over 30 users didn't send in  
monthly survey reports to REC as required  
for 1<sup>st</sup> and 2<sup>nd</sup> Quarter of 1982

~~OPEN~~  
~~CLOSED~~

Report No: 2

Type n/c: IV

L/C 22

Describe: \_\_\_\_\_

Action taken:

Understanding Quarterly  
audits to identify and correct violations.

~~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)

Page \_\_\_\_\_ of \_\_\_\_\_

INSPECTION REPORT NUMBER \_\_\_\_\_

## 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

The overall program has enough persons to do a good job. However if the RSO doesn't do Q Sweep program could get out of control. As discussed in exit interview - had RSO done quarterly rather than annual surveys as 4C 22 requires - he would have identified the violations found during the inspection.

Many of the items found are due to communication break down in the users area. And this is scheduled to be rectified with training sessions scheduled on the new 1982 Rad Safety Manual which was distributed.

~~Re~~ In connection still being looked at but no work from D.C. as yet. Thinking of taking over University (Campus) Broad licence - review of staffing of RSO to do job is being discussed. Mr Greenbaum ~~then~~ will look into having outside consultant do the yearly review of the R.S.O. program required by ALARA Commitment.

Aug 30, 1980 telephone conversation - corrective actions are taking place - security, training on security and key control is Nac. Friedman - will review need for automatic door closer on hot lab Administration support of RSO and concerned at number of items found.



Docket Nos. 30-01326  
30-12537

JAN 25 1983

License Nos. 08-04289-06  
08-04289-08 ✓

Government of the District of Columbia  
District of Columbia General Hospital  
ATTN: Mr. Robert Johnson  
Executive Director  
19th and Massachusetts Avenue, Southeast  
Washington, D.C. 20003

Gentlemen:

Subject: Combined Inspections 30-01326/83-01; 30-12537/83-01

This refers to the routine safety inspection conducted by Messrs. Nicolosi and Jones of this office on January 4, 1983 of activities authorized by NRC License Nos. 08-04289-06 and 08-04289-08 and to the discussions of our findings held by Mr. Nicolosi with Mr. S. P. McCoy at the conclusion of the inspection and to a subsequent telephone discussion between Dr. Sabol and Mr. Nicolosi on January 10, 1983.

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 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.

With respect to NRC License No. 08-04289-06, our inspector also verified the steps you have taken to correct the violations brought to your attention in the enclosure to our letter dated September 17, 1980. We have no further questions regarding your action at this time.

Based on the results of this inspection, it appears that one of your activities was not conducted in full compliance with NRC requirements, as set forth in the Notice of Violation, enclosed herewith as Appendix A. This violation has 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.

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.

~~8302100297~~  
2pp.

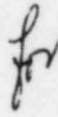
36  
1E:07

JAN 25 1983

Your cooperation with us in this matter is appreciated.

Sincerely,

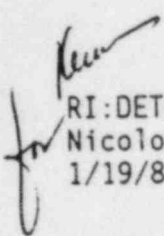
Original Signed By:  
John D. Kinneman

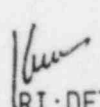
 Thomas T. Martin, Director  
Division of Engineering and  
Technical Programs

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 (w/concurrences)  
Senior Operations Officer (w/o encl)

 RI:DETP  
Nicolosi:as  
1/19/83

 RI:DETP  
Kinneman  
1/21/83

JAN 25 1983

APPENDIX A  
NOTICE OF VIOLATION

Government of the District of Columbia  
District of Columbia General Hospital  
Washington, D. C. 20003

Docket No. 30-01326  
License No. 08-04289-06

As a result of the inspection conducted on January 4, 1983, and in accordance with the NRC Enforcement Policy (10 CFR 2, Appendix C), the following violation was identified:

Condition 15 of License No. 08-04289-06 requires that licensed material be possessed and used in accordance with statements, representations and procedures contained in an application dated April 27, 1978.

Item 9.13 of the Radiation Safety Manual contained in this application requires that personnel monitor (survey) their hands for contamination after handling isotopes.

Contrary to the above, on January 4, 1983, personnel failed to adequately monitor their hands after handling isotopes. This item was identified by our inspector through independent measurements which indicated that an individual had detectable contamination on their hands of which they were unaware.

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

Pursuant to the provisions of 10 CFR 2.201, the District of Columbia General Hospital is hereby required to submit to this office within thirty days of the date of the letter which transmitted 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.

8302100299  
10pp

*Hospital very clean in June 1983*

LICENSE NO: 08-04289-08

DOCKET NO. (s) 30-12537

PAGE \_\_\_\_\_ OF \_\_\_\_\_

ATTACHED

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

INSPECTION REPORT NO. 82-01

D.C. gen Hosp  
19th & Mass Ave SE  
Washington D.C. 20003

LICENSEE CONTACT: Paul Walker M.D.

Telephone No: 202-675-5000

LICENSE NO: \_\_\_\_\_ CATEGORY G3 PRIORITY: 2

\_\_\_\_\_ CATEGORY \_\_\_\_\_ PRIORITY: \_\_\_\_\_

\_\_\_\_\_ CATEGORY \_\_\_\_\_ PRIORITY: \_\_\_\_\_

INSPECTION DATE (s): 1-4-83

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: 1/88

☐ CHANGE PRIORITY TO: \_\_\_\_\_

PERSONS CONTACTED

Paul Walker M.D.  
Ronny Keyes BORT CRSD  
Mrs M.J. Ganti - Real Tech.  
Margaret Christian Real Tech

INSPECTOR: J. Nicolosi

APPROVED: [Signature]

1/11/83

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)	—	—	78720B
Followup on Noncompliance and Deviations	—	—	92702B
Independent Inspection Effort (Required)	—	—	92706B
Transportation			86740B

(July 82)

INSPECTION REPORT \_\_\_\_\_

Page \_\_\_\_\_ of \_\_\_\_\_

787208 - Medical - Teletherapy

AREAS INSPECTED AND FINDINGS

Licensee: \_\_\_\_\_ License No: \_\_\_\_\_ Amendment No: \_\_\_\_\_

INSPECTION ITEM

CRITERIA

FINDING

1. Organization

Lic Cond \_\_\_\_\_

C

Management organization? OK

Radiation protection organization? OK

Patient load?

20 patients / day -

NOTES & REMARKS:

2. Training and Instructions to Employees

Lic Cond \_\_\_\_\_

C

Training program, scope and frequency, retraining?

Required tests administered, scores satisfactory?

Instructions to workers?

19.12

NOTES & REMARKS:

3. Radiation Protection Procedures

Lic Cond \_\_\_\_\_

C

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

5-year maintenance?

Lic Cond 20 OK

Emergency Procedures posted?

Lic Cond 16 OK

Radiation room monitor mounted, operable?

Tested? Survey meter used when inoperable?

Order yes

NOTES & REMARKS:

yes



## AREAS INSPECTED AND FINDINGS

Licensee: \_\_\_\_\_ License No: \_\_\_\_\_ Amendment No: \_\_\_\_\_

INSPECTION ITEM	CRITERIA	FINDING
4. <u>Materials, Facilities and Instruments</u>		<u>C</u>
Teletherapy unit location, interlock system operational, required tests? (every 6 months, records)	OK Lic Cond 10, 17, 19	
Access controls, posting of areas & rooms?	OK 20.203	
Survey instruments & dosimeters operable, properly calibrated?	OK Lic Cond _____	
Patient viewing system?	OK Lic Cond 13	
NOTES & REMARKS:		

5. Personnel Protection - External

Personnel monitoring control; minimize exposures, control of accumulated dose OK 20.101, 20.102, 20.202

Surveys conducted following last source change? Sent to NRC? Adequate? OK 20.201 Lic Cond 18

Levels in unrestricted areas? OK 20.1, 20.104

Stops installed? OK Lic Cond 15

NOTES & REMARKS:

6. Leak Tests of Sources

Performed by authorized persons & methods: OK Lic Cond 14

Performed at 6-month (or other) interval? OK

Records maintained; reports submitted of leaking sources; corrective action taken? OK

NOTES & REMARKS: none required

## AREAS INSPECTED AND FINDINGS

Licensee: \_\_\_\_\_ License No: \_\_\_\_\_ Amendment No: \_\_\_\_\_

INSPECTION ITEM	CRITERIA	FINDING
<u>7. Notifications and Reports</u>		
To individuals?	19.13	<u>C</u>
Overexposures, excessive levels, 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: <u>none</u>		
<u>8. Annual Calibration</u>		
At required intervals?	35.21 (a)	<u>C</u>
Include all required tests?	35.21 (b)	
Properly calibrated dosimetry system?	35.23 (a)	
Performed by a qualified expert?	35.21 (e), 35.24	
Decay corrections for interval not exceeding 1 month?	35.21 (d)	
Records available?	35.25	
NOTES & REMARKS:		
<u>9. Spot Check Measurements</u>		
At required intervals?	35.22 (a)	<u>C</u>
Include all required tests?	35.22 (b)	
Performed by qualified expert or reviewed by qualified expert within 15 days?	35.22 (c), 35.24	
Properly calibrated dosimetry system?	35.23 (b)	
Records available?	35.25	
NOTES & REMARKS: <u>Done by consultant Richard Gronke</u>		
<u>10. Posting of Notices</u>		
Part 20, license & documents, procedures, notice of violations?	19.11 (a)	<u>C</u>
NRC-3?	19.11 (c)	
NOTES & REMARKS:		

## AREAS INSPECTED AND FINDINGS

Licensee: \_\_\_\_\_ License No: \_\_\_\_\_ Amendment No: \_\_\_\_\_

INSPECTION ITEM	CRITERIA	FINDING
11. <u>Other License Conditions</u>		<u>                    </u>

## NOTES &amp; REMARKS:

12. Confirmatory MeasurementsOutput check? *non done*

Confirmation of condition 18 survey?

NOTES &amp; REMARKS:

*g/m survey  
head survey*NRC Instrument: *Model 146*Calibration Due Date: *3/83*13. Independent Inspection Effort*Door interlock check OK**Emergency Bar check OK*

NOTES &amp; REMARKS:

*Alarm monitor check OK*

INSPECTION REPORT NUMBER \_\_\_\_\_

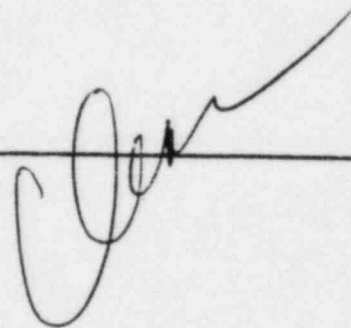
Page \_\_\_\_\_ of \_\_\_\_\_

APPENDIX A - DOCUMENTATION OF NONCOMPLIANCE

Licensee: \_\_\_\_\_

License No: \_\_\_\_\_

Reference	Basis for noncompliance
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 _____	

A handwritten signature in black ink, consisting of a large, stylized 'C' followed by a series of loops and a final upward stroke.

License No: \_\_\_\_\_

### Status

**OPEN**

**CLOSED**

**Action taken:**

**OPEN**

**CLOSED**

**Action taken:**

**OPEN**

**CLOSED**

**Action taken:**

OPEN

**CLOSED**

**Action taken:**

OPEN

**CLOSED**

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

Physician acts as dosimetrist  
Consultant spot checks calculations  
Decreased use of program

FEB 1 1983

Docket No. 30-10159

License No. 08-15994-01

Columbia Hospital for Women  
ATTN: Mr. G. Patrick Kane  
Associate Administrator  
2425 L. Street, N.W.  
Washington, D. C. 20037

Gentlemen:

Subject: Inspection No. 30-10159/82-01

This refers to your letter dated November 17, 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

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

cc:  
Robert Sloan, Associate Administrator ✓  
William J. Jaffurs, M.D., Nuclear Medicine ✓  
Public Document Room (PDR)  
Nuclear Safety Information Center (NSIC)  
District of Columbia ✓

bcc:  
Region I Docket Room (w/concurrences)

*f* *Kinn*  
RI:DETP  
Darden/pja  
1/25/83

*Kinn*  
RI:DETP  
Kinneman  
1/26/83

8302030069  
1/p.

37  
1E:07



# Columbia Hospital For Women

2425 L STREET, NORTHWEST, WASHINGTON, D.C., 20037

PHONE: 293-6500

November 17, 1982

Thomas T. Martin, Director  
Division of Engineering and  
Technical Programs  
U.S. Nuclear Regulatory Commission  
Region I  
631 Park Avenue  
King of Prussia, Pennsylvania 19406

Subject: Inspection No. 82-01

Gentlemen:

This letter is in response to receipt of your letter of October 5, 1982, Docket No. 30-10159, concerning Inspection 82-01 for NRC License No. 08-15994-0 and a follow-up letter of October 6, 1982 sending a copy of the Guidelines for Decontamination of Facilities and Equipment. We received a 15 day extension on our response time per telephone communication with your office because of difficulty in contacting Picker Corporation regarding the efficiency of the crystal in our Picker Compac 120 gamma counter.

- ✓ The deficiencies noted during the inspection have been corrected as follows
- A. Technologists are required to wear and are wearing latex protective gloves while handling radioactive materials.
  - B. 1. All statements, representations and procedures contained in the application dated May 11, 1979 are being followed.  
2. The survey meter has been calibrated (see Enclosure) and will be calibrated at least annually and following repair.
  - C. The records of receipt, transfer, export and disposal of licensed material are being kept current. The holding of low-level radioactive solid wastes until radiation levels reach background level and subsequent disposal as ordinary waste which was proposed in our letter of January 17, 1980 (answered February 11, 1980, Docket No. 30-10159) is being put into effect.

In addition, the Guidelines for Decontamination of Facilities and Equipment (June 1980) have been followed prior to the vacated facility being related for unrestricted use:

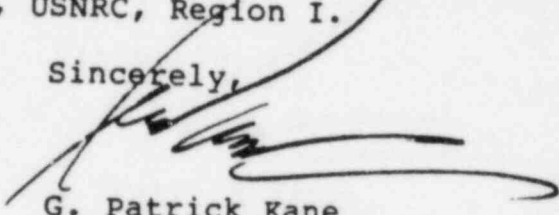
Washington's Only Hospital Exclusively For Women

8302030073  
300

1. Residual contamination was eliminated.
2. Equipment or surfaces that might be covered by paint, plating, or other covering material were surveyed and documented to be below limits for contamination levels specified in Table 1.
3. The radioactivity of the representative surfaces of pipes, drainlines and ductwork has been determined at the appropriate access point, the trap, and found to be below the specified level of contamination.

A copy of the survey report is being filed with the Chief, Material Licensing Branch, Division of Fuel Cycle and Material Safety, USNRC, Washington, D.C. and also the Director of the Regional Office of the Office of Inspection and Enforcement, USNRC, Region I.

Sincerely,



G. Patrick Kane  
Hospital Administrator

Enclosure

*Health Physics Services, Inc.*

7825 Twickenham Lane, Suite 214

Polomac Maryland 20854

Phone: (301) 299-2700 Toll Free: 800 636 8488

# CALIBRATION CERTIFICATE

OWNER Columbia Hospital for Women CALIBRATION DATE 8/27/02 NEXT DUE —

MANUFACTURED Finer MODEL NUMBER - SERIAL NUMBER 271

BATTERIES CHANGED: ☐ YES ☒ NO INTERNAL ADJUSTMENT: ☒ YES ☐ NO

The instrument was calibrated with the sensitive chamber positioned parallel/perpendicular to the radiation field.

METER RESPONSE SCALE TRUE EXPOSURE 76  
(mR/hr) (mR/hr)

260 2.33 366

0      1.2      147

50 4.2

1.6      1.4

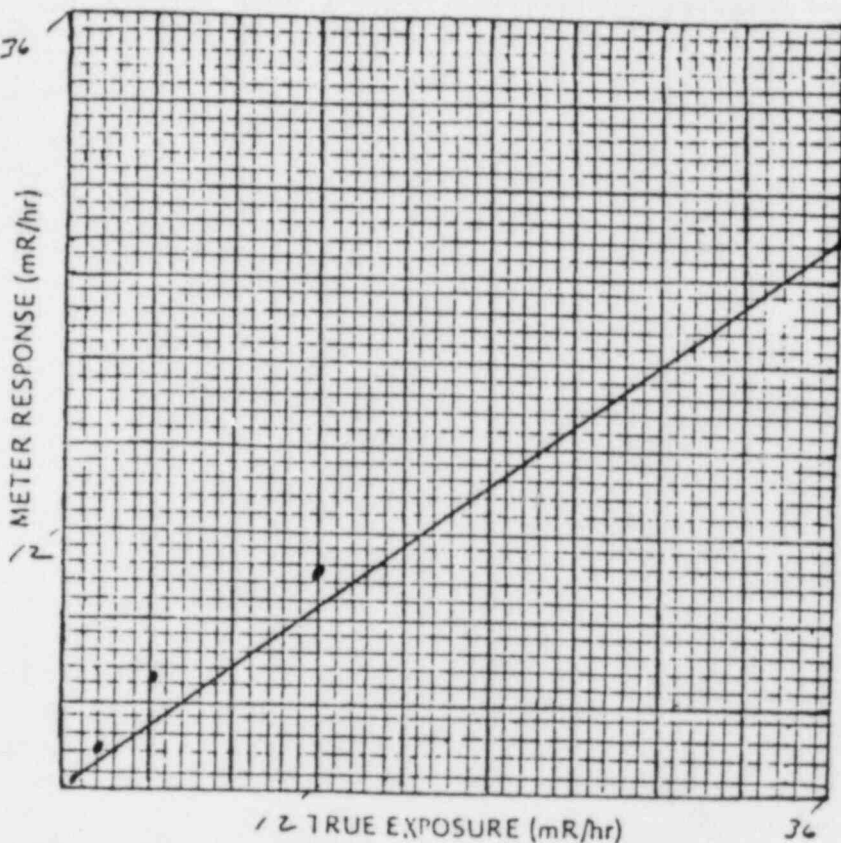
40 41 50

\_\_\_\_\_ 16 \_\_\_\_\_ 21 \_\_\_\_\_ 20

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



After calibration with Cesium-137, a Tc-99m factor was determined by measuring the response of this instrument to a calibrated source of Cobalt-57. The exposure rate at an arbitrary distance for the Cobalt-57 source is determined using the inverse square law and verified with a calibrated dose rate meter.

[illegible]

6. 1.6

THIS CERTIFIES that the instrument described above was calibrated with Cesium-137. Exposure rates for this source have been verified with instrumentation whose calibration is traceable to the National Bureau of Standards.

Charles J. Vizer  
Health Physics Technician



OCT 5 1982

Columbia Hospital for Women  
ATTN: Mr. Robert Sloan  
Associate Administrator  
2425 L. Street, N.W.  
Washington, D. C. 20037

Gentlemen:

Subject: Inspection No. 82-01

This refers to the routine safety inspection conducted by Mrs. Teresa Darden of this office on August 16, 1982 of activities authorized by NRC License No. 08-15994-01 and to the discussions of our findings held by Mrs. Darden with yourself and Dr. R. Krakaur of your staff at the conclusion of the inspection, and to a subsequent telephone discussion between Mrs. Darden and Mr. Michael Eagle on August 31, 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 April 23, 1979. 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 discussion of our findings at the conclusion of the inspection, it is our understanding that you plan to update your license by submitting descriptions of your new nuclear medicine facility to the U.S. Nuclear Regulatory Commission, Region I, Material Program Section No. 2, 631 Park Avenue, King of Prussia, Pennsylvania 19406. Prior to release of your present nuclear medicine facilities, you should make surveys to assure that these facilities meet the criteria for unrestricted use as specified in the enclosed, "Guidelines for Decontamination of Facilities and Equipment".

