

28 MAR 1988

Docket No. 030-01808

License No. 20-00289-07

New England Deaconess Hospital
ATTN: Mr. Robert D. Pence
Assistant Director
185 Pilgrim Road
Boston, Massachusetts 02215

Gentlemen:

Subject: Special Inspection No. 87-001

On October 22 and 23, 1987, Mr. Laurence F. Friedman, Ph.D., C.H.P and Mr. C. Thor Oberg of this office conducted a special safety inspection at 185 Pilgrim Road, Boston, and Tech Center, 93 West Street, Medfield, Massachusetts, of activities authorized by the above listed NRC license. The inspection was limited to a review of the circumstances surrounding the unauthorized transfer of licensed material. The findings of the inspection were discussed with Mr. Robert D. Pence, Miss Joyce Tower, and Mr. Phillip Cobb at the conclusion of the inspection. This also refers to the telephone conversation on October 26, 1987 between Mr. Thomas C. Hill, M.D. and Dr. Friedman.

Based on the results of this inspection, it appears to us that your activities were not conducted in full compliance with NRC requirements. Licensed material in your possession was transferred to an unauthorized recipient without obtaining authorization from the Radiation Safety Committee in accordance with the Hospital Regulations delineated in your Radiation Safety Manual, without proper packaging in accordance with NRC Regulations, and without verification of the recipient's authorization in the form of a specific license to receive such material under terms of a specific or general license issued by the NRC. We note, however, these violations were identified by you, promptly reported to the NRC, and immediately corrected. As indicated in the "General Statement of Policy and Procedure for NRC Enforcement Actions," 10 CFR Part 2, Appendix C (Enforcement Policy), the NRC wants to encourage and support licensee initiative for self-identification and correction of problems. Accordingly the NRC will not generally issue a Notice of Violation for a violation that meets all of the following tests: (1) It was identified by the licensee; (2) It fits in Severity Level IV or V; (3) It was reported, if required; (4) It was or will be corrected, including measures to prevent recurrence, within a reasonable time, and (5) It was not a violation that could reasonably be expected to have been prevented by the licensee's corrective action for a previous violation.

It appears that all of the above criteria have been satisfied in this case, and therefore the NRC has determined that no Notice of Violation should be issued.

RETURN ORIGINAL TO
REGION I

HE-01

8804050345 880308
REQ1 LIC30
20-00289-07 DCD

OFFICIAL RECORD COPY

D/132

28 MAR 1988

New England Deaconess Hospital

2

We understand that you have stopped any further transfer of licensed material to persons not authorized to receive this material and that no further transfers will be made unless specifically authorized by the NRC; and that you are committed to the corrective measures identified in your letter to Mr. Thomas Martin of this office, dated October 26, 1987. Please advise us in writing within 10 days of your receipt of this letter if our understanding in this matter is not correct.

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.

Your cooperation with us is appreciated.

Sincerely,

Original Sign
John R. White

Frank L. Congel, Acting Director
Division of Radiation Safety
and Safeguards

cc:
Public Document Room (PIR)
Nuclear Safety Information Center (NSIC)
Commonwealth of Massachusetts
Mr. P. Cobb, Radiation Safety Officer

bcc:
Region I Docket Room (w/concurrences)
Management Assistant, DRMA (w/o enclosures)
C. T. Oberg, RI
L. F. Friedman, RI

