DAMON CLINICAL LABORATORIES

12 August 1985

Patricia J. Whiston
Materials Licensing Section
United States Nuclear Regulatory Commission
Region III
799 Roosevelt Road
Glen Ellyn, Illinois 60137

Re: Control Number 18863

Dear Ms. Whiston:

In response to your letter of July 18th, 1985, we are responding to the following items:

1. Users

Name	Education Training	Experience	Type of Work	Materials
T. Akhtar	M.S.	1983 to present	Routine and esoteric RIA testing	I^{125}, Co^{57}
L.G. Bekeris,	M.D.	1974 to present	Training in routine and esoteric RIA testing	I^{125}, Co^{57}
K. Lynch,	MT(ASCP) B.S.	1968 to present	Routine and esoteric RIA testing	I^{125}, Co^{57}, I^{131}
L. Janusz	MT(HEW)	1983 to present	Routine and esoteric RIA testing	I^{125}, Co^{57}
B. Young	MT(ASCP)	1957 to present	Routine and esoteric RIA testing	I^{125}, Co^{57}

2. Radiation Protection Officer (RPO)

Dr. L. G. Bekeris, Medical Director of Damon Clinical Laboratories, Berwyn, Illinois will be the Radiation Protection Officer (RPO). As RPO his responsibilities include the following:

a: To ensure that all users (where appropriate) wear personnel monitoring equipment when using radioactive material.

CENTRAL REFERENCE LABORATORY, 3231 S. EUCLID AVE., BERWYN, ILLINOIS 60402, TEL: (312) 282-9500

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b: To ensure that the use of radioactive material is by or under the direct supervision of individuals specifically listed in our license.

c: To ensure that radioactive materials are properly secured against unauthorized removal at all times when not in use.

d: To perform routine inspections of all laboratories using or storing radioactive materials.

e. To ensure that the personnel in RIA perform wipe tests, area surveys, background counts and reference calibrator counts on a routine basis as required by law.

f. To ensure that the terms and conditions of our license are met, and that all required records are maintained.

3. Laboratory Rules: See attached.

4. Area Surveys: See attached.

I trust that this additional information is sufficient for your needs.

Sincerely yours,

Leonas G. Bekeris, M.D.
Medical Director
Damon Clinical Laboratories

LGB:jfh

GENERAL SAFETY REQUIREMENTS

A. Smoking is prohibited in the technical work areas. A burning cigarette is an ignition source to flammable solvents, and the handling of cigarettes from bench to mouth is a route of exposure for both bacteria and certain toxic materials, such as mercury.

B. Eating and drinking are prohibited in the technical work areas. It is poor laboratory practice and a source of contamination from specimens (blood, urine, feces, sputum) containing many different pathogens which are handled daily in the technical work areas and stored in the laboratory refrigerators.

C. Food is not permitted in technical refrigerators.

D. Application of cosmetics in the technical work areas is prohibited.

E. Contact lenses, especially the soft ones, will absorb certain solvents and also constitute a hazard in splashes or spills, provide no protection from splashes and may concentrate caustic material against the cornea and prevent tears from washing a caustic away. YOU ARE STRONGLY ADVISED NOT TO WEAR CONTACTS IN THE LABORATORY.

F. Eye protection must be worn in all technical areas when acids or caustic materials are in use.

G. Clothing: Do not wear clothing with a high percentage of acetate or other highly flammable material. Laboratory coats should be worn in the lab and removed when out of the lab. Shoes with open toes are prohibited.

H. Hair and beards: Hair shall be secured back and off the shoulders in such a manner as to prevent it from coming into contact with contaminated materials and also to prevent shedding of organisms into the work area. This is especially true in bacteriology. It is also important to keep hair out of moving machinery such as centrifuges. Long beards are a danger in regard to moving equipment and all beards are a source of bacterial contamination.

I. Hand washing should be done frequently during the day, before leaving the laboratory, after contact with patients, and before eating or smoking.

J. Mouth pipetting is strictly prohibited. Automatic pipetting aids and protective devices are provided throughout the laboratory.