~~8210270304~~  
2pp

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:

1. Appendix A, Notice of Violation
2. Guidelines for Decontamination of Facilities and Equipment

cc w/encls:

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

bcc w/encls:

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

*for*  
R1:DETP  
Darden/wb  
9/24/82

*Kinneman*  
R1:DETP  
Kinneman  
10/4/82

OCT 5 1982

APPENDIX A

NOTICE OF VIOLATION

Columbia Hospital for Women  
Washington, D. C. 20037

Docket No. 30-10159  
License No. 08-15994-01

As a result of the inspection conducted on August 16, 1982, and in accordance with the NRC Enforcement Policy (10 CFR 2, Appendix C), the following violations were identified:

- A. 10 CFR 19.12 requires that all individuals working in restricted areas be instructed in the applicable provisions of the Commission's regulations and your specific license.

Contrary to the above, as of August 16, 1982, a technologist working in the restricted area had not been instructed in the applicable provisions of the regulations and the conditions of the license, including the requirement to wear gloves while handling radioactive materials.

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

- B. Condition 15 of License No. 08-15994-01 requires that licensed material be possessed and used in accordance with statements, representations and procedures contained in an application dated May 11, 1979.

1. Item 15 of this application requires that disposable gloves be worn at all times while handling radioactive materials.

Contrary to the above, as of August 16, 1982, personnel in the Nuclear Medicine Radioimmunoassay Laboratory have never worn disposable gloves when handling radioactive materials.

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

2. Item 10 of this application requires that survey meters be calibrated at least annually and following repair.

Contrary to the above, as of August 16, 1982, the survey meter had not been calibrated since April 6, 1981, a period of more than one year.

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

- C. 10 CFR 30.51(a) requires that each licensee keep records showing the receipt, transfer, export, and disposal of licensed material.

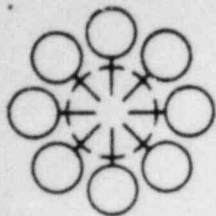
Contrary to the above, as of August 16, 1982, the required records of licensed material received and disposed of by transfer to an authorized recipient had not been maintained since May 16, 1982.

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

8210210311  
16pp

OCT 5 1982

Pursuant to the provisions of 10 CFR 2.201, Columbia Hospital for Women 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 violation; and (3) the date when full compliance will be achieved. Where good cause is shown, consideration will be given to extending this response time.



# COLUMBIA HOSPITAL FOR WOMEN

2425 L Street, Northwest, Washington, D.C. 20037  
(202) 293-6500

DEAR MS. DARDEN:

HERE IS THE WIPE TESTING AREAS OF  
OUR NUCLEAR MEDICINE LAB. I FORGOT TO SEND  
IT WITH THE OTHER LETTER WE SENT YOU.

SINCERELY,

Michael L. Eagle

SUPERVISOR NUCLEAR MED LAB.

LICENSE # 08-15994-01

EXPIRES: 7-31-84

WE CARE FOR YOU



NUCLEAR MEMORIAL  
WIPE TEST AREAS.  
(1-9)

Hood if  
Non Radiac  
Use Only

Wipe  
Use Only

5  
Pick-up  
Cup, 12"  
Gallon 5-1000

9  
7

6  
Contaminated

8

1  
Contaminated

1  
Contaminated

2  
Contaminated

3  
Radiactive  
Use Sink

EXIT

REGION I Form 198-C  
(July 82)

LICENSE NO: 08-15994-01

DOCKET NO. (s) 30-10159

PAGE \_\_\_\_\_ OF \_\_\_\_\_

ATTACHED

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

INSPECTION REPORT NO. 82-01

Columbia Hospital for Women  
2425 H St. N.W.  
Washington DC 20037

LICENSEE CONTACT: \_\_\_\_\_

Telephone No: \_\_\_\_\_

LICENSE NO: 08-15994-01

CATEGORY C

PRIORITY: IV

CATEGORY \_\_\_\_\_

PRIORITY: \_\_\_\_\_

CATEGORY \_\_\_\_\_

PRIORITY: \_\_\_\_\_

INSPECTION DATE (s): August 16, 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: 8-84

☐ CHANGE PRIORITY TO: \_\_\_\_\_

PERSONS CONTACTED

Clarence Hayfleet, Chief Tech Mr. Robert Sloan, Associate Administrator  
Yvonne George, MT  
Antoinette Austin, MT  
Clara Richard Krakauer, MD - R14  
Ted Miller, Lab Manager  
Michael Eagle, Supervisor (Vacation)

INSPECTOR: Yeresa Hall Darden 8/16/82

APPROVED: [Signature] 9/14/82

INSPECTION PLAN AND REPORT NUMBER \_\_\_\_\_

Page \_\_\_\_\_ of \_\_\_\_\_

Plan Approved: \_\_\_\_\_

Date: \_\_\_\_\_

License No. \_\_\_\_\_

Licensee: \_\_\_\_\_

Inspection Items	Scheduled for Inspection	Post Inspection Status	Module No.
Management Meeting - Entrance and Exit Interviews (Required)			30703B <del>324</del> 13
Program Requirements, MC 2860 (Required)			78710B 4.25/100
Followup on Noncompliance and Deviations			92702B
Independent Inspection Effort (Required)			92706B
Transportation			86740B

INSPECTION REPORT NUMBER \_\_\_\_\_

Page \_\_\_\_ of \_\_\_\_

78710B - Medical

AREAS INSPECTED AND FINDINGS

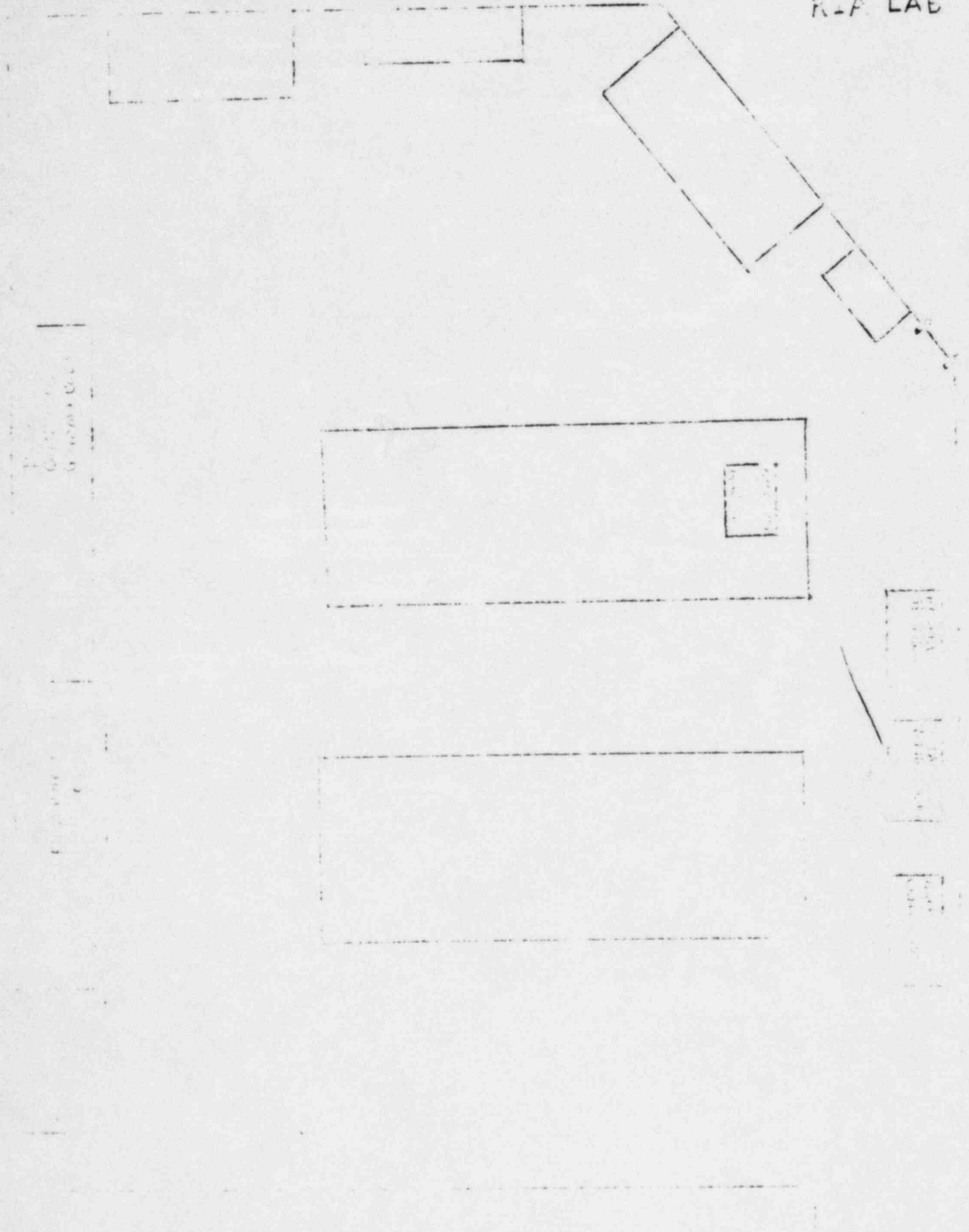
Licensee: \_\_\_\_\_ License No: \_\_\_\_\_ Amendment No: \_\_\_\_\_

INSPECTION ITEMS	CRITERIA	FINDING
1. <u>Organization</u>	Lic Cond _____	_____
Structure of organization as described in requirements?		
Scope of Program? Patient load?		
NOTES & REMARKS:	<i>RIA work only</i> <i>Medical Laboratory</i> <i>Serum Estradiol, B Hcg Rapid, Quantitative B, Hcg, F<sub>1</sub>, F<sub>2</sub>, F<sub>3</sub> uptake, FSH-LH, Prolactin</i> <i>Theophylline Gentamicin</i>	
2. <u>Licensee Internal Audits</u>	Lic Cond _____	<i>N/C</i>
Scope and frequency of audits as required?	- -	
Conducted by appropriate persons?		
Records maintained?	<i>Not since 5/21/82</i>	
Reviewed by management?		
Deficiencies identified and corrected?		
NOTES & REMARKS:		
3. <u>Training and Qualification of Personnel</u>	Lic Cond _____	<i>N/C</i>
Training & retraining conducted as required?		<i>Tech states that she is not familiar with 10CER 19-20</i>
Written & oral exams conducted?		
Examination results reviewed by management?		
Instructions to workers per 19.12?	19.12	<i>No</i>
Authorized users? On license? Available in emergency?	Lic Cond _____	
NOTES & REMARKS:		
4. <u>Radiation Protection Procedures</u>	Lic Cond _____	<i>N/C</i>
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?	35.14 (b)(5)(v)	
Emergency procedures for spills, etc? Personnel understand procedures?		<i>Medical Technologists do not use gloves</i>
NOTES & REMARKS:		

N J RIA Lab Facility  
Columbia Hospital for Women

Rev. 1016

RIA LAB





CHECK-OUT LIST FOR RADIOI UNOASSAY

Name: \_\_\_\_\_

*Hedley M. Calverton Step 4 work*

Procedures

Date

Approval

SOP/Safety Manual

T<sub>4</sub>

T<sub>3</sub> Uptake

Serum Estrinol

Rapid Beta HCG

Quantitative Beta HCG

Prolactin

FSH

LH

Theophylline

Gentamicin

Familiar with RIA Lab Radiation Procedures

Familiar with NRC 10 CFR 19 and 20

Familiar with RIA Radiation Waste Disposal  
Procedures

## AREAS INSPECTED AND FINDINGS

Licensee: \_\_\_\_\_ License No: \_\_\_\_\_ Amendment No: \_\_\_\_\_

INSPECTION ITEM	CRITERIA	FINDING
5. <u>Use of Materials</u>		<u>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?		
Posting & labeling as required?	20.203	
NOTES & REMARKS:	No NRC 3 Posted Parts 19, 20 not updated since 1975 Corrected by end of visit. Will call annually for updated versions of 19 & 20	
6. <u>Storage of Materials</u>		<u>OK</u>
Material secured in both restricted and unrestricted areas? Adequately?	20.207	
NOTES & REMARKS:	Refrigerated	
7. <u>Facilities</u>	Lic Cond _____	<u>N/C</u>
As described in lic cond or application?		
Any changes made? Adequacy?		
NOTES & REMARKS:	Moved to Ground Floor (New Lab) No longer on 5th Floor Did not inform NRC of change	
8. <u>Instruments</u>	Lic Cond _____	<u>N/C</u>
Survey meters & instruments adequate for program?		
Instruments & meters operable? Calibrated?		
Calibration adequate?		
NOTES & REMARKS:	Picker Survey meter out of calibration Not since 4/6/81	

## 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? <i>no entry since 5/16 to point of entry</i>	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? <i>OK</i>		
Surveys conducted? Adequate? <i>OK</i>	20.201	
Records of monitoring, surveys? <i>✓</i>	20.401	
Levels in unrestricted areas within limits? (Particularly around nuclear med. hot lab rooms of brachytherapy patients) <i>OK</i>	20.1, 20.105	
NOTES & REMARKS:		

11. Personnel Protection - Internal

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? <i>✓</i>	20.201	
Records maintained?	20.401	
Procedures for use of Xe-133 followed?		
NOTES & REMARKS:		

HA

## AREAS INSPECTED AND FINDINGS

Licensee: \_\_\_\_\_ License No: \_\_\_\_\_ Amendment No: \_\_\_\_\_

INSPECTION ITEM	CRITERIA	FINDING
<u>12. Effluent Controls, Waste Disposal</u>		
Release of effluents controlled? (particularly Xe-133, radioiodine where used)	20.106, 20.33	<u>N/C</u>
Waste disposals controlled? - <i>Commercial Disposal</i>	20.301, 20.303, 20.304, 20.305	
Procedures, records maintained? <i>Yes</i>	20.401, Lic Cond _____	
Surveys made? Adequate? - <i>wipes done</i>	20.401	
NOTES & REMARKS: <i>sporadically - Eting Efficiency??</i>		
<u>13. Notifications and Reports</u>		
To individuals?	19.13	<u>C</u>
Overexposures, excessive levels & concentrations, incidents? <i>✓</i>	20.403, 20.405	
Personnel exposures and monitoring, termination reports? <i>✓</i>	20.407, 20.408	
Theft or loss of licensed material? <i>None</i>	20.402	
Misadministrations? <i>none</i>	35.41-35.45	
NOTES & REMARKS:		
<u>14. Posting of Notices</u>		
Part 20, license & documents, procedures, notice of violations posted? <i>✓</i>	19.11(a)	<u>N/C</u>
NRC-3 posted? - <i>No</i>	19.11(c)	
NOTES & REMARKS:		
<u>15. Other License Conditions</u>		

## AREAS INSPECTED AND FINDINGS

Licensee: \_\_\_\_\_ License No: \_\_\_\_\_ Amendment No: \_\_\_\_\_

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INSPECTION ITEMS	CRITERIA	FINDING
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16. Confirmatory Measurements \_\_\_\_\_

NRC Instrument: \_\_\_\_\_ Calibration Due Date: \_\_\_\_\_

17. Independent Inspection Effort \_\_\_\_\_18. Incidents and Events \_\_\_\_\_Any incidents of misadministrations,  
contamination, etc., not otherwise  
covered by reports?35.41 -35.45  
20.402, 20.403, 20.405



INSPECTION REPORT NUMBER 92-01

Page \_\_\_\_\_ of \_\_\_\_\_

APPENDIX A - DOCUMENTATION OF NONCOMPLIANCE

Licenses: Columbia Hospital for Women

License No: \_\_\_\_\_

Reference	Basis for noncompliance
Report item <u>B1</u> 10 CFR <u>30.51(a)</u> Lic Cond _____ Type n/c <u>✓</u>	No records showing materials disposal since 5/16/82 - Disposal occur monthly
Report item <u>A3</u> 10 CFR _____ Lic Cond <u>15 Item 10</u> Type n/c _____	GPI Meter out of Calibration since 4/6/81
Report item <u>A1</u> 10 CFR _____ Lic Cond <u>15 Item 12</u> Type n/c _____	No Training in 19, 20 & License conditions
Report item <u>A-2</u> 10 CFR _____ Lic Cond <u>15 Item 15</u> Type n/c _____	No gloves worn when handling Radioactive material by techs.
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: Columbia Hospital for Women

License No: 08-15994-01

Identification and summary of action taken			Status
Report No: <u>82-01</u>	Type n/c: <u>    </u>	Describe: <u>monthly</u> <u>Inadequate Survey.</u>	
Action taken: <u>Survey now done "weekly" and log</u> <u>is maintained.</u>			<input checked="" type="radio"/> OPEN <input type="radio"/> CLOSED
Report No: <u>    </u>	Type n/c: <u>    </u>	Describe: <u>    </u>	
Action taken: <u>    </u>			<input type="radio"/> OPEN <input type="radio"/> CLOSED
Report No: <u>    </u>	Type n/c: <u>    </u>	Describe: <u>    </u>	
Action taken: <u>    </u>			<input type="radio"/> OPEN <input type="radio"/> CLOSED
Report No: <u>    </u>	Type n/c: <u>    </u>	Describe: <u>    </u>	
Action taken: <u>    </u>			<input type="radio"/> OPEN <input type="radio"/> CLOSED
Report No: <u>    </u>	Type n/c: <u>    </u>	Describe: <u>    </u>	
Action taken: <u>    </u>			<input type="radio"/> OPEN <input type="radio"/> CLOSED

(July 82)

INSPECTION REPORT NUMBER \_\_\_\_\_

Page \_\_\_\_\_ of \_\_\_\_\_

## APPENDIX C - SUPPLEMENTARY INFORMATION

Licensee: \_\_\_\_\_ License No: \_\_\_\_\_

- |   |  |
|---|--|
| <input type="checkbox"/> ( ) Uncorrected/repeated noncompliance       | <input type="checkbox"/> ( ) Unresolved items                |
| <input type="checkbox"/> ( ) Unusual occurrence, conditions, etc      | <input checked="" type="checkbox"/> ( ) Inspector's comments |
| <input type="checkbox"/> ( ) Basis for change of Category or Priority |  |

Scope of the program includes all RIA work -  
Routines include Semen Estimation, Quantitative B. Neg., T<sub>4</sub>, 317  
upstabs etc. Kits are delivered & persons handling radio-  
nucleides are medical technologists. Although supervising  
tech. was on leave, conversations with other personnel  
revealed that program controls should be strengthened.

MAR 16 1983

Docket No. 030-01792

License No. 19-07187-01

Veterans Administration Medical Center  
ATTN: Mr. Robert Dawson  
Director  
Perry Point, Maryland 21902

Gentlemen:

Subject: Inspection No. 83-01

This refers to your letter dated March 8, 1983, in response to our letter dated February 14, 1983.

