

RI - DNMS Licensee Event Report Disposition

Licensee: Cabell Huntington Hospital
 Event Description: Radioactive waste sent to landfill
 License No: 47-00404-02 Docket No: 0300337A MLER-RI: 2006-006
 Event Date: 11/27/05 Report Date: 11/27/05 HQ Ops Event #: _____

1. REPORTING REQUIREMENT

<input type="checkbox"/>	10 CFR 20.1906 Package Contamination	<input type="checkbox"/>	10 CFR 30.50 Report
<input type="checkbox"/>	10 CFR 20.2201 Theft or Loss	<input type="checkbox"/>	10 CFR 35.3045 Medical Event
<input type="checkbox"/>	10 CFR 20.2203 30 Day Report	<input type="checkbox"/>	License Condition
<input checked="" type="checkbox"/>	Other <u>Possible RAM sent to landfill</u>		

2. REGION I RESPONSE

<input type="checkbox"/>	Immediate Site Inspection	Inspector/Date	<u>Rudolph W. McPhilly 2/1/06</u>
<input type="checkbox"/>	Special Inspection	Inspector/Date	
<input checked="" type="checkbox"/>	Telephone Inquiry	Inspector/Date	
<input type="checkbox"/>	Preliminary Notification/Report	<input type="checkbox"/>	Daily Report
<input type="checkbox"/>	Information Entered in RI Log	<input checked="" type="checkbox"/>	Review at Next Inspection
<input type="checkbox"/>	Report Referred To:	_____	

3. REPORT EVALUATION

<input checked="" type="checkbox"/>	Description of Event	<input type="checkbox"/>	Corrective Actions	<u>Event retracted by Stericycle</u>
<input type="checkbox"/>	Levels of RAM Involved	<input type="checkbox"/>	Calculations Adequate	
<input checked="" type="checkbox"/>	Cause of Event	<input type="checkbox"/>	Additional Information Requested from Licensee	

4. MANAGEMENT DIRECTIVE 8.3 EVALUATION

<input type="checkbox"/>	Release w/Exposure > Limits	<input type="checkbox"/>	Deliberate Misuse w/Exposure > Limits
<input type="checkbox"/>	Repeated Inadequate Control	<input type="checkbox"/>	Pkging Failure > 10 rads/hr or Contamination > 1000x Limits
<input type="checkbox"/>	Exposure 5x Limits	<input type="checkbox"/>	Large# Indivs w/Exp > Limits or Medical Deterministic Effects
<input type="checkbox"/>	Potential Fatality	<input type="checkbox"/>	Unique Circumstances or Safeguards Concerns
If any of the above are involved:			
<input type="checkbox"/>	Considered Need for IIT	<input type="checkbox"/>	Considered Need for AIT
Decision/Made By/Date: _____			

5. MANAGEMENT DIRECTIVE 8.10 EVALUATION (additional evaluation for medical events only)

<input type="checkbox"/>	Timeliness - Inspection Meets Requirements (5 days for overdose / 10 days for underdose)
<input type="checkbox"/>	Medical Consultant Used-Name of Consultant/Date of Report: _____
<input type="checkbox"/>	Medical Consultant Determined Event Directly Contributed to Fatality
<input type="checkbox"/>	Device Failure with Possible Adverse Generic Implications
<input type="checkbox"/>	HQ or Contractor Support Required to Evaluate Consequences

6. SPECIAL INSTRUCTIONS OR COMMENTS

None

Non-Public Inspector Signature: Rudolph W. McPhilly Date: 2/1/06
 Public-SISP REVIEW COMPLETE Branch Chief Initials: Remy Carr Date: 3/23/06

U.S. NUCLEAR REGULATORY COMMISSION		Date: 2/01/06
TELEPHONE CONVERSATION RECORD		Time: 12:30 p.m.
Mail Control or Report No(s).	License No(s). 4700404-02	Docket No(s). 03003370
Name of Licensee:	Cabell Huntington Hospital	
Name of Participant(s):	Fred Peatross Richard McKinley	
Telephone No.	(304)526-2079 (610)337-5102	
Subject: (NOTE: This will be used as the Documents Title in ADAMS)	Waste at a landfill	
Summary:	According to Mr. Peatross, he received a call from the State of West Virginia to the effect that a package from the hospital had been found to be radioactive by personnel at Stericycle. Later the same day, he received another call from the same person stating that Stericycle personnel had misread their survey instrument, and that the package was not radioactive.	
Action Required:	Review at next inspection.	
Document Availability:	<input type="checkbox"/> Publicly Available <input checked="" type="checkbox"/> Non-Publicly Available <input checked="" type="checkbox"/> Non-Sensitive <input type="checkbox"/> Non-Sensitive Copyright <input type="checkbox"/> Sensitive <input type="checkbox"/> Sensitive Copyright <input type="checkbox"/> Immediate Release <input type="checkbox"/> Normal Release <input type="checkbox"/> Delay Release Date	
Prepared & SISP Review Completed By:	/ RA / Richard McKinley	Date: 2/1/06