K. Exits and aisles must not be blocked in any way. No equipment, chairs, supplies or trash are permitted in exit routes or areas.

L. Good housekeeping must be observed. Keep your work areas neat and clean. Place trash in the proper receptacle, glassware in boxes.

M. Glassware:

1. Do not use broken, chipped, etched or starred glassware. Discard it.

2. Do not leave pipettes sticking out of bottles, flasks or beakers.

3. Decontaminate glass exposed to possible hepatitis-containing samples. Place contaminated glassware in "Biohazard Bags" for autoclaving followed by a thorough cleaning and rinsing.

4. Dispose of all broken glassware in boxes labeled "Glass". Do not place glass in the paper trash containers. (Disposal of broken glass along with paper and trash is a hazard to the custodial staff.)

N. Centrifuges:

1. Do not operate centrifuges unless the covers are closed (including serofuges). Keep hair, beards, necktics, hair ribbons or other dangling items OUT OF THE WAY.

2. Do not centrifuge uncovered tubes of specimens (blood, urine, sputum) or flammable liquids. Centrifugation creates a vacuum and volatilizes liquids. (Contaminated items become aerosols, flammable liquids become bombs, etc.) USE CAPS OR PARAFILM.

O. Autoclaves:

1. Personnel should not operate autoclaves until they have been checked out in the proper operation.

2. Do not open until both temperature and pressure are back to normal.

3. Be sure intake steam valve is off before opening.

4. Use asbestos gloves when putting items into or removing items from the autoclave.

5. Loosen caps of any containers to allow equalization of pressures inside containers. This prevents explosions, boil-overs and implosions.

P. Labeling of ALL reagents is to include: content, concentration, date received or prepared, date opened, date expired, storage requirements and the initials of the preparer.

Q. Processing of Biological Hazardous Materials:

1. Label all specimens which have a probability of containing hepatitis, meningitis, etc. with biohazard labels.

2. Wear disposable plastic gloves for the processing of the specimens.

3. Be especially careful of keeping your hands away from your face while processing the specimen.

4. Absolutely no mouth pipetting as directed by general laboratory guidelines.

5. Before centrifuging, inspect tubes for cracks and double check centrifuge for any glass.

6. Avoid decanting centrifuge tube. In case you decant, wipe off the outer rim with disinfectant Beaucoup and paper towel. Paper towels are to be discarded into a specific orange plastic bag designated for biological hazardous material.

7. Any spills should be wiped with Beaucoup and a paper towel. The paper towels are discarded into a specific orange plastic bag designated for biological hazardous material.

8. Never leave possible biological hazardous tubes unattended.

9. Contaminated material must be placed in orange biohazard bag and autoclaved before disposal.

10. All specimens which are possible biological hazards when stored must be stored in a refrigerator labeled "Caution: Radioactive Material and Biohazard."

c. Check coat or apron with survey meter periodically to detect contamination.

SPILLS:

1. Capsules may be picked up with forceps.

2. Liquids:

a. Notify supervisor or safety officer.

b. Keep other personnel out of the area.

c. Put on rubber gloves and soak up the spill with absorbent paper. Place the wet toweling in a plastic bag and add the gloves to the bag when finished. Place the bag behind adequate shielding to d before disposal.

d. Scrub the area with soap and water. Rinse adequately.

e. Survey the area with the portable rate meter to detect residual contamination. Repeat washing if necessary.

f. Wash hands thoroughly.

ENVIRONMENTAL AND PERSONNEL MONITORING:

1. Surveys:

a. Monitor the work area (perform wipe test), storage area and sp receipt area at the end of each shift. Record results.

b. Tolerance limits:

(1) Surface areas should not exceed 200 mrem/hour.
(2) Three (3) foot distances should not exceed 10 mrem/hour.
(3) 100 square centimeter area should not exceed 200 dpm.

c. Corrective actions:

(1) Surface areas found to exceed limits should be washed solution (3/14/74,76)
(2) Excessive or unusual contamination should be reported to t safety officer.

2. Personnel monitoring:

a. Film badges must be worn by all personnel.

b. Reports of environmental surveys and personnel exposure levels m be available to employees on request.