RI:DRSS
Oberg, C
03/21/88

RI:DRSS
Friedman
03/24/88

RI:DRSS
White
03/27/88

RI:DRSS
Joyner
03/27/88

RI:DRSS
Congel
03/27/88

OFFICIAL RECORD COPY

MEDICAL

LICENSE FILE NO: 20-00289-107
20-0289-70

ATTACHED

DOCKET No. (s) 030-01808
030-17696

☒ Appendix A ☐ Appendix B ☐ Appendix C

INSPECTION REPORT NO. 88-001

LICENSEE CONTACT: Philip Cobb

Name: New England Deaconess Hospital

TELEPHONE NO.: 617-732-7000

Address: 185 Pilgrim Road
Boston, Massachusetts 02215

LICENSE NO: 20-00289-07
20-00289-10

PRIORITY: 2 G1

Program Code: 02110

PRIORITY: 3 E

Program Code: 03511, 13510

PRIORITY: _____

Program Code: _____

INSPECTION DATE (s): 6/14/88, 6/15/88 TYPE OF INSPECTION: ☐ SPECIAL ☐ ANNOUNCED

☒ ROUTINE ☒ UNANNOUNCED

☒ DAYSHIFT ☐ OTHER

SUMMARY OF FINDINGS AND ACTION

☐ NO NONCOMPLIANCE, CLEAR 591 ISSUED

☐ ACTION ON PREVIOUS
NONCOMPLIANCE, APPENDIX B

☒ NO NONCOMPLIANCE, LETTER

☐ NONCOMPLIANCE, 591 ISSUED

☒ NONCOMPLIANCE, APPENDIX A

☐ SUPPLEMENTAL INFO, APPENDIX C

RECOMMENDATIONS
SEE APPENDIX C

☐ CHANGE PROGRAM CODE

☐ CHANGE PRIORITY TO: _____

☒ NEXT INSPECTION DATE: 6/90

PERSONS CONTACTED

Philip Cobb, RSO
Lou Emond, Supervisor Nuclear Medicine
Robert Pence, Administrator

INSPECTOR: W. J. Rajendran

APPROVED: John L. Plummer 7/28/88

REGION 1 Form 198-C

(June '88) 9301110071

1788

D/133

1. ORGANIZATION

- a. Organizational structure meets license requirements. (✓) Yes () No
[L/C]
Remarks.

- b. Use supervised by authorized individuals. (✓) Yes () No [35.22(b)(2)]
Remarks.

All users ~~are~~ are authorized by RSC

- c. Radiation Safety Committee meets at quarterly intervals.
(✓) Yes () No

- (1) Membership in accordance with 35.22(a)(1)] (✓) Yes () No
Remarks.

- (2) Record of Committee meetings. (✓) Yes () No [35.22(a)(4)]
Remarks.

- (3) Consultants. () Yes (✓) No
Remarks.

- e. Licensee uses the services of a visiting authorized user.
() Yes (✓) No [35.27(a)]

- (1) Licensee has a copy of visiting authorized user license.
() Yes () No [35.27(a)(2)] *N/A - (no visiting authorized users)*

- (2) Licensee has records (maintained for 2 years) of visiting authorized users
last visit. () Yes () No [35.37(c)] *NA (no visiting authorized users)*

- f. License utilizes mobile nuclear medicine services.
() Yes (✓) No [35.29]

- g. Licensee delegates RSO sufficient authority, organizational
freedom, and management prerogative. (✓) Yes () No

- h. Appropriate review by Committee in accordance with 35.22(b).
(✓) Yes () No

2. INSPECTION HISTORY

Violations or deviations noted during last inspection conducted on April 9, 1986
(☒) Yes () No.

Response letter dated June 27, 1986
(See Appendix B for details)

3. SCOPE OF PROGRAM

Briefly list medical procedures and their frequency.

@ 15 patients per day in Nuclear Medicine
40% of these are Cardiology studies
40% bone scans, 20% others (Thyroid uptake, lung scans)
3 staff tech, 1 admin. personnel
3 authorized users (N.M.) Dr. Thomas Hill, Dr. Judy Katz, Dr. Gramon
1 Chief of NM (Dr. Thomas Hill)

4. INTERNAL AUDITS OR INSPECTIONS

a. Required by license condition. () Yes (☒) No () N/A

b. Investigations or inspections conducted. (☒) Yes () No
[35.21(a) and (b)(2)]
Remarks.

c. Records maintained. (☒) Yes () No [35.21(b)(2)(xi)]
Remarks.

5. TRAINING, RETRAINING, AND INSTRUCTION TO WORKERS

a. License referenced training program.

(1) Training program implemented. (☒) Yes () No
Remarks.

(2) Retraining program implemented. (☒) Yes () No
Remarks.

Yearly by RSD

5. (cont'd)

- b. Instruction to workers in accordance with 10 CFR 19.12.

☒ Yes ☐ No

Remarks.

- *c. Describe the QA program to mitigate therapeutic misadministrations.

- (1) Have secondary checks of the dose calculations been done?

☐ Yes ☐ No

- (2) Do the second party checks of the dose calculations provide assurance that the final treatment plan will provide the dose prescribed on the patient chart?
- ☐
- Yes
- ☐
- No

- (3) Do technologists consult with the doctor if the prescription or other orders are unclear?
- ☐
- Yes
- ☐
- No
-
- Remarks.

