

DIAGNOSTIC RADIOLOGY

JOHN R. LIONBERGER, M.D.
DALE B. PARSHALL, M.D.
WALLACE S. TIRMAN, M.D.
JOSEPH L. WIND, M.D.
DONALD S. CHAMBERLAIN, M.D.
FREDERICK K. DEAN, M.D.
JAMES L. GRAINGER, M.D.
ROMSEY W. ASHTON, M.D.
JAMES C. FIELD, M.D.

RADIOLOGY INC.

JEFFERSON MEDICAL ARTS BUILDING
919 EAST JEFFERSON BOULEVARD, SUITE 207
SOUTH BEND, INDIANA 46622
(219) 288-4486

February 12, 1980

RADIATION ONCOLOGY

FRANK D. PAIRITZ, M.D.
EMMANUEL SANDOU, M.D.
DENNIS JUSTICE, PH.D. PHYSICIST
SOUTH BEND MEMORIAL HOSPITAL
(219) 284-7241
ELKHART GENERAL HOSPITAL
(219) 294-4211
PLYMOUTH PARKVIEW HOSPITAL
(219) 946-3181
MEMORIAL MEDICAL OFFICE BLDG.
(219) 242-1491

Mr. James G. Keppler
Director, United States
Nuclear Regulatory Commission
Region III
799 Roosevelt Road
Glen Ellyn, Illinois 60137

LICENSE NUMBER 13-00791-03
LICENSE NUMBER 13-00791-08

Dear Sir:

We are in receipt of your letter dated January 30, 1980. This was received by Dr. Grainger on February 6, 1980. Our response will consist of two parts. The first will be a direct response to each of the items of noncompliance outlined in your appendix A and recently discussed at the enforcement meeting at Memorial Hospital on January 15, 1980. The second part consists of a description of the plan of action taken to improve the effectiveness of our management control over present and future licensed activities so that there will be no recurrence of similar items of noncompliance.

Items 1, 2 and 3 in Appendix A refer to the same incident. The exposure in question was investigated at the time the results were received. The investigation showed no accidents, no over-exposures or change in receipt of regularly used materials. The Indiana State Board of Health was notified that the over-exposure would be deleted. R.S. Landauer was notified by telephone. The individual involved was notified verbally at the time and has subsequently been notified in writing. New management control will alleviate this problem in the future.

Compliance with Article IV in Appendix A has now been accomplished. Materials are being returned to Memorial Hospital each night from Elkhart General Hospital and Parkview Hospital. Institutional licenses being applied for at this time will not make this necessary in the future.

Article V in Appendix A relating to license condition #17 was not accomplished because of problems resulting from lack of staffing. We were in compliance for 1979 and 1980. New management controls have been instituted which will help eliminate this problem. New license requirements will only require annual calibration.

Item #6 also refers to license condition #17. New license requirements will require weekly checks and new management controls have been instituted which will keep closer checks on the departments to assure compliance.

Item #7 refers to license condition #12. F. D. Pairitz, M.D. will be included on the new license approved for group IV materials. More careful scrutiny of the license requirements and management control changes will see the problems of this sort are taken care of in the future.

To comply with item #8, syringe shields have been ordered and are now being used at Parkview Hospital.

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To comply with item #9, social security numbers and birth dates have been sent to R.S.Landauer and they have been informed in writing to include that information on the film badge reports. The information is to be included by March if not on the February reports.

In reference to item #10 in the Appendix A: records will be kept in a more easily understood form for review. New management controls will make proper records a necessity.

Item #11, Appendix A: Radioactive material labels are now defaced before being disposed of.

Item #12, Appendix A: The supervisory technologist was on vacation during the period in question. Staff technologists failed to maintain surveys. New control systems will assure that all individuals become aware of the requirements that need to be performed.

Item #13, Appendix A: "Caution Radioactive Material" is now in place on scan rooms.

Item #14, Appendix A: Leak tests have been performed. New controls will assure performance of required testing every six months.

Item #15, Appendix A: Requests for ammendment submitted on January 17, 1980 to add Dr. Sandou to the therapy license.

Item #16, Appendix A: Lack of staff made it difficult to meet the requirement. New staff has been hired and we are currently in compliance.

Item #17, Appendix A: A dedicated calibration standard chamber has been purchased and the calibration can now be accomplished without removing the field instrument from the department. An ammendment for biannual calibration was requested on January 18, 1980.

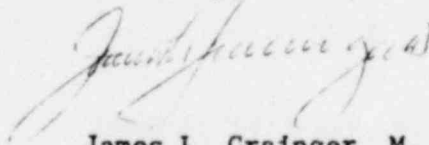
Item #18, Appendix A: A report was submitted within thirty days of acceptance and initiation of treatment with the new unit but not within thirty days of installation. The N.R.C. now has a report and probably had it prior to January 15, 1980. This particular point created some discussion at our enforcement meeting on January 15, 1980. It was our impression that a report submitted within thirty days of acceptance of the piece of equipment met N.R.C. requirements.

Pursuant to our inspection by the N.R.C. on December 17 and 18, 1979 and our enforcement meeting on January 15, 1980, we have done two major things. First we are now in compliance with the articles outlined in Appendix A of your recent letter. Secondly, we have taken a close look at our management control system and have made some changes in it.

To improve our management control system, we first of all have become considerably more familiar with the N.R.C. regulations and guide-lines. We have applied for institutional licenses at South Bend Memorial Hospital, Elkhart General Hospital and Parkview Hospital in Plymouth, Indiana. We have instituted a service calendar so that required inspections are done at the required times. We have improved our book-keeping system so that when these inspections are done they are documented clearly.

We hope that the above statements satisfy the N.R.C. requirements with regard to this problem. We appreciate the cooperation of the N.R.C. in helping us solve these problems and also in applying for the new institutional licenses.

Sincerely,

A handwritten signature in cursive script, appearing to read "James L. Grainger".

James L. Grainger, M. D.
Wallace S. Tirman, M. D.