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 E. Glenn, Ph.D.

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

cc:  
Public Document Room (PDR)  
Nuclear Safety Information Center (NSIC)  
State of Maryland

Dr. James J. Smith  
Director Nuclear Medical Services (112R)  
Veterans Administration Central Office  
Washington, D.C. 20420

bcc:  
Region I Docket Room (w/concurrences)

~~8303210455~~  
14.  
38 1E07

OFFICE	RI:DETP	RI:DETP	RI:DETP				
NAME	Friedman/lp	Jones	Glenn				
DATE	3/15/83	3/15/83	3/15/83				



Veterans  
Administration

MAR 8 1983



Mr. Thomas T. Martin, Director  
Division of Engineering and  
Technical Programs  
U. S. Nuclear Regulatory Commission  
Region 1  
631 Park Avenue  
King of Prussia, PA 19406

Dear Mr. Martin:

SUBJ: Inspection No. 83-01

The inspection conducted on January 27, 1983 identified two violations in accordance with NRC Enforcement Policy (10 CFR 2, Appendix C).


1. Item C of Appendix D, Section 2, required that dose calibrators be checked daily with a long-lived standard radionuclide at all commonly used radionuclide settings.

Corrective steps have been taken to comply with Item C of Appendix D, Section 2. The dose calibrator commonly used radionuclide plug-in modules will be checked daily with a long-lived standard radionuclide (cesium-137) as of February 1, 1983.

2. Item 7 of this application required that the Medical Isotope Committee meet at least quarterly.

Corrective steps will be taken to meet quarterly starting in March 1983.

Sincerely yours,

  
ROBERT DAWSON  
Director

8303210470  
1p,



14 FEB 1983

Docket No. 30-01792

License No. 19-07187-01

Veterans Administration Medical Center  
ATTN: Mr. Robert Dawson  
Director  
Perry Point, Maryland 21902

Gentlemen:

Subject: Inspection No. 83-01

This refers to the routine safety inspection conducted by Dr. Lawrence F. Friedman and Mr. Samuel Jones of this office on January 27, 1983 of activities authorized by NRC License No. 19-07187-01 and to the discussions of our findings held by Dr. Friedman and Mr. Jones with Dr. Milton Ginsberg and other members of your staff at the conclusion of the inspection.

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.

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. This violation has 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.

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.

~~8302280367~~  
2pp

1EC7

14 FEB 1983

Veterans Administration Medical Center 2

Your cooperation with us in this matter is appreciated.

Sincerely,

*Original signed by  
J. E. Glenn*

*for* 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)

State of Maryland (2) ✓

Dr. James J. Smith, Director, Nuclear Medicine Services ✓

VA Coordinator

bcc w/encl:

Region I Docket Room (with concurrences)

Senior Operations Officer (w/o encl.) ✓

*for* RI:DETP

Friedman/nm  
2/10/83

RI:DETP

Jones

*for* 2/10/83

RI:DETP

Glenn

*for* 2/10/83

14 FEB 1983

APPENDIX A

NOTICE OF VIOLATION

Veterans Administration Medical Center  
Perry Point, Maryland 21902

Docket No. 30-01792  
License No. 19-07187-01

As a result of the inspection conducted on January 27, 1983, and in accordance with the NRC Enforcement Policy (10 CFR 2, Appendix C), the following violations were identified:

Condition 17 of License No. 19-07187-01 requires that licensed material be possessed and used in accordance with statements, representations and procedures contained in an application dated February 28, 1979.

1. 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.

Items C. of Appendix D, Section 2, requires that dose calibrators be checked daily with a long lived standard radionuclide at all commonly used radionuclide settings.

Contrary to the above, as of January 27, 1983, the dose calibrator was not checked on all commonly used radionuclide settings (plug-in modules) with a long-lived standard radionuclide (cesium-137).

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

2. Item 7 of this application requires that the Medical Isotopes Committee meet at least quarterly.

Contrary to the above, as of January 27, 1983, the Medical Isotopes Committee has met semiannually, rather than quarterly.

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

Pursuant to the provisions of 10 CFR 2.201, Veterans Administration Medical Center is hereby required to submit to this office within thirty days of the date of the letter which transmitted 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.

~~8302280373~~  
19pp

LICENSE NO: 19-07187-01

DOCKET NO. (s) 30-01792

PAGE \_\_\_\_\_ OF \_\_\_\_\_

ATTACHED

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

INSPECTION REPORT NO. 83-01

Veterans Administration Medical Center  
Nuclear Medicine Department  
Perry Point, Maryland 21902

LICENSEE CONTACT: \_\_\_\_\_

Telephone No: 8-922-4725

LICENSE NO: 19-07187-01

CATEGORY G PRIORITY: IV

CATEGORY \_\_\_\_\_ PRIORITY: \_\_\_\_\_

CATEGORY \_\_\_\_\_ PRIORITY: \_\_\_\_\_

INSPECTION DATE (s): Thurs. 1-27-83

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 CLEAR  
☐ NONCOMPLIANCE, 591 ISSUED  
☐ SUPPLEMENTAL INFO, APPENDIX C

RECOMMENDATIONS  
SEE BASIS IN APPENDIX C

- ☐ CHANGE CATEGORY TO: \_\_\_\_\_  
☐ NEXT INSPECTION DATE: \_\_\_\_\_

☐ CHANGE PRIORITY TO: \_\_\_\_\_

PERSONS CONTACTED

\* Milton Ginsberg, M.D., Chief of Staff letter to:  
\* C.R.V. Kamath, M.D., Dir. N.M. Robert Dawson, Director  
\* Alexander W. Varsady, Chief Tech.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

INSPECTOR: Lawrence F. Friedman 1/31/83 Jan 2 Jan 1/31/83  
APPROVED: J. Glenn 2/1/83

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



(July 82)

Page \_\_\_\_ of \_\_\_\_

INSPECTION REPORT NUMBER \_\_\_\_\_

787108 - Medical

AREAS INSPECTED AND FINDINGS

Amendment No: \_\_\_\_\_

License No: \_\_\_\_\_

Licensee: \_\_\_\_\_

INSPECTION ITEMS

CRITERIA

FINDING

1. Organization

Lic Cond \_\_\_\_\_

C

Structure of organization as described in requirements?

*Medical Records reports directly to the Hospital Chief of Staff*

Scope of Program? Patient load?

NOTES & REMARKS:

*ISO 160  
month*

*Groups I - IV*

2. Licensee Internal Audits

Lic Cond \_\_\_\_\_

IV

Scope and frequency of audits as required?

Conducted by appropriate persons?

Records maintained?

Reviewed by management?

Deficiencies identified and corrected?

NOTES & REMARKS:

*Radiation Safety Committee meets  
semi annually rather than quarterly.*

3. Training and Qualification of Personnel

Lic Cond \_\_\_\_\_

C

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. Radiation Protection Procedures

Lic Cond \_\_\_\_\_

C

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?

35.14 (b)(5)(v)

Emergency procedures for spills, etc?  
Personnel understand procedures?

NOTES & REMARKS:

## AREAS INSPECTED AND FINDINGS

Licensee: \_\_\_\_\_ License No: \_\_\_\_\_ Amendment No: \_\_\_\_\_

INSPECTION ITEM	CRITERIA	FINDING
5. <u>Use of Materials</u>		<u>IV</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?		
Posting & labeling as required?	20.203	
NOTES & REMARKS:	<i>dose calibrator not checked on all plug-in modules. (Radex)</i>	
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 _____	<u>C</u>
As described in lic cond or application?		
Any changes made? Adequacy?		
NOTES & REMARKS:		
8. <u>Instruments</u>	Lic Cond _____	<u>C</u>
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>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:		

10. Personnel Protection - External

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 &amp; REMARKS:

*WBup extn.  
one tech 250/yr 3000 m.  
2 others much less*

11. Personnel Protection - Internal

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?	20.201
Records maintained?	20.401

Procedures for use of Xe-133 followed?

NOTES &amp; REMARKS:

h/a

## AREAS INSPECTED AND FINDINGS

Licensee: \_\_\_\_\_ License No: \_\_\_\_\_ Amendment No: \_\_\_\_\_

INSPECTION ITEM	CRITERIA	FINDING
12. <u>Effluent Controls, Waste Disposal</u>		<u>C</u>
Release of effluents controlled? (particularly Xe-133, radioiodine 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 held for decay, one shipment to contractor</i>
13. <u>Notifications and Reports</u>		<u>C</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>		<u>C</u>
Part 20, license & documents, procedures, notice of violations posted?	19.11(a)	
NRC-3 posted?	19.11(c)	
NOTES & REMARKS:		
15. <u>Other License Conditions</u>		

## AREAS INSPECTED AND FINDINGS

Licensee: \_\_\_\_\_ License No: \_\_\_\_\_ Amendment No: \_\_\_\_\_

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

NRC Instrument: Scintometer 14CCalibration Due Date: 3/8/8317. Independent Inspection Effort18. Incidents and EventsAny incidents of misadministrations,  
contamination, etc., not otherwise  
covered by reports?35.41 -35.45  
20.402, 20.403, 20.405none



INSPECTION REPORT NUMBER \_\_\_\_\_

Page \_\_\_\_\_ of \_\_\_\_\_

APPENDIX A - DOCUMENTATION OF NONCOMPLIANCE

Licensee: \_\_\_\_\_

License No: \_\_\_\_\_

Reference

Basis for noncompliance

Report item 5

10 CFR \_\_\_\_\_

Lic Cond 17

Type n/c IV

appl. 2/28/79, item 10

close calibrator not checked on  
all plug-in modules during daily  
constancy checks.

Report item 2

10 CFR \_\_\_\_\_

Lic Cond 17

Type n/c IV

appl. 2/28/79, item 7

radiation safety committee meets  
semi-annually, not quarterly

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 \_\_\_\_\_

(July 82)

INSPECTION REPORT NUMBER 79-01

Page \_\_\_\_\_ of \_\_\_\_\_

## APPENDIX B - LICENSEE ACTION ON PREVIOUS INSPECTION FINDINGS

Licensee: Veterans Administration Medical Center

License No: 15-07187-01

Identification and summary of action taken

no items of non-compliance

### Status

Report No: 79-01

Type n/c: \_\_\_\_\_

Describe: CLEAR

**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**

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

REGION I Form 198-C  
(July 82)

LICENSE NO: 08-15484-02

DOCKET NO. (s) 030-15113

PAGE \_\_\_\_\_ OF \_\_\_\_\_

ATTACHED

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

INSPECTION REPORT NO. 83-01

Dept. of Health & Human Services

National Institute of Mental Health

St. Elizabeth Hosp. Wash. D.C.

LICENSEE CONTACT: Charles Horton

Telephone No: 202-574-7343  
202-562-4000

LICENSE NO: 08-15484-02

CATEGORY G PRIORITY: 4

CATEGORY \_\_\_\_\_ PRIORITY: \_\_\_\_\_

CATEGORY \_\_\_\_\_ PRIORITY: \_\_\_\_\_

INSPECTION DATE (s): 3-9-83

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: 03-86

☐ CHANGE PRIORITY TO: \_\_\_\_\_

PERSONS CONTACTED

\* Kanhouwa, S. M.D. (Acting Director of Lab Branch)  
Morr, W.H.C. M.D. (Pathologist)  
Charles Horton (Chief Technologist)  
Constance Combs (Technologist)  
Louise Guzman (Technologist)  
\* Wm Deeks (Hosp. Superintendent)

INSPECTOR: Samuel Jones

APPROVED: Laurence F. Friedman

3/23/83

39

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 \_\_\_\_

78710B - Medical

AREAS INSPECTED AND FINDINGS

Licensee: \_\_\_\_\_ License No: \_\_\_\_\_ Amendment No: \_\_\_\_\_

INSPECTION ITEMS	CRITERIA	FINDING
1. <u>Organization</u>	Lic Cond <u>16</u>	<u>C</u>
Structure of organization as described in requirements? ✓	Wm. Dobbs (Hosp. Superintendent)	
Scope of Program? Patient load? ✓	Wm. Whitmore, MD (Director of M/S Program)	
NOTES & REMARKS: Dept. put in ~ 5 pps/wk.	Kenhouse, S.M.D. (Acting Director of Lab)	
	McCr. Willie, M.D. (Staff M.D. Pathologist)	
	Horton, Charles (Chief Technologist)	
	Estrella Gomez (Technologist)	
	Lourdes Guzman (RIA Technologist)	
2. <u>Licensee Internal Audits</u>	Lic Cond <u>16</u>	<u>C</u>
Scope and frequency of audits as required? ✓	Radiation Safety Committee meets	
Conducted by appropriate persons? ✓	quarterly. Program is reviewed by	
Records maintained? ✓	Dr. Kenhouse (Reviewed by their	
Reviewed by management? ✓	consultant (Health Physics Services, Inc.).	
Deficiencies identified and corrected? ✓		
NOTES & REMARKS:		
3. <u>Training and Qualification of Personnel</u>	Lic Cond <u>16</u>	<u>C</u>
Training & retraining conducted as required? ✓	Hospital has a lecture series	
Written & oral exams conducted?	on topic. The consultant also	
Examination results reviewed by management?	provides semi-annually training.	
Instructions to workers per 19.12? ✓	19.12 ✓	
Authorized users? On license? Available in emergency? ✓	Lic Cond <u>12</u>	
NOTES & REMARKS:	Dr. James D. Salonen is no longer at facility (retired 1/83).	
	The hospital is planning to extend license in the near future.	
	Inspector notified Dr. Kenhouse that license may be extended, since the	
	other users on license are not authorized for all groups.	
4. <u>Radiation Protection Procedures</u>	Lic Cond <u>16</u>	<u>C</u>
Procedures available and implemented? ✓	Hospital's procedure manual is reviewed	
Identify radiopharmaceutical and dose(s)?	annually and signed by the	
Cover handling of patients receiving therapeutic doses? Cover handling of cadavers?	medical + technical staff	
Close out Surveys on Patients receiving temporary implants? N/A	35.14 (b)(5)(v)	
Emergency procedures for spills, etc? ✓		
Personnel understand procedures? ✓		
NOTES & REMARKS:		



## AREAS INSPECTED AND FINDINGS

Licensee: \_\_\_\_\_ License No: \_\_\_\_\_ Amendment No: \_\_\_\_\_

INSPECTION ITEM	CRITERIA	FINDING
<u>5. Use of Materials</u>		
Procurement and use as required? Authorized form & route of administration?	35.14(b)	<u>C</u> ST. LIZ. is authorized for Group III generators, however, they have always used a radiopharmacy.
Special tests (moly breakthrough, leak tests, etc) required? →	35.14(b)(4)	
Inventory of brachytherapy sources? n/a	35.14(b)(5)	
Dose calibration checks performed? ✓		
Posting & labeling as required? ✓	20.203	
NOTES & REMARKS:		
<u>6. Storage of Materials</u>		
Material secured in both restricted and unrestricted areas? ✓ Adequately? ✓	20.207	<u>C</u>
NOTES & REMARKS:		
<u>7. Facilities</u>		
As described in lic cond or application? ✓	Lic Cond <u>16</u>	
Any changes made? ✓ Adequacy? ✓		
NOTES & REMARKS:		
* The license has expired their R.A. lab. The license intends to reflect the change by license amendment. Inspector advised licensee that the license should be amended to reflect the current operating status of laboratory.		
<u>8. Instruments</u>		
Survey meters & instruments adequate for program? ✓	Lic Cond <u>1*</u>	<u>C</u>
Instruments & meters operable? ✓ Calibrated? ✓		
Calibration adequate? ✓		
NOTES & REMARKS:		
Licensee has four g-m meter and one well meter.		

## 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>C</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:		
<u>N/A</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?	20.201	
Records maintained?	20.401	
Procedures for use of Xe-133 followed?		
NOTES & REMARKS:		

## AREAS INSPECTED AND FINDINGS

Licensee: \_\_\_\_\_ License No: \_\_\_\_\_ Amendment No: \_\_\_\_\_

INSPECTION ITEM	CRITERIA	FINDING
<u>12. Effluent Controls, Waste Disposal</u>		<u>C</u>
Release of effluents controlled? (particularly Xe-133, radioiodine 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:		
Radioactive waste is either held for decay in a storage cask in the basement of facility or sent back to Pharmatex.		
<u>13. Notifications and Reports</u>		<u>C</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:		
<u>14. Posting of Notices</u>		<u>C</u>
Part 20, license & documents, procedures, notice of violations posted? ✓	19.11(a)	
NRC-3 posted? ✓	19.11(c)	
NOTES & REMARKS:		
<u>15. Other License Conditions</u>		

## 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

## APPENDIX A - DOCUMENTATION OF NONCOMPLIANCE

Licensee: \_\_\_\_\_

License No: \_\_\_\_\_

### Reference

Basis for noncompliance

Report item \_\_\_\_\_

10 CFR \_\_\_\_\_

L1c Cond \_\_\_\_\_

Type n/c\_\_\_\_\_

 $\text{NON E}^-$ 

Report item \_\_\_\_\_

10 CFR \_\_\_\_\_

L1c Cond

Type n/c \_\_\_\_\_

Report item \_\_\_\_\_

10 CFR

L1c Cond \_\_\_\_\_

Type n/c\_\_\_\_\_

Report item \_\_\_\_\_

10 CFR \_\_\_\_\_

Lfc 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 \_\_\_\_\_

APPENDIX B - LICENSEE ACTION ON PREVIOUS INSPECTION FINDINGS

Licensee: \_\_\_\_\_

License No: \_\_\_\_\_

Identification and summary of action taken	Status
--	--------

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

*none*

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

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

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

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

Report No: _____	Type n/c: _____	Describe: _____	OPEN
Action taken:			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

MAR 24 1983

Docket No. 30-01326

License No. 08-04289-06

Government of the District of Columbia  
District of Columbia General Hospital  
ATTN: Mr. Robert Johnson  
Executive Director  
19th and Massachusetts Avenue, Southeast  
Washington, D. C. 20003

Gentlemen:

Subject: Inspection 30-01326/83-01


This refers to your letter dated February 10, 1983, in response to our letter dated January 25, 1983.

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.

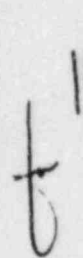
Sincerely,

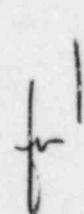
Original Signed By:  
John D. Kinneman

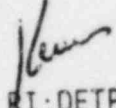
 Thomas T. Martin, Director  
Division of Engineering and Technical  
Programs

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

bcc:  
Region I Docket Room (with concurrences)

 RI:DETP  
Jones/wb  
3/7/83

 RI:DETP  
Nicolosi  
3/23/82

 RI:DETP  
Kinneman  
3/23/83

~~8304010185~~

IP.