- d. Followup on therapy or serious diagnostic misadministrations
- NA - no therapy or serious dx misadministrations.*

- (1) 10 CFR 35.43 properly implemented?
- ☐
- Yes
- ☐
- No

- (2) Was proper medical care given for the patient pursuant to the NRC medical consultant recommendations?
- ☐
- Yes
- ☐
- No

- (3) Were appropriate actions implemented to prevent recurrence?
- ☐
- Yes
- ☐
- No

- (4) Were the technologist and dosimetrist made aware of these actions?
- ☒
- Yes
- ☐
- No

- (5) Do the licensee's QA/QC procedures address these actions to prevent recurrence?
- ☐
- Yes
- ☐
- No
-
- Remarks.

6. RADIOLOGICAL PROTECTION PROCEDURES

- a. Radiation Safety program changes reviewed. (Exception to changes without license amendment may be found in 35.13 and 35.606.)

☒ Yes ☐ No

*Inspect when QA rule becomes final.

6. (cont'd)

- b. Records of changes in procedures reviewed. () Yes () No
[35.31(b)]
Remarks.

- c. Radioactive materials used in accordance with current procedures.
(✓) Yes () No [35.21(b)(2)]
Remarks.

- (1) Describe individuals understanding of current procedures.

Knowledgeable & well-trained workers

- (2) Examples of key procedures:

- (a) ordering and accepting packages of RAM ✓
- (b) general rules for safe use of RAM ✓
- (c) emergency procedures ✓
- (d) survey procedures ✓
- (e) handling of volatile RAM (e.g., Xe-133, I-131) ✓
- (f) precautions for use of RAM (sealed and unsealed) for therapy ✓
- (g) emergency procedures posted? ✓
- (h) do licensee personnel understand emergency procedures? ✓
- (i) safety procedures for patient therapy in accordance with
35.315 and 35.415 ✓

7. MATERIALS, FACILITIES AND INSTRUMENTS

- a. Facilities as described in license application. (✓) Yes () No
Remarks.

- b. Isotope, chemical form, quantity and use as authorized.
(✓) Yes () No [L/C]
Remarks.

- c. Syringes containing radioactive material properly labeled and shielded unless contraindicated. (✓) Yes () No [35.60(a)(b)(c)]
- d. Vials containing radioactive material properly labeled and shielded.
(✓) Yes () No [35.61(a)(b)]

7. (cont'd)

e. Tests required by regulations.

- (1) molybdenum-99 breakthrough. (✓) Yes () No [35.204(b)]
(2) performed as required. (✓) Yes () No [35.204(a)]
(3) records maintained. (✓) Yes () No [35.204(c)]
Remarks.

(4) Leak tests. (✓) Yes () No

(5) Leak tests performed as required. (✓) Yes () No [35.59(b)]
Dates and Remarks.

f. Inventory of sealed sources.

(1) Inventory of Group VI sources. (✓) Yes () No [35.59(g)]
Dates:

(2) Inventory of calibration sources. (✓) Yes () No [35.59(g)]
Dates:

g. Areas for storage and use of radioactive materials.

(1) Method used to prevent an unauthorized individual *OK*

(2) Radioactive material secured to prevent unauthorized removal from an
unrestricted area. () Yes () No [20.207] *yes*

Remarks.

(3) Area wipe tested? (✓) Yes () No
Remarks.

h. Instrumentation.

(1) Operable survey instruments are as described or equivalent to those
described in license application. (✓) Yes () No
[35.120, 220, 320, 420]
Remarks.

*20-30 survey instruments
Calibrated in house*

7. (cont'd)

- (2) Capability of radiation survey instruments is adequate for program.
(☒) Yes () No
Remarks.

- (3) Calibration of survey instruments required. (☒) Yes () No

(a) Performed as required. (☒) Yes () No [35.50]
Dates and Remarks.

- (4) Records of calibration maintained for 2 years. [35.50(e)]
(☒) Yes () No

8. RECEIPT AND TRANSFER OF RADIOACTIVE MATERIAL

Receipt of incoming packages during "off-duty" hours by whom?

