

TRANSMISSION VERIFICATION REPORT

TIME : 03/24/2008 13:20  
NAME : USNRC RIV  
FAX : 8178608263  
TEL :  
SER.# : BROL2J847623

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UNITED STATES  
NUCLEAR REGULATORY COMMISSION  
REGION IV  
611 RYAN PLAZA DRIVE, SUITE 400  
ARLINGTON, TEXAS 76011-4005

F A C S I M I L E

Name: Karen Oura, RN  
Licensee: Maui Memorial Medical Center

License No.: 53-13519-01  
Docket No.: 030-03561

Fax No.: 808-442-5112  
Phone No.: 808-442-5109  
From: James L. Thompson  
Date: 3/24/2008  
Subject: 591M  
Pages: 1 + transmittal sheet

Ms. Oura:

I am faxing you a NRC Form 591M which documents the inspection performed by myself at Maui Memorial Medical Center. If you have any questions about the inspection or the 591M please call me at 817-276-6538.

James L. Thompson, Federal Inspector  
Nuclear Materials Safety Branch A

## SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED: Maui Memorial Medical Center 221 Mahalani Street Wailuku, Maui, Hawaii 96793		2. NRC/REGIONAL OFFICE USNRC Region IV 611 Ryan Plaza Drive, Suite 400 Arlington, Texas 76011	
REPORT NUMBER(S) 2008-001			
3. DOCKET NUMBER(S) 030-03561	4. LICENSEE NUMBER(S) 53-13519-01	5. DATE(S) OF INSPECTION March 5, 2008	

### LICENSEE:

The inspection was an examination of the activities conducted under your license as they relate to radiation safety and to compliance with the Nuclear Regulatory Commission (NRC) rules and regulations and the conditions of your license. The inspection consisted of selective examinations of procedures and representative records, interviews with personnel, and observations by the inspector. The inspection findings are as follows:

- ☐ 1. Based on the inspection findings, no violations were identified.
- ☐ 2. Previous violation(s) closed.
- ☒ 3. The violation(s), specifically described to you by the inspector as non-cited violations, are not being cited because they were self-identified, non-repetitive, and corrective action was or is being taken, and the remaining criteria in the NRC Enforcement Policy, NUREG-1600, to exercise discretion, were satisfied.

One Non-Cited Violation(s) was/were discussed involving the following requirement(s) and Corrective Action(s):

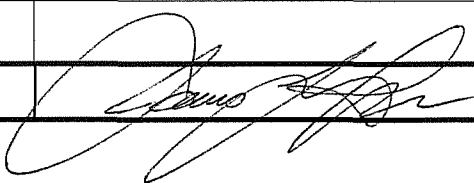
A violation of 10 CFR 35.2092 was identified, regarding the failure to document radiation surveys of the disposal of licensed material (radioactive waste) during the fourth quarter of 2007. However, this violation was identified by the licensee and corrected prior to this inspection.

- ☐ 4. During this inspection certain of your activities, as described below and/or attached, were in violation of NRC requirements and are being cited. This form is a NOTICE OF VIOLATION, which may be subject to posting in accordance with 10 CFR 19.11.

(Violations and Corrective Actions)

### Licensee's Statement of Corrective Actions for Item 4, above.

I hereby state that, within 30 days, the actions described by me to the inspector will be taken to correct the violations identified. This statement of corrective actions is made in accordance with the requirements of 10 CFR 2.201 (corrective steps already taken, corrective steps which will be taken, date when full compliance will be achieved). I understand that no further written response to NRC will be required, unless specifically requested.

Title	Printed Name	Signature	Date
LICENSEE'S REPRESENTATIVE			
NRC INSPECTOR	James L. Thompson		3/24/2008