40

1E:07



Government of the District of Columbia  
District of Columbia General Hospital  
19th Street and Massachusetts Avenue, S.E.  
Washington, D.C. 20003  
Telephone (202) 675-5000

February 10, 1983

Office of the Executive Director

Mr. Thomas T. Martin  
Director  
Division of Engineering  
and Technical Programs  
U.S. Nuclear Regulatory Commission  
631 Park Avenue  
King of Prussia, Pennsylvania 19406

RE: Docket No. 30-01326  
License No. 08-04289-06  
Your Letter Dated 1/25/83  
Appendix A, Notice of  
Violation

Dear Mr. Martin:

In accordance with the Radiation Protection Manual of the D.C. General Hospital, Parts 9.10 and 9.13, personnel working with radioactive materials shall wear protective gloves and will monitor the hands and clothing after each procedure or before leaving the area. These regulations are routinely observed. Written record of these monitoring events are in the "Technician Survey Book". The records show that such monitoring has been done two to four times each day for each technologist who is handling radioactive materials. A Model 491 Victoreen portable survey instrument having a Model 489-35 probe is used.

On January 4, 1983, at the time of the NRC inspection, a minor emergency occurred during the injection of a radioactive material into a patient. This was in the form of unusual bleeding at the site of the injection. This was complicated by the fact that the technologist felt that she could not conveniently wear a protective glove due to the presence of a brace on her left arm. While attempting to stop the bleeding, the technologist's hand became contaminated with radioactive material. Subsequently, she failed to follow the established rule on monitoring the hands.

All personnel have been cautioned that protective gloves must be worn while handling radioactive materials. There are to be no exceptions to this rule. Furthermore, they have been instructed that hand and clothing monitoring is required after every administration, or at least before leaving the laboratory.

8304010194  
14,

Docket Nos. 30-01326  
30-12537

JAN 25 1983

License Nos. 08-04289-06 ✓  
08-04289-08

Government of the District of Columbia  
District of Columbia General Hospital  
ATTN: Mr. Robert Johnson  
Executive Director  
19th and Massachusetts Avenue, Southeast  
Washington, D.C. 20003

Gentlemen:

Subject: Combined Inspections 30-01326/83-01; 30-12537/83-01

This refers to the routine safety inspection conducted by Messrs. Nicolosi and Jones of this office on January 4, 1983 of activities authorized by NRC License Nos. 08-04289-06 and 08-04289-08 and to the discussions of our findings held by Mr. Nicolosi with Mr. S. P. McCoy at the conclusion of the inspection and to a subsequent telephone discussion between Dr. Sabol and Mr. Nicolosi on January 10, 1983.

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 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.

With respect to NRC License No. 08-04289-06, our inspector also verified the steps you have taken to correct the violations brought to your attention in the enclosure to our letter dated September 17, 1980. We have no further questions regarding your action at this time.

Based on the results of this inspection, it appears that one of your activities was not conducted in full compliance with NRC requirements, as set forth in the Notice of Violation, enclosed herewith as Appendix A. This violation has 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.

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.

83021002972pp

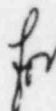
1E:07

JAN 25 1983

Your cooperation with us in this matter is appreciated.

Sincerely,

Original Signed By:  
John D. Kinneman

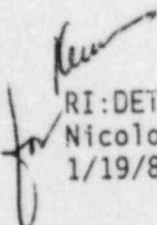


Thomas T. Martin, Director  
Division of Engineering and  
Technical Programs


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 (w/concurrences)  
✓ Senior Operations Officer (w/o encl)



RI:DETP  
Nicolosi:as  
1/19/83



RI:DETP  
Kinneman  
1/21/83



JAN 25 1983

APPENDIX A  
NOTICE OF VIOLATION

Government of the District of Columbia  
District of Columbia General Hospital  
Washington, D. C. 20003

Docket No. 30-01326  
License No. 08-04289-06

As a result of the inspection conducted on January 4, 1983, and in accordance with the NRC Enforcement Policy (10 CFR 2, Appendix C), the following violation was identified:

Condition 15 of License No. 08-04289-06 requires that licensed material be possessed and used in accordance with statements, representations and procedures contained in an application dated April 27, 1978.

Item 9.13 of the Radiation Safety Manual contained in this application requires that personnel monitor (survey) their hands for contamination after handling isotopes.

Contrary to the above, on January 4, 1983, personnel failed to adequately monitor their hands after handling isotopes. This item was identified by our inspector through independent measurements which indicated that an individual had detectable contamination on their hands of which they were unaware.

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

Pursuant to the provisions of 10 CFR 2.201, the District of Columbia General Hospital is hereby required to submit to this office within thirty days of the date of the letter which transmitted 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.

~~8302100299~~  
10pp.



REGION 1 Form 198-C  
(July 82)

Hospital May Be Closing in June, 1983  
LICENSE NO: 08-04289-06

DOCKET NO. (s) 30-01326

PAGE \_\_\_\_\_ OF \_\_\_\_\_

ATTACHED

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

INSPECTION REPORT NO. 82-01

District of Columbia Gen Hosp  
19th & M St. NW  
Washington DC

LICENSEE CONTACT: John J. Sabol MD

Telephone No: 202-675-5000

LICENSE NO: \_\_\_\_\_

CATEGORY 6

PRIORITY: IV

CATEGORY \_\_\_\_\_

PRIORITY: \_\_\_\_\_

CATEGORY \_\_\_\_\_

PRIORITY: \_\_\_\_\_

INSPECTION DATE (s): Jan 4, 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: Jan, 85

PERSONS CONTACTED

John J. Sabol MD  
Beverly Harwood NMT  
Vesta Frazer NMT  
Robt P. Santangelo MD  
Romey Keyes BSRT  
J. McCoy - Asst Admin

INSPECTOR: [Signature]

APPROVED: [Signature]

1/11/83

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

(July 82)

Page \_\_\_\_ of \_\_\_\_

INSPECTION REPORT NUMBER \_\_\_\_\_

78710B - Medical

AREAS INSPECTED AND FINDINGS

Amendment No: \_\_\_\_\_

License No: \_\_\_\_\_

Licensee: \_\_\_\_\_

INSPECTION ITEMS	CRITERIA	FINDING
1. <u>Organization</u>	Lic Cond <u>15</u>	<u>C</u>
Structure of organization as described in requirements?	<u>OK</u> <u>A</u> Sabol reports directly to Executive Director	
Scope of Program? Patient load?	20 patients / wk	
NOTES & REMARKS:	Diagnostic Therapeutic - 12 cases / yr. I-131 5 cases / yr. Co-60 brachytherapy	
2. <u>Licensee Internal Audits</u>	Lic Cond <u>15</u>	<u>C</u>
Scope and frequency of audits as required?	Hospital has consultant physician (Rehman)	
Conducted by appropriate persons?	Conducts periodic checks, trainings etc	
Records maintained?	No formal requirement for audit	
Reviewed by management?	Consultant does submit written reports of his visits.	
Deficiencies identified and corrected?		
NOTES & REMARKS:		
3. <u>Training and Qualification of Personnel</u>	Lic Cond <u>15</u>	<u>C</u>
Training & retraining conducted as required?	Reviewed Dec 8, 1982 training records by consultant.	
Written & oral exams conducted?	Reviewed RSC committee review of	
Examination results reviewed by management?	<u>A</u> Abbas Motazed's credentials to practice	
Instructions to workers per 19.12?	19.12 <u>A</u> Nuclear Medicine	
Authorized users? On license? Available in emergency?	Lic Cond _____ Preceptor statement not signed by local Board certification in nuclear medicine	
NOTES & REMARKS:		
4. <u>Radiation Protection Procedures</u>	Lic Cond <u>15</u>	<u>n/c</u>
Procedures available and implemented?	inadequate hand monitoring techniques - tech & lift plastic	
Identify radiopharmaceutical and dose(s)?	over cap over end window which	
Cover handling of patients receiving therapeutic doses? Cover handling of cadavers?	failed to detect hand contamination of 2.05 mR/hr	
Close out Surveys on Patients receiving temporary implants?	35.14 (b)(5)(v) OK → Record Review of 5 cases	
Emergency procedures for spills, etc? Personnel understand procedures?	<u>OK</u>	
NOTES & REMARKS:		

## AREAS INSPECTED AND FINDINGS

Licensee: \_\_\_\_\_ License No: \_\_\_\_\_ Amendment No: \_\_\_\_\_

INSPECTION ITEM	CRITERIA	FINDING
<b>5. Use of Materials</b> Procurement and use as required? <u>OK</u> & route of administration? <u>OK</u> Special tests (moly breakthrough, leak tests, etc) <u>OK</u> Inventory of brachytherapy sources? <u>OK</u> Dose calibration checks performed? <u>OK</u> Posting & labeling as required? <u>OK</u> NOTES & REMARKS:	35.14(b) 35.14(b)(4) 35.14(b)(5)	<u>7/17/82</u> <del>7/17/82</del> <u>7/17/82</u> 99mTc bleeding study - inject cold PVP withdraw blood sample - <u>OK</u> with 99mTc (pvt) re-injected <u>logged</u> <u>done</u> (Computer and Medica dose calibrator Medica <u>OK</u> but computer has exhibited some irregularities during constancy checks over a period of 6 months +9% - Cs-137 +10% Bi-133 +24% Co-57 All radiopharmaceuticals are obtained prepared from Pharmacia
<b>6. Storage of Materials</b> Material secured in both restricted and unrestricted areas? Adequately <u>OK</u> NOTES & REMARKS:	20.207	
<b>7. Facilities</b> As described in lic cond or application? <u>OK</u> Any changes made? Adequately <u>OK</u> NOTES & REMARKS:	Lic Cond <u>15</u>	<u>C</u>
<b>8. Instruments</b> Survey meters & instruments adequate for program? Instruments & meters operable? <u>Calibrated</u> Calibration adequate? <u>OK</u> NOTES & REMARKS:	Lic Cond <u>15</u>	<u>C</u> <u>Calibrated by consultant</u>

## AREAS INSPECTED AND FINDINGS

Licensee: \_\_\_\_\_

License No: \_\_\_\_\_

Amendment No. \_\_\_\_\_

INSPECTION ITEMS	CRITERIA	FINDING
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9. Receipt and Transfer of MaterialWritten procedures for pickup, receiving, opening packages? *OK*

20.205

Survey of packages when received? *OK*

20.205(c)(1)

Records of survey of packages? *OK*

20.401(b)

Transfer of materials proper? Transfer records maintained? *OK*

30.41, 30.51

Authorized containers used? Shipping papers & package labels proper for packages on hand? *OK*

71.5

*Return of rad waste (syringes and needles) to Pharmacology*

NOTES &amp; REMARKS:

10. Personnel Protection - ExternalPersonnel monitoring controls adequate? *yes*

20.101, 20.202

Exposures minimized?

Exposure records (NRC-4 or 5) maintained? *yes*

20.102(b), 20.401(a)

Available for employee review?

Surveys conducted? Adequate? *yes*

20.201

Records of monitoring, surveys? *yes*

20.401

Levels in unrestricted areas within limits? (Particularly around nuclear med. hot lab rooms of brachytherapy patients) *OK*

20.1, 20.105

NOTES &amp; REMARKS:

*licensee uses lead shield not and also portable shield*11. Personnel Protection - Internal

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  
20.401Procedures for use of Xe-133 followed? *yes**use of Ru/Kr generator*

NOTES &amp; REMARKS:



## AREAS INSPECTED AND FINDINGS

Licensee: \_\_\_\_\_ License No: \_\_\_\_\_ Amendment No: \_\_\_\_\_

INSPECTION ITEM	CRITERIA	FINDING
12. <u>Effluent Controls, Waste Disposal</u>		<u>C</u>
Release of effluents controlled? (particularly Xe-133, radioiodine where used)	OK 20.106, 20.33	
Waste disposals controlled?	OK 20.301, 20.303, 20.304, 20.305	
Procedures, records maintained?	OK 20.401, Lic Cond _____	
Surveys made? Adequate?	OK 20.401	
NOTES & REMARKS:	but fresh held for storage and decay	

13. Notifications and Reports

To individuals?	yes 19.13	
Overexposures, excessive levels & concentrations, incidents?	OK 20.403, 20.405	None in nuclear medicine
Personnel exposures and monitoring, termination reports?	OK 20.407, 20.408	
Theft or loss of licensed material?	none 20.402	
Misadministrations?	none 35.41-35.45	
NOTES & REMARKS:		

14. Posting of Notices

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

15. Other License Conditions

9-14

OK



## AREAS INSPECTED AND FINDINGS

Licensee: \_\_\_\_\_ License No: \_\_\_\_\_ Amendment No: \_\_\_\_\_

INSPECTION ITEMS	CRITERIA	FINDING
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16. Confirmatory MeasurementsG/M survey OKCNRC Instrument: Hudson 14CCalibration Due Date: 3/8317. Independent Inspection Effort

Verified inventory of Cs-137 brachytherapy sources  
 120 mg C  $\begin{matrix} 1 \times 40 \\ 1 \times 30 \\ 1 \times 20 \\ 3 \times 10 \end{matrix}$

Hand contamination check - <sup>see self</sup> <sup>w/ed</sup> trash can check OK

18. Incidents and Events

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

35.41 - 35.45  
 20.402, 20.403, 20.405

Radiation therapy has some "unknown <sup>sealed</sup> sources" (Co-60 needles) for which no paperwork exists as to the identity and activity. Licensee has had these for the last nine years. Consultant has w/p tested these and has identified no leaking sources. Would qualify for possession under no authorization.

INSPECTION REPORT NUMBER \_\_\_\_\_

Page \_\_\_\_\_ of \_\_\_\_\_

APPENDIX A - DOCUMENTATION OF NONCOMPLIANCE

Licensee: \_\_\_\_\_

License No: \_\_\_\_\_

Reference	Basis for noncompliance
Report item <u>4</u>	<i>Inadequate bond contamination check Method used failed to identify contamination on hand of x-ray med tech on dog inspection</i>
10 CFR _____	
Lic Cond <u>15</u>	
Type n/c <u>SLIV</u>	
Report item <u>5</u>	<i><del>Unauthorized use of material</del> <del>Cold PYP (pyrophosphate) injected; blood withdrawn</del> <del>for Tc-99m (put) added - then re-injected</del></i>
10 CFR _____	
Lic Cond <u>6, 7, 8</u>	
Type n/c <u>SLW</u>	
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 _____	

INSPECTION REPORT NUMBER \_\_\_\_\_

APPENDIX B - LICENSEE ACTION ON PREVIOUS INSPECTION FINDINGS

License No: \_\_\_\_\_

Licensee: \_\_\_\_\_

Identification and summary of action taken		Status
Report No: <u>80-01</u>	Type n/c: <u>Inf</u>	Describe: <u>70 20 207 up to 103</u>
Action taken: <u>Trash cans emptied daily for hot waste Record review Independent measurements</u>		<u>CLOSED</u>
Report No: <u>80-01</u>	Type n/c: <u>Inf</u>	Describe: <u>Failing to use syringe shields</u>
Action taken: <u>Conversations w. the observation of new med techs indicate syringe shields are now used</u>		<u>CLOSED</u>
Report No: <u>80-01</u>	Type n/c: <u>Inf</u>	Describe: <u>Failing to survey pump area daily</u>
Action taken: <u>Conversations w. the review of records indicate daily surveys are being done</u>		<u>CLOSED</u>
Report No: <u>80-01</u>	Type n/c: <u>Inf</u>	Describe: <u>100% of 204016</u>
Action taken: <u>Records of surveys of waste material prior to disposal now maintained</u>		<u>CLOSED</u>
Report No: _____	Type n/c: _____	Describe: _____
Action taken: _____		<u>CLOSED</u>
Report No: _____	Type n/c: _____	Describe: _____
Action taken: _____		<u>CLOSED</u>

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

Program is decreasing due to delit structure of hospital - board of directors has voted to close hospital in June, 1983. This appears to have influenced the morale of the work staff.

Amelint - Richard Gunkle

301-622-1235

peaked some wipe test analysis by consultant done on Accelerator Dnc Model 800 (from Nuc Assoc)  
Series 585  $\bar{c}$  & 1.5 mg/cm<sup>2</sup> end window gun  
MDA - .0001 - .0006 uCi C<sup>14</sup> - Co<sup>60</sup> - Am<sup>241</sup>

I have not heard of this instrument previously  
last test procedure located by May 1982 MD 31-046-01  
New Co-60 Beta Source - End window

MAR 3 1 1983

License Nos. 08-03604-03  
08-03604-04

Docket No. 30-01325  
30-09588✓

Washington Hospital Medical Center  
ATTN: John P. McDaniel  
President  
110 Irving Street, NW  
Washington, D.C. 20010

Gentlemen:

Subject: Combined Inspection 30-01325/83-01 and 30-09588/83-01

This refers to your letter dated February 28, 1983, in response to our letter dated February 7, 1983.

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

*for* 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)

*for* RI:DETP  
Davis:as  
3/23/83

*Kinneman*  
RI:DETP  
Kinneman

3/24/83

8304110846  
IP.

41  
18:07





110 Irving Street, NW Washington, DC 20010

Docket No. 30-01325  
30-09588

License Nos. 08-03604-03  
08-03604-04

February 28, 1983

U.S. Nuclear Regulatory Commission  
Region I  
631 Park Ave  
King of Prussia PA 19406  
Attn: Mr. Thomas T. Martin, Director DETP

Gentlemen:

This is in reply to your letter of February 7, 1983 pursuant to the item of non-compliance with NRC requirements at the time of inspection on January 6, 1983.

I. The following comments are with reference to the specific item of non-compliance:

1. The RSO has determined the identity of the individual who was assigned the specific TLD finger badge in question. A letter will be sent to R. S. Landauer Co. assigning the 2.26 rem to this individual's dose report record.
2. All monthly monitoring reports will be examined by both the RSO and his assistant to determine if any missing or unidentified reports exist. In the event of a missing individual report, the RSO will assign an estimated exposure based on the individual's previous monitoring history. If during the following month(s) the individual's report is received, the estimated exposure will be replaced by the actual reported exposure.
3. Full compliance will be achieved by March 15, 1983.

II. The Radiation Safety Committee consists of individuals from different departments using licensed materials and sometimes the full membership is not available to attend a meeting. Normally, under these circumstances, the members present will tentatively approve a project pending the concurrence of the other members who are sent the information by mail. However, there have been times when only half of the membership

830410856  
APP.



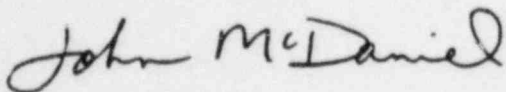
Page 2

(a quorum) have approved new uses of licensed material.

To ensure full committee participation in the future we will try to schedule meetings so that most members can be present and then require that alternates be designated for those who cannot attend. This should eliminate the need for individual mailings and extensive followup to obtain full membership participation.

We found the NRC inspection of January 6, 1983 to be an informative contribution to our radiation safety program. It is hoped that this constitutes a satisfactory reply to your recent letter.

Sincerely yours,

A handwritten signature in cursive script that reads "John P. McDaniel". The signature is written in dark ink and is positioned above the typed name and title.