(a) Where stored? Security? [L/C]

(b) Survey of incoming packages. (☒) Yes () No [20.205(b)(1)]
Remarks.

(1) Record of survey. (☒) Yes () No [20.401(b)]
Remarks.

(c) Procedure for opening packages. (☒) Yes () No [20.205(d)]
Remarks.

(d) Returned licensed material transferred in accordance with 10 CFR 30.41.
(☒) Yes () No
Remarks.

8. (cont'd)

(e) Records of receipt and transfer maintained. (☒) Yes () No

[30.51]

Remarks.

9. PERSONNEL RADIATION PROTECTION - EXTERNAL

(Obtain information regarding whole body and extremity monitors)

- a. Film or TLD badge supplier _____ Frequency monthly
- b. Reports reviewed by RSO? yes Others RSC 1/4 ly ?
Frequency monthly
(Are badges assigned to personnel as per licensee's correspondence with NRC?)
- c. NRC inspector reviewed personnel monitoring records for period 4/86 - 5/87
to _____
- d. NRC forms or equivalent.
- (1) NRC-4: (☒) Yes () No Complete: (☒) Yes () No
Necessary () Yes () No
- (2) NRC-5: (☒) Yes () No Complete: (☒) Yes () No
[20.401(a)]
Remarks.
- e. Maximum quarterly whole-body exposure. 2 (in regulatory limits)
- f. Maximum quarterly extremity exposure. 2 (in regulatory limits)
- g. Licensee has implemented an ALARA program. (☒) Yes () No
[35.50] [see Procedure No. 83822, "Radiation Protection"]
Remarks.
- h. Radiation survey of unrestricted areas. (☒) Yes () No
(20.201(b) to show compliance with 20.105(b)) [35.315(a)(4)];
[35.415(a)(4)]
Remarks.

i. (cont'd)

- (1) Record of surveys maintained. ☒ Yes ☐ No
[20.401(b) to show compliance with 20.105(b)]
Remarks.

i. Radiation survey of storage and use areas:

- (1) Quarterly survey brachytherapy source storage. ☒ Yes ☐ No
[35.59(h)]
- (2) Temporary implant patient release survey. ☒ Yes ☐ No
[35.404(a)]
- (3) Radiopharmaceutical and permanent implant patient release survey.
☒ Yes ☐ No [35.75]
- (4) Radiopharmaceutical therapy room contamination survey.
☐ Yes ☐ No [35.515(a)(5) and (7)]
- (5) Patient survey upon implant. ☐ Yes ☐ No [35.406(a)]
- (6) Radiopharmaceutical storage and laboratory use areas. ☒ Yes
☐ Yes ☐ No [35.70]
Remarks.

- j. Record of survey maintained. ☐ Yes ☐ No [35.70(h)]
Remarks.

- k. Inventory of brachytherapy sources after use. ☐ Yes ☐ No
[35.406]
Remarks.

- l. Records maintained. ☒ Yes ☐ No [35.59(g)]; [35.406]

- m. Dose calibrator calibration and checks performed as follows:

Constancy ☐ Yes ☐ No Accuracy ☐ Yes ☐ No
Linearity ☐ Yes ☐ No Geometric dependence ☐ Yes ☐ No
[35.50]

10. PERSONNEL RADIATION PROTECTION - INTERNAL

- a. Potential for exposure of individuals to airborne radioactive material exists.
☒ Yes ☐ No
Remarks.

- b. Monitoring for airborne radioactivity conducted. ☒ Yes ☐ No
[20.201(b) to show compliance with all sections of 20.103 and 35.90]
Remarks.

- c. Records of monitoring maintained. ☒ Yes ☐ No
[20.401(b) or L/C]
Remarks.

- d. Bioassay program implemented as required in correspondence with NRC.
☒ Yes ☐ No [35.315(a)(6)]

- e. Control of airborne radioactivity in accordance with 35.205.
☒ Yes ☐ No

11. RADIOACTIVE EFFLUENT AND WASTE DISPOSAL

- a. Radioactivity in effluents to unrestricted areas. ☐ Yes ☒ No

- b. Release in accordance with regulatory limits. ☐ Yes ☐ No
[20.106(a)]
Remarks.

- c. State solid waste disposal method.

- d. State liquid waste disposal method.

