



Virginia Baptist Hospital

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Nov 6, 1989

Nuclear Regulatory Commission
ATTN: Document Control Desk
Washington, D.C. 20555

Gentlemen:

SUBJ: EXPLANATION OF CITED VIOLATIONS

Ref: (1) NRC Inspection Report No. 45-10542-01/89-01
(2) Docket No. 030-03343
(3) License No. 45-10542-01

This is in response to your letter dated 04 October 1989 concerning certain activities that appear to violate NRC requirements. These activities were observed by Mr. E. Cline during his routine inspection on 13 September 1989 at this facility.

During Mr. Cline's inspection conducted on the above mentioned date, the following violations of NRC requirements were identified:

- A. 10 CFR 35.22 (b) (6) requires the Radiation Safety Committee to review annually with the assistance of the Radiation Safety Officer, the radiation safety program.

Contrary to the above, between April 1, 1987 and September 19, 1989, the Radiation Safety Committee failed to review annually the radiation safety program.

Reply to a notice of violation: - ACKNOWLEDGED -

Our radiation safety program was reviewed by the Radiation Safety Officer. This was an agenda item at the past three quarterly meetings. We have failed to cover this item during each of these meetings due to time constraints. We are presently utilizing the services of a contract physicist who has reviewed our safety program and will present it for review at our next meeting on 9 November 1989. This is a first violation of this type and we shall ensure this program is reviewed annually as required in the future. Compliance NLT 9 November 1989.

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B. 10 CFR 35.22 (a) (1) requires the membership of the Radiation Safety Committee to consist of at least three individuals and must include a representative of the nursing service.

10 CFR 35.22 (a) (4) (iii) requires the minutes of each Radiation Safety Committee meeting to include the members absent.

Contrary to the above, between May 27, 1987 and May 11, 1989, the representative of the nursing service was not present for nine (9) meetings of the Radiation Safety Committee. Also, the representative of the nursing service was not documented as absent on the minutes of these Radiation Safety Committee meetings. Compliance NLT 9 November 1989.

Reply to a notice of violation: - ACKNOWLEDGED -

Our policy has been modified to include an alternate representative from nursing service. This will ensure representation at all meetings.

We were not aware of the requirements for documentation of members absent from the meetings. This practice has been discussed with our recording secretary and a format specified that will list those present in one column and those absent in an adjacent column. Compliance NLT 9 November 1989.

C. 10 CFR 35.50 (b) (4) requires that the licensee to test each dose calibrator for geometry dependence upon installation over the range of volumes and volume configurations for which it will be used.

Contrary to the above, between April 1, 1987 and September 12, 1989, the Radx Model Assayer No. 1 dose calibrator was not tested for geometry dependence.

Reply to a notice of violation: - ACKNOWLEDGED -

Our dose calibrator has been in constant service since 1980. Our supervising technologist assures us the testing was performed at the time of installation, however, we have been unable to locate the documentation at this time. Our dose calibrator was recently shipped out for service and returned just prior to the inspection. We have performed the required testing since the inspection. We are not satisfied with the performance and will either correct the problem on site, return it for further service or replace it if the problem is not resolved satisfactorily. Compliance NLT 30 November 1989.

- D. 10 CFR 35.51 (c) requires the licensee to check each survey instrument for proper operation with a dedicated check source each day of use.

Contrary to the above, between April 1, 1987 and September 13, 1989, survey instruments were not checked for proper operation using a dedicated check source each day of use.

Reply to a notice of violation: - ACKNOWLEDGED -

Following our inspection individual check sources were purchased for each instrument and affixed permanently as appropriate. Other instruments are checked utilizing a Cs-137 source. Our policy now calls for daily checking of instruments prior to daily use with these sources. We were not aware of the requirement for these daily checks. Our Radiation Safety Officer routinely checked these instruments quarterly while our technologist checked them weekly. We are now in full compliance with the regulation.

- E. License Condition 19 requires the licensee to possess and use licensed material in accordance with statements, representations, and procedures contained in ALARA program dated February 26, 1982, and the application received June 20, 1984.

- (1) Item 14 of the licensee's application requires the licensee to wipe test the external surface of the final source container upon receipt of radioactive material.

Contrary to the above, between June 26, 1989 and September 11, 1989, wipe tests of the external surface of DuPont molybdenum-99/technetium-99 m generators were not performed.

- (2) Item 10 of the licensee's application requires the licensee to perform daily checks of the dose calibrator constancy by assaying two reference sources at the appropriate instrument settings.

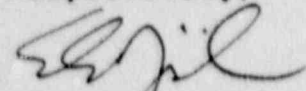
Contrary to the above, between November 15, 1988 and September 13, 1989, daily checks of a Radx Model Assayer No. 1 dose calibrator were not performed by assaying two reference sources. We are presently in full compliance with the regulation.

Reply to a notice of violation: - ACKNOWLEDGED -

Until November 15, 1988 it had been our practice to perform those tests defined in Item 10 and 14 of our license. This practice was discontinued upon the advice of our former physicist since it was not required by the C.F.R. He was apparently not aware that statements, representations and procedures contained the ALARA program and our license must be adhered to regardless of the C.F.R. We have resumed our former practices with the appropriate documentation and will continue to do so until our current license is amended. We are presently in full compliance with the regulation.

We will supply additional information or support documentation as needed towards resolution of these violations. We are satisfied we are presently in full compliance or will be in the near future. Please contact me if I may be of further assistance.

Respectively,



Thomas C. Jividen
President

cc: Regional Administrator, Region II