John P. McDaniel  
President

cc: Chairman, RSC  
RSO  
Harold Hawfield, M.D.  
NRC Document Management Branch

FEB 7 1983

Docket No. 30-01325  
30-09588

License Nos. 08-03604-03  
08-03604-04 ✓

Washington Hospital Center  
ATTN: John P. McDaniel  
President  
110 Irving Street, NW  
Washington, DC 20010

Gentlemen:

Inspection No. 83-01

Subject: Inspection No. 83-01

This refers to the routine safety inspection conducted by Messrs. Nicolosi and Jones of this office on January 6, 1983 of activities authorized by NRC License No. 08-03604-03 and 08-03604-04 and to the discussions of our findings held by Mr. Nicolosi with Mr. Ecker and other members of your staff at the conclusion of the inspection.

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 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 violations brought to your attention in the enclosure to our letter dated November 14, 1980. We have no further questions regarding your action at this time.

Based on the results of this inspection, it appears that one of your activities was not conducted in full compliance with NRC requirements, as set forth in the Notice of Violation, enclosed herewith as Appendix A. This violation has 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.

At the conclusion of the inspection, Mr. Nicolosi expressed our concern that your Radiation Safety Committee was not operating as intended under the broad scope authorization of your license. Specifically, there is not full membership participation in the approval of new uses and procedures for licensed materials. Please address this issue in your written reply to this letter.

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.

83030700SP  
JPP

IE:07

Washington Hospital Center

-2-

FEB 7 1983

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

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)  
Senior Operations Officer (w/o encls)

*[Signature]*  
RI:DETP  
Nicolosi/jpf  
1/14/83

*[Signature]*  
RI:DETP  
Kinneman  
2/3/83

~~RI:DETP  
Martin~~

FEB 7 1983

APPENDIX A

NOTICE OF VIOLATION

Washington Hospital Center  
Washington, D.C. 20010

Docket No. 30-01325  
License No. 08-03604-03

As a result of the inspection conducted on January 6, 1983 and in accordance with the NRC Enforcement Policy (10 CFR 2, Appendix C), the following violation was identified:

10 CFR 20.201(b) requires that each licensee make such surveys as may be necessary to comply with all sections of Part 20. As defined in 10 CFR 20.201(a), "survey" means an evaluation of the radiation hazards incident to the production, use, release, disposal, or presence of radioactive materials or other sources of radiation under a specific set of conditions.

Contrary to the above, as of January 6, 1983, surveys were not made to assure compliance with 10 CFR 20.101(a), a regulation which limits radiation dose to the extremities of individuals in restricted areas. Specially, a TLD finger badge dose report of 2.260 rem dated March 26, 1982 was not assigned to an individual because the wearer identification on the badge was obscured.

This is a Severity Level IV violation (Supplement IV)

Pursuant to the provisions of 10 CFR 2.201, Washington Hospital Center is hereby required to submit to this office within thirty days of the date of the letter which transmitted 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.

8303070059  
10pp

REGION I Form 198-E  
(July 82)LICENSE NO: 08-03604-04DOCKET NO. (s) 30-09588

PAGE \_\_\_\_\_ OF \_\_\_\_\_

## ATTACHED

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

INSPECTION REPORT NO. 83-01

Washington Hope Center  
110 Irving St NW  
Washington DC 20010

LICENSEE CONTACT: Ken Williams LSOTelephone No: 202-541-6481

LICENSE NO: \_\_\_\_\_

CATEGORY G3 PRIORITY: IV

CATEGORY \_\_\_\_\_ PRIORITY: \_\_\_\_\_

CATEGORY \_\_\_\_\_ PRIORITY: \_\_\_\_\_

INSPECTION DATE (s): 11/6/83

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

## SUMMARY OF FINDINGS AND ACTION

- ☒ NO NONCOMPLIANCE, ROL 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: 1-85

☐ CHANGE PRIORITY TO: \_\_\_\_\_

## PERSONS CONTACTED

Ken Williams LSO  
Ed Hard HP assist.  
Bob Reynolds Rad Safety Tech  
Radiation Therapy technician

INSPECTOR: James F. NaylorAPPROVED: [Signature]1/12/85

INSPECTION PLAN AND REPORT NUMBER \_\_\_\_\_

Page \_\_\_\_\_ of \_\_\_\_\_

Plan Approved: \_\_\_\_\_

Date: \_\_\_\_\_

License No. \_\_\_\_\_

Licensee: \_\_\_\_\_

Inspection Items	Scheduled for Inspection	Post Inspection Status	Module No.
Management Meeting - Entrance and Exit Interviews (Required)	/		30703B
Program Requirements, MC 2860 (Required)	/		78720B
Followup on Noncompliance and Deviations			92702B
Independent Inspection Effort (Required)	/		92706B
Transportation			86740B



INSPECTION REPORT \_\_\_\_\_

Page \_\_\_\_\_ of \_\_\_\_\_

787208 - Medical - Teletherapy

AREAS INSPECTED AND FINDINGS

Amendment No: \_\_\_\_\_

License No: \_\_\_\_\_

Licensee: \_\_\_\_\_

INSPECTION ITEM	CRITERIA	FINDING
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1. Organization

Management organization? OK

Radiation protection organization? OK

Patient load?

NOTES & REMARKS:

*20 patients daily*

Lic Cond \_\_\_\_\_

C

2. Training and Instructions to Employees

Training program, scope and frequency, retraining?

Required tests administered, scores satisfactory?

Instructions to workers?

NOTES & REMARKS:

Lic Cond \_\_\_\_\_

19.12

*by physicist on quarterly basis*

C

3. Radiation Protection Procedures

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

5-year maintenance? OK

Emergency Procedures posted? OK

Radiation room monitor mounted, operable? OK

Tested? Survey meter used when inoperable? yes

NOTES & REMARKS:

Lic Cond \_\_\_\_\_

Lic Cond 20

Lic Cond 16

Order

yes

*none noted or reported*

C

## AREAS INSPECTED AND FINDINGS

Licensee: \_\_\_\_\_ License No: \_\_\_\_\_ Amendment No: \_\_\_\_\_

INSPECTION ITEM	CRITERIA	FINDING
4. <u>Materials, Facilities and Instruments</u>		<u>C</u>
Teletherapy unit location, interlock system operational, required tests (every 6 months, records)	Lic Cond 10, 17, 19 <i>done by physicist</i>	
Access controls, posting of areas & rooms?	20.203	
Survey instruments & dosimeters operable, properly calibrated?	<i>yes</i> Lic Cond _____	
Patient viewing system?	<i>yes</i> Lic Cond 13	
NOTES & REMARKS:		

5. Personnel Protection - External

Personnel monitoring control; minimize exposures, control of accumulated dose? *OK* 20.101, 20.102, 20.202

Surveys conducted following last source change? Sent to NRC? Adequate? *OK* 20.201 Lic Cond 18

Levels in unrestricted areas? *OK* 20.1, 20.104

Stops installed? *yes* Lic Cond 15

NOTES & REMARKS:

6. Leak Tests of Sources

Lic Cond 14

Performed by authorized persons & methods: *by physicist*

Performed at 6-month (or other) interval?

Records maintained; reports submitted of leaking sources; corrective action taken? *OK*

NOTES & REMARKS:

## AREAS INSPECTED AND FINDINGS

Licensee: \_\_\_\_\_ License No: \_\_\_\_\_ Amendment No: \_\_\_\_\_

INSPECTION ITEM	CRITERIA	FINDING
7. <u>Notifications and Reports</u>		<input checked="" type="checkbox"/>
To individuals?	19.13	
Overexposures, excessive levels, 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:		

8. <u>Annual Calibration</u>		
At required intervals?	35.21 (a)	
Include all required tests?	35.21 (b)	
Properly calibrated dosimetry system?	35.23 (a)	
Performed by a qualified expert?	35.21 (e), 35.24	
Decay corrections for interval not exceeding 1 month?	35.21 (d)	
Records available?	35.25	
NOTES & REMARKS:		

9. <u>Spot Check Measurements</u>		
At required intervals?	35.22 (a)	
Include all required tests?	35.22 (b)	
Performed by qualified expert or reviewed by qualified expert within 15 days?	35.22 (c), 35.24	
Properly calibrated dosimetry system?	35.23 (b)	cal. by NBS
Records available?	35.25	
NOTES & REMARKS:		

10. <u>Posting of Notices</u>		
Part 20, license & documents, procedures, notice of violations?	19.11 (a)	
NRC-37	19.11 (c)	
NOTES & REMARKS:		

INSPECTION REPORT NUMBER \_\_\_\_\_

Page \_\_\_\_ of \_\_\_\_

787208 - Medical - Teletherapy

AREAS INSPECTED AND FINDINGS

Licensee: \_\_\_\_\_ License No: \_\_\_\_\_ Amendment No: \_\_\_\_\_

INSPECTION ITEM	CRITERIA	FINDING
11. <u>Other License Conditions</u>		<u>C</u>

NOTES & REMARKS:

12. Confirmatory Measurements

Output check?

Confirmation of condition 18 survey?

None performed on this inspection

NOTES & REMARKS:

Licensee plans to install higher activity source and add more shielding to present facility - Next inspector should evaluate this.

NRC Instruments

Calibration Due Date: \_\_\_\_\_

13. Independent Inspection Effort

head survey OK

NOTES & REMARKS:

INSPECTION REPORT NUMBER \_\_\_\_\_

APPENDIX A - DOCUMENTATION OF NONCOMPLIANCE

Licensee: \_\_\_\_\_ License No: \_\_\_\_\_

Reference \_\_\_\_\_ Basis for noncompliance \_\_\_\_\_

Report item \_\_\_\_\_

10 CFR \_\_\_\_\_

Lic Cond \_\_\_\_\_

Type n/c \_\_\_\_\_

*Clear*

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 \_\_\_\_\_

INSPECTION REPORT NUMBER \_\_\_\_\_

APPENDIX B - LICENSEE ACTION ON PREVIOUS INSPECTION FINDINGS

License No: \_\_\_\_\_

Licensee: \_\_\_\_\_

Identification and summary of action taken

Status

Report No: \_\_\_\_\_

Type n/c: \_\_\_\_\_

Describe: \_\_\_\_\_

OPEN

Action taken: \_\_\_\_\_

CLOSED

*None on 75 d*

Report No: \_\_\_\_\_

Type n/c: \_\_\_\_\_

Describe: \_\_\_\_\_

OPEN

Action taken: \_\_\_\_\_

CLOSED

Report No: \_\_\_\_\_

Type n/c: \_\_\_\_\_

Describe: \_\_\_\_\_

OPEN

Action taken: \_\_\_\_\_

CLOSED

Report No: \_\_\_\_\_

Type n/c: \_\_\_\_\_

Describe: \_\_\_\_\_

OPEN

Action taken: \_\_\_\_\_

CLOSED

Report No: \_\_\_\_\_

Type n/c: \_\_\_\_\_

Describe: \_\_\_\_\_

OPEN

Action taken: \_\_\_\_\_

CLOSED

Report No: \_\_\_\_\_

Type n/c: \_\_\_\_\_

Describe: \_\_\_\_\_

OPEN

Action taken: \_\_\_\_\_

CLOSED



(July 82)  
INSPECTION REPORT NUMBER \_\_\_\_\_

## APPENDIX C - SUPPLEMENTARY INFORMATION

Licensee: \_\_\_\_\_

License No: \_\_\_\_\_

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

☐ ( ) Unresolved items☒ (x) Inspector's comments

Dosimetry calculations are done by dosimetrist  
and checked by physicist - but not (usually) until  
the ~~course~~ course of tx is completed.

MAR 3 1 1983

License Nos. 08-03604-03 ✓  
08-03604-04

Docket No. 30-01325 ✓  
30-09588

Washington Hospital Medical Center  
ATTN: John P. McDaniel  
President  
110 Irving Street, NW  
Washington, D.C. 20010

Gentlemen:

Subject: Combined Inspection 30-01325/83-01 and 30-09588/83-01

This refers to your letter dated February 28, 1983, in response to our letter dated February 7, 1983.

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

*for* 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)

*for* RI:DETP  
Davis:as  
3/23/83

*Kinneman*  
RI:DETP  
Kinneman  
3/24/83

~~8304110846~~  
1P

41  
1E:07



110 Irving Street, NW Washington, DC 20010

Docket No. 30-01325  
30-09588

License Nos. 08-03604-03  
08-03604-04

February 28, 1983

U.S. Nuclear Regulatory Commission  
Region I  
631 Park Ave  
King of Prussia PA 19406  
Attn: Mr. Thomas T. Martin, Director DETP

Gentlemen:

This is in reply to your letter of February 7, 1983 pursuant to the item of non-compliance with NRC requirements at the time of inspection on January 6, 1983.

I. The following comments are with reference to the specific item of non-compliance:

1. The RSO has determined the identity of the individual who was assigned the specific TLD finger badge in question. A letter will be sent to R. S. Landauer Co. assigning the 2.26 rem to this individual's dose report record.
2. All monthly monitoring reports will be examined by both the RSO and his assistant to determine if any missing or unidentified reports exist. In the event of a missing individual report, the RSO will assign an estimated exposure based on the individual's previous monitoring history. If during the following month(s) the individual's report is received, the estimated exposure will be replaced by the actual reported exposure.

3. Full compliance will be achieved by March 15, 1983.

II. The Radiation Safety Committee consists of individuals from different departments using licensed materials and sometimes the full membership is not available to attend a meeting. Normally, under these circumstances, the members present will tentatively approve a project pending the concurrence of the other members who are sent the information by mail. However, there have been times when only half of the membership

8304110856

2pp

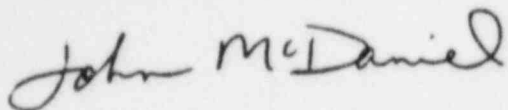
Page 2

(a quorum) have approved new uses of licensed material.

To ensure full committee participation in the future we will try to schedule meetings so that most members can be present and then require that alternates be designated for those who cannot attend. This should eliminate the need for individual mailings and extensive followup to obtain full membership participation.

We found the NRC inspection of January 6, 1983 to be an informative contribution to our radiation safety program. It is hoped that this constitutes a satisfactory reply to your recent letter.

Sincerely yours,

A handwritten signature in cursive script that reads "John P. McDaniel".

John P. McDaniel  
President

cc: Chairman, RSC  
RSO  
Harold Hawfield, M.D.  
NRC Document Management Branch

FEB 7 1983

Docket No. 30-01325  
30-09588

License Nos. 08-03604-03  
08-03604-04

Washington Hospital Center  
ATTN: John P. McDaniel  
President  
110 Irving Street, NW  
Washington, DC 20010

Gentlemen:

Inspection No. 83-01

Subject: Inspection No. 83-01

This refers to the routine safety inspection conducted by Messrs. Nicolosi and Jones of this office on January 6, 1983 of activities authorized by NRC License No. 08-03604-03 and 08-03604-04 and to the discussions of our findings held by Mr. Nicolosi with Mr. Ecker and other members of your staff at the conclusion of the inspection.

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 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 violations brought to your attention in the enclosure to our letter dated November 14, 1980. We have no further questions regarding your action at this time.

Based on the results of this inspection, it appears that one of your activities was not conducted in full compliance with NRC requirements, as set forth in the Notice of Violation, enclosed herewith as Appendix A. This violation has 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.

At the conclusion of the inspection, Mr. Nicolosi expressed our concern that your Radiation Safety Committee was not operating as intended under the broad scope authorization of your license. Specifically, there is not full membership participation in the approval of new uses and procedures for licensed materials. Please address this issue in your written reply to this letter.

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.

8303070050  
2pp.  
16.87

Washington Hospital Center

-2-

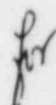
FEB 7 1983

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

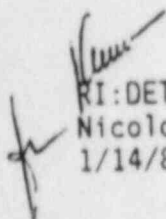


Thomas T. Martin, Director  
Division of Engineering and  
Technical Programs

Enclosure: Appendix A, Notice of Violation

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

bcc:  
Region I Docket Room (with concurrences)  
Senior Operations Officer (w/o encls)



RI:DETP  
Nicolosi/jpf  
1/14/83



RI:DETP  
Kinneman  
2/3/83



~~RI:DETP  
Martin~~



FEB 7 1983

APPENDIX A

NOTICE OF VIOLATION

Washington Hospital Center  
Washington, D.C. 20010

Docket No. 30-01325  
License No. 08-03604-03

As a result of the inspection conducted on January 6 1983, and in accordance with the NRC Enforcement Policy (10 CFR 2, Appendix C), the following violation was identified:

10 CFR 20.201(b) requires that each licensee make such surveys as may be necessary to comply with all sections of Part 20. As defined in 10 CFR 20.201(a), "survey" means an evaluation of the radiation hazards incident to the production, use, release, disposal, or presence of radioactive materials or other sources of radiation under a specific set of conditions.

Contrary to the above, as of January 6, 1983, surveys were not made to assure compliance with 10 CFR 20.101(a), a regulation which limits radiation dose to the extremities of individuals in restricted areas. Specially, a TLD finger badge dose report of 2.260 rem dated March 26, 1982 was not assigned to an individual because the wearer identification on the badge was obscured.

This is a Severity Level IV violation (Supplement IV)

Pursuant to the provisions of 10 CFR 2.201, Washington Hospital Center is hereby required to submit to this office within thirty days of the date of the letter which transmitted 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.

8303070056  
9pp.

