



Dante C
Huntsman/DHUN/CC01/INEE
L/US

05/23/2005 07:51 AM

To Dante C Huntsman/DHUN/CC01/INEEL/US@INEL
cc
bcc
Subject Fw: Information request for NMED item 050143

----- Forwarded by Dante C Huntsman/DHUN/CC01/INEEL/US on 05/23/2005 07:51 AM -----



"Darrel Wiedeman"
<DGW@nrc.gov>
05/23/2005 06:25 AM

To <NMED@inel.gov>
cc "John Madera" <JRM4@nrc.gov>
Subject Re: Information request for NMED item 050143

Dante: The licensee's corrective actions included: (1) revision of it's procedures, to include a check off sheet to indicate which applicator is used (inserted), (2) physically measuring each applicator before insertion to verify the size bring used, and (3) retraining the oncology staff on the new procedures.

>>> dante.huntsman@inl.gov 05/20/05 12:37PM >>>

We need additional information to complete the NMED record identified below. To promptly complete the NMED record, we request a reply at your earliest convenience, but no later than 60 days from the date of this request.

NMED Item No.: 050143
State Event No.:
Licensee/Reporting Party: SAINT JOHNS MERCY MEDICAL CENTER
License Number: 24-00794-03
Event Date: 3/9/2005

ADDITIONAL INFORMATION REQUESTED

What corrective action(s) were taken by the licensee to prevent a recurrence?

Thank you for your help,

Dante Huntsman
NMED Project
dhun@inel.gov