11. (cont'd)

- e. Disposal of solid and liquid waste in accordance with regulatory requirements (decay in storage). (☒) Yes () No [35.92(a)]
Remarks.

(1) Records of disposal. (☒) Yes () No [35.92(b)]
Remarks.

- f. Survey of waste prior to disposal. (☒) Yes () No
[20.201(b) to show compliance with 20.301 - 35.92(a)(2)]
Remarks.

(1) Records of survey maintained. (☒) Yes () No [20.401(b)]
Remarks.

12. NOTIFICATIONS AND REPORTS

- a. Licensee in compliance with 10 CFR 19.13 (reports to individuals).
() Yes () No [19.13]
Remarks.

- b. Licensee in compliance with 10 CFR 20.405 (overexposures).
() Yes () No [20.405(a)]
Remarks. *no overexposures*

- c. Licensee in compliance with 10 CFR 20.403 (incidents).
(☒) Yes () No [20.403]
Remarks.

Medical

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License No. 20-00289-7
20-00289-12

12. (cont'd)

d. Licensee in compliance with 10 CFR 20.402 (theft or loss).
(☒) Yes () No [20.402(a) or (b)]

Remarks.

No theft or loss of RRM

e. Licensee in compliance with reporting therapeutic misadministrations and taking corrective action. () Yes () No [35.33(a)(b)(d)]

Remarks.

No therapeutic misadministrations

f. Licensee in compliance with reporting diagnostic misadministrations and taking corrective action as needed under conditions set forth in 10 CFR 35.33(c).
(☒) Yes () No

Remarks.

13. POSTING OF NOTICES

Notices to workers posted. (☒) Yes () No [19.11(a), (b), or (c)]

Remarks.

14. CONFIRMATORY MEASUREMENTS

a. Measurements made by inspector.

(☒) Yes () No

*dot 2.08 mCi/hr
Storage (generator + floor) - 1.2 mCi/hr*

probe

ents and compare with

12. (cont'd)

- d. Licensee in compliance with 10 CFR 20.402 (theft or loss).
(☒) Yes () No [20.402(a) or (b)]
Remarks.

No theft or loss of RRM

- e. Licensee in compliance with reporting therapeutic misadministrations and taking corrective action. () Yes () No [35.33(a)(b)(d)]
Remarks.

No therapeutic misadministrations

- f. Licensee in compliance with reporting diagnostic misadministrations and taking corrective action as needed under conditions set forth in 10 CFR 35.33(c).
(☒) Yes () No
Remarks.

13. POSTING OF NOTICES

- Notices to workers posted. (☒) Yes () No [19.11(a), (b), or (c)]
Remarks.

14. CONFIRMATORY MEASUREMENTS

- a. Measurements made by inspector. (☒) Yes () No *dot 20-0.08 mCi/hr*
Storage (generator + floor) - 0.2 mCi/hr
b. Survey instrument and probe _____
NRC Serial No. _____
c. Describe type and results of measurements and compare with licensee's measurements.

15. INDEPENDENT MEASUREMENTS

- a. Measurements made by inspector. () Yes () No
b. Survey instrument GM Ludlum MC
NRC Serial No. NRC 014614
c. Describe type and results of measurements.

16. POSTING AND LABELING

Posting and labeling in accordance with 10 CFR 20.203.

☒ Yes ☐ No [20.203]

Remarks:

17. LICENSE CONDITIONSa. All license conditions reviewed during inspection. ☒ Yes ☐ Nob. Activities were conducted in accordance with license conditions, except as noted elsewhere in this report. ☒ Yes ☐ No

Remarks:

18. BULLETINS AND INFORMATION NOTICES N.I.a. Bulletins and Information Notices issued during current year.
List:b. Bulletins and Information Notices received by licensee. ☐ Yes ☐ No N.I.
Remarks:c. Licensee took appropriate action in response to Bulletins and Information Notices. ☐ Yes ☐ No N.I.
Remarks:19. TRANSPORTATION (10 CFR 71.5a and 49 CFR 171-178)

	<u>Yes</u>	<u>Violation?</u>
a. License makes shipments of RAM? If "Yes", complete the following items.	<input checked="" type="checkbox"/>	<input type="checkbox"/>

b. Such shipments consisted of:

☒ radwaste☐ sources/products☒ other generators (Mo 99 / Tc 99M)Spent generator to Beth Israel Hospital on Fridays (PM)
to CNA weekends at " " "

19. (cont'd)

- c. For radwaste, shipments are:
☐ by licensee, using common carrier
☒ through Radwaste Broker
name of Broker ADCO
- d. Licensee is aware of 10 CFR 61: N.I
Radwaste requirements for generators? ☐ ☐
Licensee has classified and characterized
its radwaste? (20.311(d)) ☐ ☐
- e. For shipments:
Licensee uses authorized packages? ☒ ☐
[(173.415-16)]
Package type used.
For DOT-7A, licensee has performance test
records on file? [173.415(a)] ☐ ☐
For special form sources, licensee has
performance tests records on file for each
source design? [(173.47(a))] ☐ ☐
Packages are properly labeled? [172.403] ☐ ☐
[173.441] ☐ ☐
[172.200] ☐ ☐
Packages are properly marked? ☐ ☐
Proper shipping papers are prepared for
each shipment? [172.203(d)] ☐ ☐
Remarks.
- f. Does licensee make return shipments of ☐ ☐
radiopharmacy doses?
(If Yes, does licensee assume responsibility
for all shipper requirements?) (If No, what
arrangements/understanding have been made
between licensee and radiopharmacy as to
performance of shipper responsibilities?)
(Describe)
Remarks.

20. ITEMS OF NONCOMPLIANCE21. CONTINUATION OF REPORT ITEMS - USE BACK OF PAGE IF NECESSARY

INSPECTION REPORT NUMBER 88-001

APPENDIX A - DOCUMENTATION OF NONCOMPLIANCE

LICENSEE: New England Deaconess Hospital

License No. 20-00289-07
20-00289-10

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 _____

Clear

INSPECTION REPORT NUMBER _____

APPENDIX B - LICENSEE ACTIONS ON PREVIOUS INSPECTION FINDINGS

Licensee: New England Seacore Hospital License No.: _____

Identification and summary of action taken _____ Status _____

Report No.: 86-01 Type n/c: _____ Describe: Labeling B. & G. report

Action taken: _____
Generator now labeled & proper labeling & description on shipping paper OPEN
CLOSED

Report No.: 86-01 Type n/c: _____ Describe: Use calibration

Action taken: _____
Use calibration now. Calculation now keep performed to determine $\pm 5\%$ to daily consistency 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

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

02 AUG 1988

Docket Nos. 030-01808
030-17696

License Nos. 20-00289-07 ✓
20-00289-10

New England Deaconess Hospital Corporation
ATTN: Mr. Robert Pence
Administrator
185 Pilgrim Road
Boston, Massachusetts 02215

Gentlemen:

Subject: Routine Inspection No. 82-001

On June 14 and 15, 1988, Mr. Lester M. Tripp and Mr. Selvan Rajendran of this office conducted a routine safety inspection at the above address of activities authorized by the above listed NRC licenses. The inspection was, an examination of your licensed activities as they relate to radiation safety and to compliance with the Commission's regulations and the license conditions. The inspection consisted of observations by the inspector, interviews with personnel, and a selective examination of representative records. In addition, our inspection examined the activities covered in your correspondence dated June 27, 1986. The findings of the inspection were discussed with Mr. Robert Pence and Mr. Philip Cobb at the conclusion of the inspection. This also refers to the telephone conversation on July 11, 1988 between Mr. Cobb and Mr. Tripp.

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

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 is appreciated.

Sincerely,

Original Signed By:
John E. Glenn

John D. Kinneman, Chief
Nuclear Materials Safety Section B
Division of Radiation Safety
and Safeguards

cc:
Public Document Room (PDR)
Nuclear Safety Information Center (NSIC)
Commonwealth of Massachusetts
Philip Cobb, Radiation Safety Officer
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ML DL DEACONESS - 0001.0.0
07/21/88

RETURN ORIGINAL TO
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20-00289-07

PNU

app.

D/134
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JE-07

02 AUG 1988

New England Deaconess Hospital Corporation

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bcc:
Region I Docket Room (w/concurrences)
Management Assistant, DRMA

RI:DRSS
Tripp/gcb

RI:DRSS
Rajendran

RI:DRSS
Tripp

Glenn

7/22/88

7/28/88

7/28/88

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07/21/88