LICENSE NO: 08-031004-03

DOCKET NO. (s) 30-01325

PAGE \_\_\_\_ OF \_\_\_\_

ATTACHED

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

INSPECTION REPORT NO. 82-01

Washington Hosp Center  
110 Irving Street NW  
Washington DC 20010

LICENSEE CONTACT: Nicholas Nolan MD Chairman RSC Telephone No: 202-541-6066

LICENSE NO: \_\_\_\_\_

CATEGORY G1 PRIORITY: III

CATEGORY \_\_\_\_\_ PRIORITY: \_\_\_\_\_

CATEGORY \_\_\_\_\_ PRIORITY: \_\_\_\_\_

INSPECTION DATE (s): Jan 6, 1983

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: Jan 85

PERSONS CONTACTED

Nicholas Nolan MD Chairman  
Michael Parker Chief Tech  
Ross Mitchell RIA Supervisor  
Carolyn Sizemore RIA Tech  
Donna Johnson RMT  
Dinetta Olsen RMT

Ken Williams RSO (physician)  
Bob Reynolds Rad Safety Tech  
Ed Ford Health Physics Asst  
Denise Ecker Exec VP

INSPECTOR: James P. Norton

APPROVED: [Signature]

1/12/83

INSPECTION PLAN AND REPORT NUMBER \_\_\_\_\_

Page \_\_\_\_\_ of \_\_\_\_\_

Plan Approved: \_\_\_\_\_

Date: \_\_\_\_\_

License No. \_\_\_\_\_

Licensee: \_\_\_\_\_

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

(July 82)

INSPECTION REPORT NUMBER \_\_\_\_\_

Page \_\_\_\_ of \_\_\_\_

78710B - Medical

AREAS INSPECTED AND FINDINGS

Licensee: \_\_\_\_\_ License No: \_\_\_\_\_ Amendment No: \_\_\_\_\_

INSPECTION ITEMS	CRITERIA	FINDING
<b>1. Organization</b>	Lic Cond _____	<u>C</u>
Structure of organization as described in requirements?	Chairman RSC reports to Director of Medical Affairs who reports to CEO (President)	
Scope of Program? Patient load?	Oral Implants Procedures - 125 monthly RIA Procedures - 1200-1500 monthly Unsealed Source Rx (I-131, P-32) 12-15/year Brachytherapy (Cs-137, I-125, Ir-192) 12/year	
NOTES & REMARKS:		
<b>2. Licensee Internal Audits</b>	Lic Cond _____	<u>C</u>
Scope and frequency of audits as required?	Annually by RSO. see format	
Conducted by appropriate persons?	RSO	
Records maintained?	OK Chairman & RSC	
Reviewed by management?	yes	
Deficiencies identified and corrected?	yes	Monthly new med staff meetings Quarterly training by RSO
NOTES & REMARKS:		Housekeeping staff - RSO gives training to supervisors who in turn give it to their staff. Nursing staff have had Safety Manual on floor & there involved in Unsealed source and brachytherapy are given specific instructions by RSO.
<b>3. Training and Qualification of Personnel</b>	Lic Cond _____	<u>C</u>
Training & retraining conducted as required?	Students from Prairie George Comm Hosp	
Written & oral exams conducted?	Poor participation by	
Examination results reviewed by management?	Members of the Human Use	
Instructions to workers per 19.127	19.12	Committee for radio isotopes a host
Authorized users? On license? Available in emergency?	Lic Cond _____	
NOTES & REMARKS:		Meeting only 3 of 8 members attended even though a new use proposal was introduced by Dr Tolson. Since approval of full committee is essence of broad scope license prior this item will be expressed as a condition in letter to licensee.
<b>4. Radiation Protection Procedures</b>	Lic Cond _____	<u>C</u>
Procedures available and implemented?	Use of Pharmacopoeia or supplier	
Identify radiopharmaceutical and dose(s)?	of unit dose. Use of gloves.	
Cover handling of patients receiving therapeutic doses? Cover handling of cadavers?	35.14 (b)(5)(v) sponge shields, whole	
Close out Surveys on Patients receiving temporary implants?	body and finger badges not of. Hands are	
Emergency procedures for spills, etc? Personnel understand procedures?	Monitored for contamination - make	
NOTES & REMARKS:		surveyed daily and wiped for contamination weekly. Contamination identified subject to cleanup and re-wiping.

## AREAS INSPECTED AND FINDINGS

Licensee: \_\_\_\_\_ License No: \_\_\_\_\_ Amendment No: \_\_\_\_\_

INSPECTION ITEM	CRITERIA	FINDING
5. <u>Use of Materials</u>		<u>Brachy Source Function</u> <u>C</u>
Procurement and use as required? & route of administration?	35.14(b)	
Special tests (moly breakthrough, leak tests, etc) required?	35.14(b)(4)	Records of leak tests for CS-137 brachytherapy sources reviewed <u>OK</u>
Inventory of brachytherapy sources?	35.14(b)(5)	<u>OK</u>
Dose calibration checks performed?	20.203	<u>OK</u> - send out semi-annually for calibration
Posting & labeling as required?		<u>OK</u>
NOTES & REMARKS:		

6. Storage of MaterialsMaterial secured in both restricted and unrestricted areas? Adequately? OK

20.207

NOTES &amp; REMARKS:

all doses which were posted as GRAM were checked and found locked upon arrival at hospital

Brachytherapy sources locked - Ver Med hot lab in department OK

7. FacilitiesAs described in lic cond or application? OKAny changes made? Adequacy? OK

NOTES &amp; REMARKS:

8. InstrumentsSurvey meters & instruments adequate for program? OKInstruments & meters operable? yesCalibration adequate? yes

NOTES &amp; REMARKS:



## AREAS INSPECTED AND FINDINGS

Licensee: \_\_\_\_\_

License No: \_\_\_\_\_

Amendment No: \_\_\_\_\_

## INSPECTION ITEMS

## CRITERIA

## FINDING

## 9. Receipt and Transfer of Material

Written procedures for pickup, receiving, opening packages? *OK*Survey of packages when received? *OK*Records of survey of packages? *OK*Transfer of materials proper? Transfer records maintained? *OK*

Authorized containers used? Shipping papers &amp; package labels proper for packages on hand?

NOTES &amp; REMARKS:

20.205

20.205(c)(1)

20.401(b)

30.41, 30.51

71.5

All materials for drug  
in going delivered to  
Nuc Med Hot Room - by  
Pharmatops (observation  
on day of inspection)

2 return of used syringes  
to Pharmatops

## 10. Personnel Protection - External

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

Surveys conducted? Adequate?

Records of monitoring, surveys?

Levels in unrestricted areas within limits?  
(Particularly around nuclear med. hot lab  
rooms of brachytherapy patients)

NOTES &amp; REMARKS:

The dose should be assigned to  
licensee had not assigned dose as of day of inspection

1982 WB Finger  
Assigned dose 480 mrem 8470 mrem

20.101, 20.202

20.102(b), 20.401(a)

20.201

20.401

20.1, 20.105

Students from Penn State  
Community College assigned  
whole body and finger  
badges by licensee

3-26-82 report of a TLD  
finger badge reading

2.260 rem for month of

February - information on, who  
was missing

## 11. Personnel Protection - Internal

Airborne concentrations in restricted areas?  
(Xe-133, patients treated with I-131)

Exposures to minors?

Posting of airborne radioactivity areas?

Survey, monitoring bioassay adequate for airborne  
radioactivity, surface contamination?  
Records maintained?

Procedures for use of Xe-133 followed?

NOTES &amp; REMARKS:

system  
Xe-133 backwash.

20.103

20.104

20.203(d)

20.201

20.401

Licensee had problem  
of Xe-133 backwash into  
department setting of  
alarm monitors. Licensee  
was unaware that maintenance  
had placed a HEPA filter in exhaust  
Removal of HEPA filter has eliminated



## AREAS INSPECTED AND FINDINGS

Licensee: \_\_\_\_\_ License No: \_\_\_\_\_ Amendment No: \_\_\_\_\_

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

12. Effluent Controls, Waste DisposalRelease of effluents controlled?  
(particularly Xe-133, radioiodine  
where used)

20.106, 20.33

Waste disposals controlled? *yes**RIA Lab disposed of ~ 5 mCi / year I-125 down drain*  
20.301, 20.303, 20.304, 20.305Procedures, records maintained? *yes*

20.401, Lic Cond \_\_\_\_\_

Surveys made? Adequate? *yes*

20.401

NOTES &amp; REMARKS:

*All RIA tubes are packaged as disposed of  
via waste disposal form.*13. Notifications and ReportsTo individuals? *yes*

19.13

Overexposures, excessive levels & concentrations,  
incidents? *none*

20.403, 20.405

Personnel exposures and monitoring, termination  
reports? *yes*

20.407, 20.408

Theft or loss of licensed material? *none*

20.402

Misadministrations? *none*

35.41-35.45

NOTES &amp; REMARKS:

14. Posting of NoticesPart 20, license & documents, procedures,  
notice of violations posted?

19.11(a)

NRC-3 posted?

19.11(c)

NOTES &amp; REMARKS:

15. Other License Conditions*9-19*

## AREAS INSPECTED AND FINDINGS

Licensee: \_\_\_\_\_ License No: \_\_\_\_\_ Amendment No: \_\_\_\_\_

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

16. Confirmatory Measurements

G/m survey - nuc med lab.  
brachytherapy stage room

NRC Instrument: \_\_\_\_\_

Model 14C

Calibration Due Date: \_\_\_\_\_

3/83

17. Independent Inspection Effort

- ① Check ventilation of room for Xe-133 (OK)
- ② Personnel ~~hand~~ hand contamination check (OK)
- ③ Verified brachytherapy (Cs-137) source inventory. (OK)
- ④ Reviewed "in vitro" tagging of blood ~~with~~ with  $^{99m}\text{TcO}_4^-$  protocol and ~~the~~ human use committee of procedure approval of protocol

18. Incidents and Events

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

35.41 -35.45  
20.402, 20.403, 20.405

none noted or reported

INSPECTION REPORT NUMBER \_\_\_\_\_

APPENDIX A - DOCUMENTATION OF NONCOMPLIANCE

Licensee: \_\_\_\_\_ License No: \_\_\_\_\_

Reference \_\_\_\_\_ Basis for noncompliance \_\_\_\_\_

Report item 10  
10 CFR 20.201 20.101 *Failure to assign a dose (finger badge)*  
Lic Cond \_\_\_\_\_ *of 2.25 rem for Feb. 1982.*  
Type n/c SLIV *Wearer ID had been worn off badge.*  
*Report on 3-26-82 by film badge supplier*

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 \_\_\_\_\_

MAR 3 1 1983

Docket Nos. 30-00226  
30-01790

License Nos. 19-00520-03  
19-02891-05 ✓

Department of the Navy  
National Naval Medical Center  
ATTN: Q. E. Crews, Jr.,  
Rear Admiral  
Bethesda, Maryland 20014

This refers to the routine safety inspection conducted by Mrs. T. H. Darden of this office on February 16 and 17, 1983 of activities authorized by NRC License Nos. 19-02891-05 and 19-00520-03 and to the discussions of our findings held by Mrs. Darden with Capt. J. J. Quinn, C.O., and Cdr. Charles Galley of your staff at the conclusion of the inspection.

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 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 violation brought to your attention in the enclosure to our letter dated November 17, 1981. We have no further questions regarding your action at this time.

Within the scope of this inspection, no violations were observed.

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 will be placed in the Public Document Room.

No reply to this letter is required. 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

~~8304110840~~  
13pp

1E:07

42

MAR 31 1983

cc:

Officer in Charge

ATTN: Code 40

Naval Energy and Environmental Support Activity

Port Hueneme, California 93043

Public Document Room (PDR)

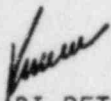
Nuclear Safety Information Center (NSIC)


State of Maryland

bcc:

Region I Docket Room (w/concurrences)

Senior Operations Officer

  
RI:DETP  
Darden:as  
3/25/83

  
RI:DETP  
Kinneman  
3/29/83

REGION I Form 198-C  
(July 82)

LICENSE NO: 19-02891-05  
19-00520-03  
PAGE        OF       

DOCKET NO. (s) 30-01790  
30-00226

## ATTACHED

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

INSPECTION REPORT NO. 83-01  
Department of the Navy  
National Naval Med. Cent  
Bethesda Maryland, 20014  
LICENSEE CONTACT: Comm Charles Galley

Telephone No: 202-295-5410

LICENSE NO: 19-02891-05  
19-00520-03

CATEGORY G PRIORITY: III  
CATEGORY        PRIORITY:         
CATEGORY        PRIORITY:       

INSPECTION DATE (s): Feb 17, 1983

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

Therapy - 19-00520-03

## 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: 2/85

☐ CHANGE PRIORITY TO:       

## PERSONS CONTACTED

Comm. Charles Galley, MSC, USN  
LEAF  
Karl Mendenhall

Chief George Calabris  
Lt Kim Working, MSC USN  
Lt James Israel, Rad. Physicist  
✓ Captain J. J. Quinn, C.O.  
\* Rear Admiral, Q.E. Crews

Hme Tom Lewis, Chief Tech  
Mr. 2 Tommas Bruce, Floor Eng  
Mr. David Skerrett

INSPECTOR: Yeresa Hall Darden 2/17/83

APPROVED: J. Kinnin

3/6/83

T-n



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 5 Hrs
Program Requirements, MC 2860 (Required)			78710B 9 Hrs
Followup on Noncompliance and Deviations			92702B 1 Hr
Independent Inspection Effort (Required)			92706B
Transportation			86740B

INSPECTION REPORT NUMBER \_\_\_\_\_

787108 - Medical

AREAS INSPECTED AND FINDINGS

Licensee: \_\_\_\_\_ License No: \_\_\_\_\_ Amendment No: \_\_\_\_\_

INSPECTION ITEMS	CRITERIA	FINDING
1. <u>Organization</u>	Lic Cond _____	<u>C</u> animal
Structure of organization as described in requirements?		Large Broad Type A which covers research RIA lab, NMA Program
Scope of Program? Patient load?		RIA in vitro & Condo Crystals cancer researchers from NMA NMA school for nursing & physicians Therapeutic doses and implants to administer 20 weeks - various studies (see attachment)
NOTES & REMARKS:		NOTICE: Not in use although licensed RIA - nothing over 10,000 studies in 1 day, 12 hours My name, Shilling, GFR Cancer / Radiation
2. <u>Licensee Internal Audits</u>	Lic Cond _____	<u>C</u>
Scope and frequency of audits as required?		RSD for Research Institute set in part on Biostatistics on RSC & waste disposal, authorization of users
Conducted by appropriate persons?		1 - Interpos - Review Material
Records maintained? <input checked="" type="checkbox"/>		2 RSC committees
Reviewed by management? <input checked="" type="checkbox"/>		RSD - has techs who monitor & survey labs 1/monthly - included are upper surveys & corrective actions
Deficiencies identified and corrected?		
NOTES & REMARKS:		
3. <u>Training and Qualification of Personnel</u>	Lic Cond _____	<u>C</u>
Training & retraining conducted as required?		Authorized users must go through orientation all nursing & housekeeping staff are trained and training is documented. Rad workers are separate
Written & oral exams conducted?		19.12 monthly by N.P.
Examination results reviewed by management?		
Instructions to workers per 19.12?		
Authorized users? On license? Available in emergency?	Lic Cond _____	
NOTES & REMARKS:		
4. <u>Radiation Protection Procedures</u>	Lic Cond _____	<u>C</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?	35.14 (b)(5)(v)	therapy 30 min - usually 4 to 5 min when stimulation
Emergency procedures for spills, etc? Personnel understand procedures?		Observed H.P. safety techs in action when syringe of PC & fluor and 91K spilled - got into fresh
NOTES & REMARKS:		

INSPECTION REPORT NUMBER \_\_\_\_\_

Page \_\_\_\_\_ of \_\_\_\_\_

78710B - Medical

AREAS INSPECTED AND FINDINGS

Licensee: \_\_\_\_\_ License No: \_\_\_\_\_ Amendment No: \_\_\_\_\_

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

5. Use of Materials

Procurement and use as required? Authorized form ☒ 35.14(b) - *Good inventory control*  
& route of administration? 35.14(b)(4)  
Special tests (moly breakthrough, leak tests, etc) required? *4 Curie Ben obtained once weekly, then sent to APPRI for analysis & resealed*  
Inventory of brachytherapy sources? *Records are 35.14(b)(5)*  
Dose calibration checks performed? *Physical inventory retained in Rad Therapy Dept*  
Posting & labeling as required? *Daily calculations and linearities, geometrical variation 20.203 done by by new R.P.*  
OK  
NOTES & REMARKS:

6. Storage of Materials

Material secured in both restricted and unrestricted areas? Adequately? *OK* 20.207

NOTES & REMARKS:  
*all materials received and disposed by RS office*

7. Facilities

Lic Cond \_\_\_\_\_

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

NOTES & REMARKS:

8. Instruments

Lic Cond \_\_\_\_\_

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

NOTES & REMARKS:

*calibrations done biannually*

## 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? <i>all done by RS office</i>	20.205(c)(1)	
Records of survey of packages? <input checked="" type="checkbox"/>	20.401(b)	
Transfer of materials proper? Transfer records maintained? <input checked="" type="checkbox"/>	30.41, 30.51	
Authorized containers used? Shipping papers & package labels proper for packages on hand? <i>one receiving area for entire complex</i>	71.5	
NOTES & REMARKS: <i>Used Moly Generator is shipped once a week to AEFRI, repacked in original container, upon return - is treated as new package and resurveyed</i>		
<u>10. 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? <input checked="" type="checkbox"/>	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)	20.1, 20.105	
NOTES & REMARKS: <i>Weekly and monthly surveys &amp; wipes done and recorded kept by RS Office Film on ring leaders maintained &amp; monitored by Navy RSO</i>		
<u>11. Personnel Protection - Internal</u>		
Airborne concentrations in restricted areas? (Xe-133, patients treated with I-131)	20.103	
<i>Liquid <sup>131</sup>I administered under hood in Hot Lab</i>	20.104	
Exposures to minors?	20.203(d)	
Posting of airborne radioactivity areas?	20.201	
Survey, monitoring bioassay adequate for airborne radioactivity, surface contamination?	20.401	
Records maintained?		
Procedures for use of Xe-133 followed? <i>Not presently in use in research, procedure OK in medical</i>		
NOTES & REMARKS: <i>Bioassays - Iodine uptake - Pre &amp; Post administration - &amp; Starch &amp; Creatinine monitoring during procedure - (all done) - See handling procedures observed by RSO</i>		

## AREAS INSPECTED AND FINDINGS

License No: \_\_\_\_\_

Amendment No: \_\_\_\_\_

Licensee: \_\_\_\_\_

## INSPECTION ITEM

## CRITERIA

## FINDING

12. Effluent Controls, Waste DisposalRelease of effluents controlled?  
(particularly Xe-133, radiiodine  
where used)

20.106, 20.33

Waste disposals controlled?

*Some by decay (short lived)  
Commercial disposal (long lived)*

20.301, 20.303, 20.304, 20.305

Procedures, records maintained?

20.401, Lic Cond \_\_\_\_\_

Surveys made? Adequate? ☒

20.401

## NOTES &amp; REMARKS:

*Waste disposal is controlled by Med RSO & Research RSO  
13) Xe - Not yet in use.  
Monitoring of Iodine Handout Shakes*13. Notifications and ReportsTo 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? *NO*

20.402

Misadministrations? *checked reported and  
(see work page) - corrective action & follow up*

35.41-35.45

## NOTES &amp; REMARKS:

*This Feb 15, 1983 - 131I contamination by worker, discovered when  
trash bag was found to be leaking, observation of worker by  
RSO - (see work page for details)*14. Posting of NoticesPart 20, license & documents, procedures,  
notice of violations posted? *OK.*

19.11(a)

NRC-3 posted?

19.11(c)

## NOTES &amp; REMARKS:

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

- on 2/15/83*
- Incident of <sup>131</sup>I contamination by Tech is presently being evaluated - see back page for details
  - Report of misadministration - corrective action <sup>has been</sup> initiated



INSPECTION REPORT NUMBER \_\_\_\_\_

Page \_\_\_\_\_ of \_\_\_\_\_

APPENDIX A - DOCUMENTATION OF NONCOMPLIANCE

Licensee: \_\_\_\_\_ License No: \_\_\_\_\_

Reference	Basis for noncompliance
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 _____	

INSPECTION REPORT NUMBER \_\_\_\_\_

Page \_\_\_\_\_ of \_\_\_\_\_

APPENDIX B - LICENSEE ACTION ON PREVIOUS INSPECTION FINDINGS

Licensee: \_\_\_\_\_

License No: \_\_\_\_\_

Identification and summary of action taken	Status
--	--------

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

Report No: \_\_\_\_\_ Type n/c: \_\_\_\_\_ Describe: \_\_\_\_\_

Action taken: OPEN  
CLOSED

APPENDIX C - SUPPLEMENTARY INFORMATION

Licensee: \_\_\_\_\_

License No: \_\_\_\_\_

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

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

Large well run program with tight management control - Program is divided under two commanders each area  
1. Research } has over-health physicist who  
2. Nuc med } - Two Rad. Sfg. Comm. 1. Review Med Cases  
3. Therapy } 2. " Research  
reports to RSO. Graduate Licensed RSO handles research protocol review waste and some safety ~~the~~ is designated to him although the Broad Scope Licensed RSO is in charge.

