

UNITED STATES NUCLEAR REGULATORY COMMISSION REGION I 631 PARK AVENUE KING OF PRUSSIA, PENNSYLVANIA 19406

Docket No. 70-1224

JAN 2 3 1979

Teleflex Incorporated ATTN: Mr. Robert Britchard Product Sales Manager Church Road P. O. Box 218 North Wales, Pennsylvania 19454

Gentlemen:

Subject: Survey Questionnaire

This refers to your Survey Questionnaire, received by this office on December 4, 1978.

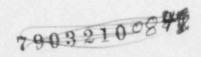
Thank you for informing us of the actions documented in your response to this questionnaire. These actions will be examined during a subsequent inspection of your licensed program.

Your cooperation with us is appreciated.

Sincerely,

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Robert O. McClintock, Chief Materials Radiological Protection Section



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In accordance with GAO regulations, 4 CFR Part 10, Section 10.3(b)(3), and the Federal Reports Act, 44 U.S.C. 3512, this survey questionnaire	YES	NO	NA .
Licensee Name: TELEFLEY INC License No. SNM1164 B. Do you have a system of management controls assure that users of licensed material and and possession limits are as authorized by license?	uses		□.
Address: <u>CHORCH RD</u> <u>PC ROX 215</u> <u>NORTH WALES, PA A454</u> <u>CHORCH RD</u> <u>10.</u> Are all individuals using licensed material frequenting areas where licensed material instructed in radiation safety, applicable regulations, facility procedures and license conditions?	NRC		đ
Telephone No. <u>215-699-4861</u> 11. Do you provide personnel monitoring devices individuals involved in your licensed activ	for ities?		I
Responsible individual or Radiation Safety Officer: J.E. BARLOW Mark an X for your answer in the appropriate box. YES NO NA 12. Have there been any radiation exposures to individuals in excess of the limits specif 10 CFR Par' 20, Section 20.101?	ied in		
 Have you possessed or used licensed material under your NRC license? If answer is no, return the form with no further response. 13. Are rooms used or s uposted in accordance with applicable (C regulations? 			I
 Have any changes been made in your facilities or equipment from that described in your application for license or most recent application for license amendment? 14. Do you conduct routine radiation and contain surveys? 	mination		ġ.
 3. Have any changes been made in the use or quantities of licensed material from that authorized by your If the second seco	ation		7
license? 16. Are your present radiation survey, detecti counting instruments different from that		V	
transfers of licensed material?			1
5. Do you dispose of waste licensed material by at intervals of one year or less?			<u> </u>
6. Is licensed material secured to prevent unauthorized access or removal? 18. Do you test your sealed sources for leakag required intervals?	e at the		M
 7. Has there been any loss or theft of licensed material? 19. Do you maintain records of tests for leaka sealed sources? 	ge of		Ø,
 8. Have there been any incidents or unusual occurrences as a result of your licensed activities? Examples of radioactivity. 20. Have any of your tests for leakage of seal sources resulted in removable contamination the limit specified in your license and/or regulations? 	in above		র্ত
Fission chambers 21. Are the documents described in 10 CFR Part Section 19.11, posted as required by that	19, part?	Ø	

		YES	NO	NA
auth	er the following questions if your license porizes medical uses of licensed material. not applicable, mark NA.			
22.	Do you have procedures and methods of control for identifying the isotope, compound, quantity and resulting dose before a medical administration?			Í
23.	Have there been any incidents of "misadministration in the past two (2) years?	ons"		I
	ase record the amount of time spent completing this stionnaire.		15.	MIM
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Please feel free to add any comments you may wish to make.

UNITED STATES NUCLEAR REGULATORY COMMISSION

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OFFICIAL BUSINESS PENALTY FOR PRIVATE USE, \$300



Signature and title



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