

DOYLESTOWN HOSPITAL

595 WEST STATE STREET
U.S. ROUTES 202 AND 611 BYPASS
DOYLESTOWN, PENNSYLVANIA 18901
(215) 345-2200

JAROMIR MARIK, F.A.C.H.A.
ADMINISTRATOR

August 28, 1985

Mr. John D. Kinneman, Chief
U.S. Nuclear Regulatory Commission
Nuclear Materials Safety Section A
Region I, 631 Park Avenue
King of Prussia, PA 19406

RE: License No. 37-13232-01

Dear Mr. Kinneman:

In response to your letter dated July 29, 1985 regarding the inspection performed January 21, 1985, the following corrective steps have been taken:

In reference to Appendix A, Item A, package monitoring and wipes tests were performed prior to January 21, 1985; however, log entries for certain packages were omitted. The staff has been directed to perform and log the required monitoring on all packages.

Concerning Item B.1., technologists handling radiopharmaceuticals have been instructed to monitor their hands, feet and clothing after each generator elution and kit preparation, and after each dose preparation/administration or before leaving the area. These meter readings are logged at time taken. To further accomplish this task and prevent noncompliance, an area monitor has been mounted by the doorway in the hot lab. The unit is always "on" to encourage frequent use as personnel exit the hot lab.

In response to Item B.2., survey procedures have been implemented on a weekly basis encompassing the entire Nuclear Medicine Department equivalent to the physicist's monthly survey. Results of these weekly surveys will be documented.

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THE VILLAGE IMPROVEMENT ASSOCIATION OF DOYLESTOWN

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In response to Item B.3., technologists have been instructed to perform consistency checks of survey meters before use. The acceptable range of readings for each meter employing a longlived check source has been posted. These consistency checks will be documented.

In reference to Item B.4., during the second quarter of 1984 our consultant was absent on extended illness, and therefore, one consistency test was omitted. Recently backup coverage has been secured through the company employing our consultant physicist should the physicist be absent for any reason in the future.

Regarding Item B.5., technologists have been instructed in performing decay corrections and percent error calculations. The log books have been appropriately modified so that the required calculations are accomplished and recorded on a daily basis.

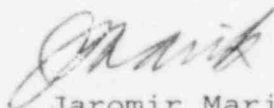
Regarding Item B.6., written records are maintained of each Radiation Safety Committee meeting. These minutes include actions, recommendations, and members attending. Since the inspection in January, three meetings have been documented and these meetings do occur on a routine quarterly schedule.

Doylestown Hospital is presently in full compliance with all NRC rules and regulations. To prevent further noncompliance, the written records (log entries) described above will be reviewed weekly by the Technical Administrator (Doylestown Hospital Radiology Coordinator). The review shall include the following logs:

- 1) Package monitoring log
- 2) Personnel monitoring log
- 3) Weekly surveys
- 4) Dose calibrator log

Should you require any further information, please do not hesitate to contact me.

Sincerely,



Jaromir Marik, F.A.C.H.A.
Administrator
Doylestown Hospital

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