Next inspection should do representative laboratory inspections in research laboratories

DEC 31 1981

TERH  
-E:612  
30-01700  
40-00226  
70-0013A

Docket Nos. 30-01790 ✓  
30-00226  
70-00182

Department of the Navy  
National Naval Medical Center  
ATTN: RADM Quintous E. Crews, Jr.  
Commanding Officer  
Bethesda, Maryland 20014

Gentlemen:

Subject: Inspection 81-01

This refers to your letter dated December 17, 1981, in response to our letter dated November 17, 1981.

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 Inspection

cc: Officer in Charge ✓

ATTN: Code 40

Naval Nuclear Power Unit, Port Hueneme, CA 93043

LCDR Gary Zeman, Radiation Safety Officer

Officer in Charge

Public Document Room (PDR)

Nuclear Safety Information Center (NSIC)

State of Maryland ✓

bcc:

Region I Docket Room (with concurrences)

RI:DETI

Nicolosi/lb  
12/29/81

RI:DETI

Kinneman  
12/31/81

RI:DETI  
Martin

IE.07



DEPARTMENT OF THE NAVY  
NATIONAL NAVAL MEDICAL CENTER  
BETHESDA, MARYLAND 20814

IN REPLY REFER TO  
NNMC:C45:rab  
6471.1

17 DEC 1981

From: Commanding Officer  
To: Chief, Materials Radiological Protection Section, Technical  
Inspection Branch, U.S. Nuclear Regulatory Commission, 631  
Park Avenue, King of Prussia, PA 19406

Subj: Inspection 81-01

Ref: (a) U.S.N.R.C. ltr of 17 Nov 81  
(b) NNMCIINST 6470.1C "Radiation Protection at the National  
Naval Medical Center"

1. Reference (a) reported results of the routine safety inspection conducted by NRC at this activity on October 14, 1981. Appendix A of reference (a) identified a violation of 10CFR 20.201(b) involving failure to perform hood effluent monitoring at the Naval Medical Research Institute during processing of millicurie quantities of iodine-125. Accordingly, the following actions have been taken:

- a. Hood exhaust monitoring has been made mandatory for laboratory procedures involving millicurie quantities of iodine-125. Hood exhaust monitoring shall be performed during the initial two runs of any new procedure and, at a minimum, twice annually thereafter. The hood exhaust monitoring results shall be used to form an evaluation of average annual discharge concentrations which shall be incorporated in the minutes of the Radiation Safety Committee.
- b. The above policy shall be implemented permanently by incorporation into the next revision of reference (b).
- c. Full compliance with 10CFR 20.201(b) is achieved through implementation of the above policy.

2. For further information or questions please contact LCDR  
G. H. ZEMAN (202-295-0403) Radiation Safety Officer.

*Q. E. Crews, Jr.*  
Q. E. CREWS, JR.

Copy to:  
BUMED MED 3C2  
NMRI

8201070175  
1p.

Docket Nos. 30-01790 ✓  
30-00226  
70-00182

17 NOV 1981

Department of the Navy  
National Naval Medical Center  
ATTN: RADM Quintous E. Crews, Jr.  
Commanding Officer  
Bethesda, Maryland 20014

Gentlemen:

Subject: Inspection 81-01

This refers to the routine safety inspection conducted by Mr. J. Nicolosi of this office on October 14, 1981 of activities authorized by NRC License Nos. 19-02891-05, 19-00520-03, and SNM-155 and to the discussions of our findings held by Mr. Nicolosi with yourself, CDR Zentmyer and other 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 item of noncompliance brought to your attention in the enclosure to our letter dated September 15, 1980. We have no further questions regarding your action at this time.

Based on the results of this inspection, it appears that one of your activities was not conducted in full compliance with NRC requirements, as set forth in the Notice of Violation, enclosed herewith as Appendix A. This item of noncompliance has 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.

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.

WJ:DETI  
Nicolosi:hh  
11/5/81

WJ:DETI  
Kinneman  
11/16/81

8112090047  
2pp



National Naval Medical Center

2

17 NOV 1981

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 w/encl:

Public Document Room (PDR)

Nuclear Safety Information Center (NSIC)

State of Maryland ✓

Officer in Charge

ATTN: Code 40

Naval Nuclear Power Unit, Port Hueneme, CA 93043 ✓

LCDR Gary Zeman, Radiation Safety Officer ✓

Officer in Charge ✓

bcc w/encl:

Region I Docket Room (with concurrences)

Chief, Operational Support Section (w/o encl) ✓

APPENDIX A

NOTICE OF VIOLATION

National Naval Medical Center  
Bethesda, Maryland

Docket No: 30-01790  
License No: 19-02891-05

As a result of the inspection conducted on October 14, 1981, and in accordance with the Interim Enforcement Policy, 45 FR 66754 (October 7, 1980), the following violation was identified.

10 CFR 20.201(b) requires that you make such surveys as may be necessary for you to comply with all sections of Part 20. As defined in 10 CFR 20.201(a), "survey" means an evaluation of the radiation hazards incident to the production, use, release, disposal, or presence of radioactive materials or other sources of radiation under a specific set of conditions.

Contrary to this requirement, you failed to make such surveys as were necessary to assure compliance with 10 CFR 20.106, a regulation that limits the yearly average concentration of radioactive materials in air discharged to unrestricted areas. Specifically, on September 29, 1981, no surveys or evaluations were made of the concentrations of radioactive materials in the effluent air discharged from a hood in Room 217 of Building 17 where millicurie quantities of iodine-125 were processed. Additionally, the evaluations of concentrations of radioactive material in air discharged from the Naval Medical Research Institute from 1980 until October 14, 1981 were inadequate in that no measurements were made to confirm the validity of the previously measured release rates used for calculation and no evaluations were made of the average annual concentration in the discharges from your restricted area stacks.

This is a Severity Level IV Violation. (Supplement IV)

Pursuant to the provisions of 10 CFR 2.201, the National Naval Medical Center 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. 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 \_\_\_\_\_

17 NOV 1981

Original Signed By:

John D. Kinnerman, Chief  
Materials Radiological Protection  
Section

8112090054  
11/22

MEDICAL and  
Med. Research.

Page 1 of     

Attached

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

INSPECTION REPORT NO. 81-01

Department of The Navy  
Nat. Naval Med Center  
Bethesda, MD 20814

Telephone no. 8-202-295-0142

Licensee contact: LCDR Gary Zeman

License no. 19-02891-05  
SNM-155 Last amendment and date:     

Category: G1  
ETI and Priority: III, as of last amendment.

Inspection date(s): October 14, 1981

Type of inspection: Positive  
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:     

☐ Next inspection date:     

☐ Change Priority to:     

#### PERSONS CONTACTED

HMC Bruce Larson Rod Safety.

LTDR Eric Kennedy Rod Phy.

Lt. Mike Coogan RSO(NMRI)

Dr. Kessler Researcher NMRI

David Bozzer Senior Photoacoustics tech.

LCDR Doug Bennett Rod Thurgood Physicist.

CDR Zentmyer Direct. Adm. Services.

RADM Quintana E Grews Jr

Phuc. Med Staff physician C.O. NMNM  
physicist  
technologist

Inspector: J. A. Nolan

Approved: J. Costello for (10)

10/22/81

10/28/81

Plan Approved: \_\_\_\_\_

Date: \_\_\_\_\_

License No: \_\_\_\_\_

Inspection Items	Scheduled for Inspection	Post-Inspection Status	Module No.	766 Time Info
Management Meeting - Entrance and Exit Interviews (Required)	✓	Completed	30703B	0.5 hr.
Program Requirements, MC 2860 (Required)	✓		78710B	4.5
Followup on Noncompliance and Deviations	✓		92702B	
Independent Inspection Effort (Required)	✓		92706B	2.0
Transportation			86740B	
Licensee Event Followup			92700B	<del>1 hr.</del>
Followup on Inspector-Identified Problems	✓	Completed	92701B	1 hr.
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	

INSPECTION REPORT NUMBER                     

AREAS INSPECTED AND FINDINGS

Licenses:                                      License no:                      Amendment no:             

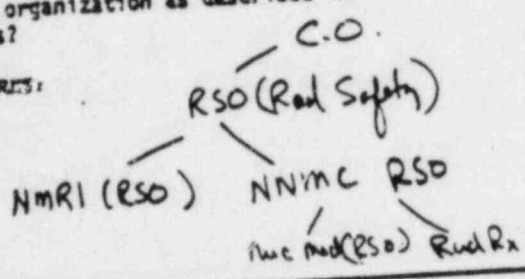
INSPECTION ITEMS	CRITERIA	FINDING
		<u>C</u>

1. Organization

Structure of organization as described in requirements?

Lic Cond 21

NOTES & REMARKS:



Lic Cond 21

C

2. Licenses internal audits

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

Month surveys (audits) by Rad Safety Staff. Results with corrective actions document.

NOTES & REMARKS:

Lic Cond 21

C

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?

19.12

NOTES & REMARKS:

Nuc Med Staff receive minimum 16 wks training program prior to working in department. Most have gone thru one year training program.

Lic Cond 21

C

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?

license compounds own radiopharmaceuticals i.e. (collifer colloid, DTPA, Glucohypnotate and MDP) for use with <sup>99m</sup>Tc  
Use commercial available MAA

NOTES & REMARKS:

Use of handling devices - syring shields - tongs etc.



## AREAS INSPECTED AND FINDINGS

Licensee: \_\_\_\_\_ License no: \_\_\_\_\_ Amendment no: \_\_\_\_\_

INSPECTION ITEM	CRITERIA	FINDING
5. <u>Use of materials</u>	Lic Cond <u>6.28</u>	<u>C</u>
Procurement and use as required? <i>yes</i>		
Special tests (moly breakthrough, leak tests, etc) required? <i>did not request for 99Mo</i>		
Dose calibration checks performed? <i>yes</i>		
Posting & labeling as required? <i>OK</i>	20.203	
NOTES & REMARKS:		

6. Storage of materials

Material secured in both restricted and unrestricted areas? Adequately?

20.207

NOTES &amp; REMARKS:

*Brachytherapy area storage (06-137) OK*  
 *Nuc. Med' area (OK)*

7. FacilitiesLic Cond 21

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

*New facilities appear adequate and in compliance with statements made in license application.*

NOTES &amp; REMARKS:

8. Instruments

Lic Cond \_\_\_\_\_

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

NOTES &amp; REMARKS:



## AREAS INSPECTED AND FINDINGS

Licensee: \_\_\_\_\_ License no: \_\_\_\_\_ Amendment no: \_\_\_\_\_

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

## 9. Receipt and transfer of material

Written procedures for pickup, receiving, opening packages? OK

20.205

Survey of packages when received? OK

20.205(c)(1)

Records of survey of packages?

20.401(b)

Transfer of materials proper? Transfer records maintained? no

30.41, 30.51

Authorized containers used? Shipping papers & package labels proper for packages on hand? OK

71.5

NOTES &amp; REMARKS: Routinely transfer. Mo-99/Tc-99m generators to AFRR weekly.

Records OK

No packages lost or misdelivered.

## 10. Personnel protection - external

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 see #12

Records of monitoring, surveys?

20.401

Levels in unrestricted areas within limits?

20.1, 20.103

NOTES &amp; REMARKS: Film badge records for Nuc. Med., Rad Therapy, Rad Safety, Naval Med. Research Institute, reviewed. all well within limits of 1000m (see notes in Appendix C)

## 11. Personnel protection - internal

Airborne concentrations in restricted areas?

20.103 - dryng procedure 1-125 does not exceed 100 mpc

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 single charcoal trap - not in series. They become 100% efficiency. Do not use in series at one time.

NOTES &amp; REMARKS: Bldg 17 Sept 24, 1951 Rm 217

dryng procedure with I-125 (Dr Falk)

Room air (unrestricted) 8.5 x 10<sup>-8</sup> uCi/ml - Breathing good hood 1 x 10<sup>-8</sup> uCi/ml (2 x mpc)

Thyroid uptake Dr Falk (BKG) - Theoretically, dryng procedure should not involve any volatilization of I-125

## AREAS INSPECTED AND FINDINGS

Licensee: \_\_\_\_\_ License no: \_\_\_\_\_ Amendment no: \_\_\_\_\_

INSPECTION ITEM	CRITERIA	FINDING
12. Effluent controls, waste disposal	Dr Kossly stated that some radiation location had 50% trigger efficiency while other	21/c
Release of effluents controlled?	Procedures had 5% trigger efficiency	Oct 1979 evaluation of effluent 58 MPC for the 64 MPC } pros for time of procedure
Waste disposals controlled?	Did not inspect	
Procedures, records maintained?	20.106, 20.303 20.301, 20.303, 20.304, 20.305 20.401, Lic Cond 20.401	
Surveys made? Adequate?		
NOTES & REMARKS: No evaluation of effluent of I-125 during drying procedure. Larger problem is that last effluent evaluation for I-125 was in 1979. They have lived by that standard even though experimental procedures have changed over 2 years. Their evaluation at that time was that they were at 0.4 MPC monthly normally for their I-125 location.		

## 13. Notifications and reports

- To individuals. 19.13  
Overexposures, excessive levels & concentrations, 20.403, 20.405  
Incidents. 20.407, 20.408  
Personnel exposures and monitoring, termination reports.  
Theft or loss of licensed material. 20.402

evaluation area that they were not above levels requiring reporting for effluent.

NOTES &amp; REMARKS:

None noted or reported

## 14. Posting of notices

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

NOTES &amp; REMARKS:

## 15. Other license conditions

Lic

## AREAS INSPECTED AND FINDINGS

Licensee: \_\_\_\_\_ License no: \_\_\_\_\_ Amendment no: \_\_\_\_\_

INSPECTION ITEMS	CRITERIA	FINDING
16. <u>Confirmatory measurements</u>	g/m survey of Nuc Med Lab <u>OK</u> finds of technologist <u>OK</u> Air flow-hood hot lab velocimeter - $> 400$ LFM. Dr Kessler lab AMRE $\approx 360$ LFM. 1000 CFM.	<u>C</u>

17. Independent inspection efforts

Accountability for emergency response OK  
Special Area Contamination

Use:  
Laboratory

Did not inspect.

Did not inspect

Wait thru I-125 calibration procedure for thyroid uptake  
bioassay program. MDA  $\approx 5$  nCi OK

Performed thyroid uptake on Dr Kessler with thin window NaI detector  
on hickman #3 - BKG

18. Incidents and events

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

Thyroid uptake - Dr Kessler

July 8 1.5 nCi I-125

July 9 no detectable contamination

July 14 0.09 nCi I-125

" 17 0.028 nCi I-125

Incident of July 8. was judged to be result of skin or clothing  
contamination - Rad Safety Office suspended Dr Kessler  
experiments until they could complete evaluation. When he was  
allowed to restart operations, member of Rad Safety was present  
on-site for observations (substantially - no physical measurements)

Nuc Med Tech had syringe and needle separation upon injection  
of  $^{99m}\text{Tc}$  compound. Procedures (emergency) described by him self  
Rad Physicist (LCPR Thomas) did not indicate compliance.

INSPECTION REPORT NUMBER \_\_\_\_\_

Page \_\_\_\_ of \_\_\_\_

APPENDIX A - DOCUMENTATION OF NONCOMPLIANCE

Licenses: \_\_\_\_\_ License no: \_\_\_\_\_

Reference	Basis for noncompliance
Report item <u>12</u> 10 CFR <u>20.201 ref 20.106</u> Lic Cond _____ Type n/c <u>SEW</u>	<u>Rm 217 Bldg 17 Spt 29, 1981 - no evaluation</u> <u>of effluent for I-125</u> <u>No evaluation of new iodination procedure</u> <u>since Oct. 1979</u>

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: <u>86-01</u> Type n/c: <u>Def</u> Describe: <u>Records of <sup>Done cal</sup> <del>liability</del> check</u> Action taken: <u>Records available.</u>	<input checked="" type="radio"/> OPEN <input type="radio"/> CLOSED

Report no: _____ Type n/c: _____ Describe: _____	
Action taken: _____	<input type="radio"/> OPEN <input type="radio"/> CLOSED

Report no: _____ Type n/c: _____ Describe: _____	
Action taken: _____	<input type="radio"/> OPEN <input type="radio"/> CLOSED

Report no: _____ Type n/c: _____ Describe: _____	
Action taken: _____	<input type="radio"/> OPEN <input type="radio"/> CLOSED

Report no: _____ Type n/c: _____ Describe: _____	
Action taken: _____	<input type="radio"/> OPEN <input type="radio"/> 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

Not. Naval Med Center - well controlled program.  
Program at Naval Med. Research Center while on same  
license is under separate administrative control.  
NMRI is the real problem for this licensee.

D. sq. inc. Med program - 125 - 150 pt/weekly

Brach therapy - 5-10 procedures annually

Next inspection - should take TLDS for Navy Drimetry  
Program - independent evaluation  
this has never been done.

None of the NMRI research hoods  
use charcoal traps. All effluent is  
direct into the atmosphere.



MAR 31 1983

Docket Nos. 30-00226  
30-01790

License Nos. 19-00520-03 ✓  
19-02891-05

Department of the Navy  
National Naval Medical Center  
ATTN: Q. E. Crews, Jr.,  
Rear Admiral  
Bethesda, Maryland 20014

This refers to the routine safety inspection conducted by Mrs. T. H. Darden of this office on February 16 and 17, 1983 of activities authorized by NRC License Nos. 19-02891-05 and 19-00520-03 and to the discussions of our findings held by Mrs. Darden with Capt. J. J. Quinn, C.O., and Cdr. Charles Galley of your staff at the conclusion of the inspection.

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 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 violation brought to your attention in the enclosure to our letter dated November 17, 1981. We have no further questions regarding your action at this time.

Within the scope of this inspection, no violations were observed.

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 will be placed in the Public Document Room.

No reply to this letter is required. 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

~~8304110840~~  
11 pp

1E:07  
42

National Naval Medical Center

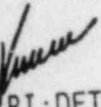
2


MAR 31 1983

cc:  
Officer in Charge  
ATTN: Code 40  
Naval Energy and Environmental Support Activity  
Port Hueneme, California 93043

Public Document Room (PDR)  
Nuclear Safety Information Center (NSIC)  
State of Maryland

bcc:  
Region I Docket Room (w/concurrences)  
Senior Operations Officer

  
RI:DETP  
Darden:as  
3/25/83

  
RI:DETP  
Kinneman  
3/29/83

REGION I Form 198-E  
(July 82)LICENSE NO: 19-00520-03DOCKET NO. (s) 30-00226

PAGE \_\_\_\_\_ OF \_\_\_\_\_

## ATTACHED

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

INSPECTION REPORT NO. 83-01

Dept. of the Navy, Nat. Naval Med. Cent.  
Radiation Safety Officer Code C-45  
Bethesda, Maryland 20814

LICENSEE CONTACT: Comm. Charles Galley

Telephone No: \_\_\_\_\_

LICENSE NO: 19-00520-03CATEGORY 3GPRIORITY: 3

CATEGORY \_\_\_\_\_

PRIORITY: \_\_\_\_\_

CATEGORY \_\_\_\_\_

PRIORITY: \_\_\_\_\_

INSPECTION DATE (s): 2/17/83

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: 2/85

☐ CHANGE PRIORITY TO: \_\_\_\_\_

## PERSONS CONTACTED

Lt. James Israel, Rad Phy  
Lt. Kim Working, DISCUSN, in Training

INSPECTOR:

Genea Hall Gordon 2/17/83

APPROVED:

[Signature]3/8/83

INSPECTION PLAN AND REPORT NUMBER \_\_\_\_\_

Plan Approved: \_\_\_\_\_

Page \_\_\_\_\_ of \_\_\_\_\_

Date: \_\_\_\_\_

License No. \_\_\_\_\_

Licensee: \_\_\_\_\_

Inspection Items	Scheduled for Inspection	Post Inspection Status	Module No.
Management Meeting - Entrance and Exit Interviews (Required)			30703B
Program Requirements, MC 2860 (Required)			78720B 1.5
Followup on Noncompliance and Deviations			92702B
Independent Inspection Effort (Required)			92706B
Transportation			86740B

INSPECTION REPORT \_\_\_\_\_

Page \_\_\_\_ of \_\_\_\_

78720B - Medical - Teletherapy

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?		
Patient load?		
NOTES & REMARKS:		

2. Training and Instructions to Employees

Training program, scope and frequency,  
retraining?

Lic Cond \_\_\_\_\_

Required tests administered, scores satis-  
factory?

Instructions to workers?

19.12

NOTES & REMARKS:

*Techns rotate between Linac & Calist.*  
*Training seems adequate*

3. Radiation Protection Procedures

Lic Cond \_\_\_\_\_

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

5-year maintenance?

Lic Cond 20

Emergency Procedures posted?

Lic Cond 16

Radiation room monitor mounted, operable? Order  
Tested? Survey meter used when inoperable?

NOTES & REMARKS:

## AREAS INSPECTED AND FINDINGS

Licensee: \_\_\_\_\_ License No: \_\_\_\_\_ Amendment No: \_\_\_\_\_

INSPECTION ITEM	CRITERIA	FINDING
4. <u>Materials, Facilities and Instruments</u>		<u>c</u>
Teletherapy unit location, interlock system operational, required tests? (every 6 months, records)	Lic Cond 10, 17, 19 OK	
Access controls, posting of areas & rooms?	20.203 OK	
Survey instruments & dosimeters operable, properly calibrated?	Lic Cond _____ OK	
Patient viewing system?	Lic Cond 13 OK	
NOTES & REMARKS:		

5. Personnel Protection - External

Personnel monitoring control; minimize exposures, control of accumulated dose?	20.101, 20.102, 20.202
Surveys conducted following last source change? Sent to NRC? Adequate?	20.201 Lic Cond 18
Levels in unrestricted areas?	20.1, 20.104
Stops installed?	Lic Cond 15
NOTES & REMARKS:	

6. Leak Tests of Sources

Performed by authorized persons & methods:	Lic Cond 14 OK
Performed at 6-month (or other) interval?	OK
Records maintained; reports submitted of leaking sources; corrective action taken?	OK
NOTES & REMARKS:	



## AREAS INSPECTED AND FINDINGS

Licensee: \_\_\_\_\_ License No: \_\_\_\_\_ Amendment No: \_\_\_\_\_

INSPECTION ITEM	CRITERIA	FINDING
7. <u>Notifications and Reports</u>		<u>C</u>
To individuals?	19.13	
Overexposures, excessive levels, 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:		
8. <u>Annual Calibration</u>		<u>C</u>
At required intervals?	35.21 (a)	
Include all required tests?	35.21 (b)	
Properly calibrated dosimetry system?	35.23 (a)	
Performed by a qualified expert?	35.21 (e), 35.24	
Decay corrections for interval not exceeding 1 month?	35.21 (d)	
Records available?	35.25	
NOTES & REMARKS:		
9. <u>Spot Check Measurements</u>		<u>C</u>
At required intervals?	35.22 (a)	
Include all required tests?	35.22 (b)	
Performed by qualified expert or reviewed by qualified expert within 15 days?	35.22 (c), 35.24	
Properly calibrated dosimetry system?	35.23 (b)	
Records available?	35.25	
NOTES & REMARKS:		
10. <u>Posting of Notices</u>		<u>X</u>
Part 20, license & documents, procedures, notice of violations?	19.11 (a)	
NRC-3?	19.11 (c)	
NOTES & REMARKS:		

INSPECTION REPORT NUMBER \_\_\_\_\_

Page \_\_\_\_\_ of \_\_\_\_\_

787208 - Medical - Teletherapy

AREAS INSPECTED AND FINDINGS

Licensee: \_\_\_\_\_ License No: \_\_\_\_\_ Amendment No: \_\_\_\_\_

INSPECTION ITEM	CRITERIA	FINDING
11. <u>Other License Conditions</u>		

NOTES & REMARKS:

12. Confirmatory Measurements

Output check?

Confirmation of condition 18 survey?

NOTES & REMARKS:

NRC Instrument: \_\_\_\_\_ Calibration Due Date: \_\_\_\_\_

13. Independent Inspection Effort

NOTES & REMARKS:

INSPECTION REPORT NUMBER \_\_\_\_\_

APPENDIX A - DOCUMENTATION OF NONCOMPLIANCE

Licensee: \_\_\_\_\_ License No: \_\_\_\_\_

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

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 _____	

Report item _____	
10 CFR _____	
Lic Cond _____	
Type n/c _____	

INSPECTION REPORT NUMBER \_\_\_\_\_

APPENDIX B - LICENSEE ACTION ON PREVIOUS INSPECTION FINDINGS

Licensee: \_\_\_\_\_

License No: \_\_\_\_\_

Identification and summary of action taken

Status

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

Report No: \_\_\_\_\_ Type n/c: \_\_\_\_\_ Describe: \_\_\_\_\_  
Action taken: \_\_\_\_\_ OPEN  
CLOSED

(July 82)

INSPECTION REPORT NUMBER \_\_\_\_\_

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

*Program control is adequate, New Health Physician is in training to replace present one.*

DEC 31 1981

TERH  
IE: 6/12  
30-01790  
40-00226  
70-00182

Docket Nos. 30-01790  
30-00226 ✓  
70-00182

Department of the Navy  
National Naval Medical Center  
ATTN: RADM Quintous E. Crews, Jr.  
Commanding Officer  
Bethesda, Maryland 20014

Gentlemen:

Subject: Inspection 81-01

This refers to your letter dated December 17, 1981, in response to our letter dated November 17, 1981.

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 Inspection

cc: Officer in Charge  
ATTN: Code 40  
Naval Nuclear Power Unit, Port Hueneme, CA 93043  
LCDR Gary Zeman, Radiation Safety Officer  
Officer in Charge  
Public Document Room (PDR)  
Nuclear Safety Information Center (NSIC)  
State of Maryland

bcc:  
Region I Docket Room (with concurrences)

*RL: DETI*  
*Nicolosi/lb*  
*12/29/81*

*RL: DETI*  
*Kinneman*  
*12/28/81*

*RL: DETI*  
*Martin*

*8201070165*  
*IP.*

*IE: 07*





DEPARTMENT OF THE NAVY  
NATIONAL NAVAL MEDICAL CENTER  
BETHESDA, MARYLAND 20814

IN REPLY REFER TO  
NNMC:C45:rab  
6471.1

17 DEC 1981

From: Commanding Officer  
To: Chief, Materials Radiological Protection Section, Technical  
Inspection Branch, U.S. Nuclear Regulatory Commission, 631  
Park Avenue, King of Prussia, PA 19406

Subj: Inspection 81-01

Ref: (a) U.S.N.R.C. ltr of 17 Nov 81  
(b) NNMCINST 6470.1C "Radiation Protection at the National  
Naval Medical Center"

1. Reference (a) reported results of the routine safety inspection conducted by NRC at this activity on October 14, 1981. Appendix A of reference (a) identified a violation of 10CFR 20.201(b) involving failure to perform hood effluent monitoring at the Naval Medical Research Institute during processing of millicurie quantities of iodine-125. Accordingly, the following actions have been taken:

- a. Hood exhaust monitoring has been made mandatory for laboratory procedures involving millicurie quantities of iodine-125. Hood exhaust monitoring shall be performed during the initial two runs of any new procedure and, at a minimum, twice annually thereafter. The hood exhaust monitoring results shall be used to form an evaluation of average annual discharge concentrations which shall be incorporated in the minutes of the Radiation Safety Committee.
- b. The above policy shall be implemented permanently by incorporation into the next revision of reference (b).
- c. Full compliance with 10CFR 20.201(b) is achieved through implementation of the above policy.

2. For further information or questions please contact LCDR  
G. H. ZEMAN (202-295-0403) Radiation Safety Officer.

*Q. E. Crews, Jr.*  
Q. E. CREWS, JR.

Copy to:  
BUMED MED 3C2  
NMRI

~~820107015~~  
lp.

Docket Nos. 30-01790 ✓  
30-00226 ✓  
70-00182

17 NOV 1981

Department of the Navy  
National Naval Medical Center  
ATTN: RADM Quintous E. Crews, Jr.  
Commanding Officer  
Bethesda, Maryland 20014

Gentlemen:

Subject: Inspection 81-01

This refers to the routine safety inspection conducted by Mr. J. Nicolosi of this office on October 14, 1981 of activities authorized by NRC License Nos. 19-02891-05, 19-00520-03, and SNM-155 and to the discussions of our findings held by Mr. Nicolosi with yourself, CDR Zentmyer and other 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 item of noncompliance brought to your attention in the enclosure to our letter dated September 15, 1980. We have no further questions regarding your action at this time.

Based on the results of this inspection, it appears that one of your activities was not conducted in full compliance with NRC requirements, as set forth in the Notice of Violation, enclosed herewith as Appendix A. This item of noncompliance has 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.

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.

YNI:DETI  
Nicolosi:hh  
11/5/81

YNI:DETI  
Kinneman  
11/16/81

~~8112090047~~

2pp.

17 NOV 1981

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 w/encl:

Public Document Room (PDR)

Nuclear Safety Information Center (NSIC)

State of Maryland

Officer in Charge

ATTN: Code 40

Naval Nuclear Power Unit, Port Hueneme, CA 93043

LCDR Gary Zeman, Radiation Safety Officer

Officer in Charge

bcc w/encl:

Region I Docket Room (with concurrences)

Chief, Operational Support Section (w/o encl)

APPENDIX A

NOTICE OF VIOLATION

National Naval Medical Center  
Bethesda, Maryland

Docket No: 30-01790  
License No: 19-02891-05

As a result of the inspection conducted on October 14, 1981, and in accordance with the Interim Enforcement Policy, 45 FR 66754 (October 7, 1980), the following violation was identified.

10 CFR 20.201(b) requires that you make such surveys as may be necessary for you to comply with all sections of Part 20. As defined in 10 CFR 20.201(a), "survey" means an evaluation of the radiation hazards incident to the production, use, release, disposal, or presence of radioactive materials or other sources of radiation under a specific set of conditions.

Contrary to this requirement, you failed to make such surveys as were necessary to assure compliance with 10 CFR 20.106, a regulation that limits the yearly average concentration of radioactive materials in air discharged to unrestricted areas. Specifically, on September 29, 1981, no surveys or evaluations were made of the concentrations of radioactive materials in the effluent air discharged from a hood in Room 217 of Building 17 where millicurie quantities of iodine-125 were processed. Additionally, the evaluations of concentrations of radioactive material in air discharged from the Naval Medical Research Institute from 1980 until October 14, 1981 were inadequate in that no measurements were made to confirm the validity of the previously measured release rates used for calculation and no evaluations were made of the average annual concentration in the discharges from your restricted area stacks.

This is a Severity Level IV Violation. (Supplement IV)

Pursuant to the provisions of 10 CFR 2.201, the National Naval Medical Center 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. 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 \_\_\_\_\_

17 NOV 1981

Original Signed By \_\_\_\_\_

John D. Kinneman, Chief  
Materials Radiological Protection  
Section

8112090054

11pp

Page 1 of     Attached

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

INSPECTION REPORT NO. 81-01Dept of Navy Nat Naval Med CtrBethesda MDLicensee contact: LCDR Doug BennettTelephone no. 202-295-5000License no. 19-00520-03 Last amendment and date:                     Category: G3, and Priority: IV, as of last amendment.Inspection date(s): Oct 14, 1981Type of inspection: Routine  
Unknown vel.

## 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:                     

## PERSONS CONTACTED

LCDR Doug Bennett Rad. Phy.Inspector: J. NicholsonApproved: J. Costello for (19)10/22/8110/25/81







## AREAS INSPECTED AND FINDINGS

Licensee: \_\_\_\_\_ License no: \_\_\_\_\_ Amendment no: \_\_\_\_\_

INSPECTION ITEM	CRITERIA	FINDING
1. <u>Organization</u>	Lic Cond <u>24</u>	<u>C</u>
Management organization.		
Radiation protection organization.		
NOTES & REMARKS:		
2. <u>Training and instructions to employees</u>	Lic Cond <u>24</u>	<u>C</u>
Training program, scope and frequency, retraining.		
Required tests administered, scores satisfactory.		
Instructions to workers.	19.12	
NOTES & REMARKS:		
3. <u>Radiation protection procedures</u>	Lic Cond _____	<u>C</u>
Operating and emergency procedures implemented; interlock failure, handling malfunctions during operations.	OK	
5-year maintenance. - new unit, 1981		
Leak tests of sealed sources.		
NOTES & REMARKS:		
4. <u>Materials, facilities and instruments</u>	Lic Cond _____	<u>C</u>
Teletherapy unit location, interlock system operational, required tests.		
Access controls, posting of areas & rooms.	20.203	
Survey instruments & dosimeters operable, properly calibrated.	Lic Cond _____	
NOTES & REMARKS:		

## AREAS INSPECTED AND FINDINGS

Licensee: \_\_\_\_\_ License no: \_\_\_\_\_ Amendment no: \_\_\_\_\_

INSPECTION ITEM	CRITERIA	FINDING
		<u>C</u>

5. Receipt and transfer of material

Transfer of licensed material; records.

30.41, 30.51

## NOTES &amp; REMARKS:

New source rec'd AECL-1981  
Old source shipped AECL 1981

6. Personnel protection - external

Personnel monitoring control; minimize exposures, control of accumulated dose.

20.101, 20.102, 20.202

Surveys conducted, adequate.

20.201

Records of monitoring, surveys.

20.401; Lic Cond \_\_\_\_\_

Levels in unrestricted areas.

20.1, 20.105

## NOTES &amp; REMARKS:

7. Leak tests of sources

Lic Cond \_\_\_\_\_

Performed by authorized persons &amp; method.

Performed at 6-month (or other) interval.

Records maintained; reports submitted of leaking sources; corrective action taken.

## NOTES &amp; REMARKS:

8. Notifications and reports

To individuals.

19.13

Overexposures, excessive levels, incidents.

20.403, 20.405

Personnel exposures and monitoring, termination reports.

20.407, 20.408

Theft or loss of licensed material.

20.402

## NOTES &amp; REMARKS:

## AREAS INSPECTED AND FINDINGS

Licensee: \_\_\_\_\_ License no: \_\_\_\_\_ Amendment no: \_\_\_\_\_

INSPECTION ITEM	CRITERIA	FINDING
9. <u>Posting of notices</u>		<u>C</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:

New parts of 35.  
 Monthly checks OK  
 Uniformity check OK  
 timer error checks OK

INSTRUMENT calibration OK11. Confirmatory measurements

head measurements - consistent  
 with those submitted by licensee

9/m survey - ~~unit~~ unrestricted area ( $\leq 13\text{KG}$ )  
 (unit is 360° rotational)  x wall in unrestricted hall

12. Independent inspection effort

Check interlocks - emergency bar.  
 area transition

## APPENDIX A - DOCUMENTATION OF NONCOMPLIANCE

Licensee: \_\_\_\_\_

License no: \_\_\_\_\_

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

Report item \_\_\_\_\_

10 CFR \_\_\_\_\_

Lic Cond \_\_\_\_\_

Type n/c \_\_\_\_\_

*none*

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

Licensees: \_\_\_\_\_

License no: \_\_\_\_\_

Identification and summary of action taken	Status
--	--------

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

Action taken:	<i>none</i>	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
---------------	--	----------------

# TELETHERAPY SURVEY AND TEST EVALUATION

## LICENSEE AND ADDRESS

National Naval Medical Center  
Bethesda MD 20014  
LICENSE NO. 19-00520-03

SURVEY DATE Dec 6-7, 1980

PROMPTED BY  
☒ NEW INSTALLATION  
☒ SOURCE CHANGE  
☐ OTHER (SPECIFY)

## RADIATION SURVEY RESULTS

Source Housing  
Restricted Areas  
Unrestricted Areas  
Phantom Used — Did not state  
Use Factors Applied Did not state  
Beam Intensity Comparison  
(before and after source change)

Adequate

Inadequate

1/1  
1/1  
1/1  
1/1  
1/1  
1/1

1/1  
1/1  
1/1  
1/1  
1/1  
1/1

## TESTS

Method

Door Interlocks  
On-Off Indicators  
Timing  
Stops

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

1/1  
1/1  
1/1  
1/1  
1/1  
1/1

1/1  
1/1  
1/1  
1/1  
1/1  
1/1

## REMARKS

While not stated, it appears from their measurements, no levels of radiation above those permitted for unrestricted areas are exceeded.

State that "due to room design, none are needed."  
360° rotational use.

Copy Forwarded to Licensing

Yes  
1/1

No

1/1

John S. [Signature]  
Evaluator  
4/25/81  
Date

806



APR 20 1983

Docket Nos. 30-0123  
30-01314  
70-2199

License Nos. 08-00942-04  
08-00942-05  
SNM-1605

Veterans Administration  
ATTN: A. A. Gayazzi  
Medical Center Director  
50 Irving Street, N.W.  
Washington, D. C. 20422

Gentlemen:

Subject: Inspection No. 83-01

This refers to your letter dated March 18, 1983, in response to our letter dated February 7, 1983.

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

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

cc:  
James J. Smith, M.D.  
Director, Nuclear Medicine Service  
VA Central Office  
Washington, D. C. 20420

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

bcc:

Region I Docket Room (w/concurrences)  
J. DETP J. DETP J. DETP  
Nicolosi/dmg Jones Kinneman  
4/12/83 4/17/83 4/17/83

~~8304250265~~  
IP

43  
1E:07

APR 20 1983

Docket Nos. 30-0123  
30-01314  
70-2199

License Nos. 08-00942-04  
08-00942-05  
SNM-1605

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Medical Center Director  
50 Irving Street, N.W.  
Washington, D. C. 20422

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bcc:

Region I Docket Room (w/concurrences)

RI:DETP

Nicolosi/dmg  
4/12/83

RI:DETP

Jones

4/17/83

RI:DETP

Kinneman

4/17/83

~~8304250265~~

1p.

43 1E:07