

DCD/DCB

Guernsey Memorial Hospital
Cambridge, Ohio 43725

1341 NORTH CLARK STREET
P. O. BOX 610
PHONE 614/439-3561

H. DALE GOTSCHALL
PRESIDENT
AND
CHIEF EXECUTIVE OFFICER

September 6, 1989

B.S. Mallett, Ph.D., Chief
Nuclear Material Safety Branch
Nuclear Regulatory Commission
Region III
799 Roosevelt Road
Glen Ellyn, Illinois 60137

RE: License No. 34-16588-01

Dear Dr. Mallett:

This is in response to your letter of August 18, 1989 requesting our plan of corrective action to the five Level IV violations found on the routine safety inspection by Mr. D.R. Gibbons on July 20, 1989.

1.0

This violation occurred due to employment of a physician who planned to be a full-time member of Guernsey Radiology Associates. The procedure for adding this physician to our hospital license and necessary requirements were discussed with the physician and he was given the required application forms. We were lead to believe the application was "being processed" when, in fact, such was not the case. This physician subsequently decided to leave this community.

To prevent recurrence of this violation we issued on August 23, 1989 departmental instructions to prohibit physicians from using licensed material without supervision of a named (authorized) user except as permitted under our License Condition 12. This prohibition will be issued both verbally and in writing to each new physician, either temporary or permanent, at the Radiology Department of Guernsey Memorial Hospital.

2.0 - 4.0

As Administrative Director at Guernsey Memorial Hospital with responsibility for Nuclear Medicine I sent a memo on August 28, 1989 to Mr. William Walker, RSO to insure that all monitors are performed on their required intervals. Included with this directive is a policy on how infractions of the regulations will be handled. You will find a copy of this memo enclosed along with

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the monthly summary check-list report form.

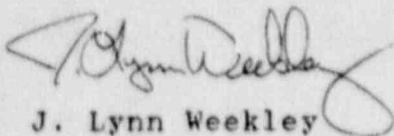
5.0

On August 31, 1989 we placed a reminder file in our Nuclear Medicine Information System that will flag our attention 30 days prior to the actual calibration date. It will reappear daily until the flag has been checked off by the RSO.

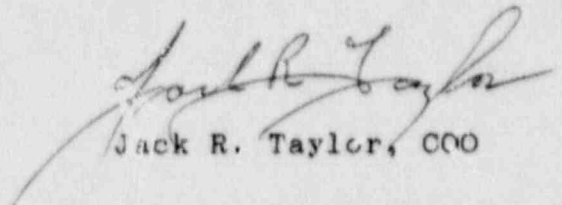
We have discussed the calibrations with our consulting firm in regards to their responsibilities in calibrating our survey instruments on a timely and required basis. We feel there was a break down in communications with regards to this instrument. Our consultants are now to review quarterly all instrument calibrations. They will proceed with calibrating any instrument in need of calibration.

We feel confident that through the above efforts improvement will be realized in the effectiveness of our management control. These steps shall help assure that identified problems are corrected in a prompt manner.

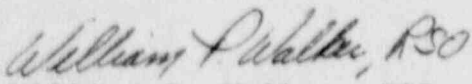
Sincerely,



J. Lynn Weekley
Administrative Director

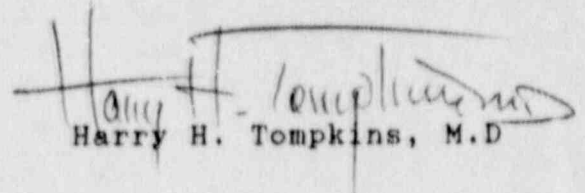


Jack R. Taylor, COO



William P. Walker, RSO

William P. Walker, RSO



Harry H. Tompkins, M.D

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TO: BILL WALKER, RSO
FROM: J. LYNN WEEKLEY *JLW*
ADMINISTRATIVE DIRECTOR
DATE: AUGUST 28, 1989
SUBJECT: NRC REQUIREMENTS

In response to the NRC's letter of August 18, 1989 I must ask you to develop a daily check list to insure that all monitors are performed.

To assure managements control of this radiation safety program I want this information forwarded to Mr. Jack Taylor, COO, Mrs. Nancy Burns, Risk Management Coordinator as well as myself on a monthly basis.

In addition, please add the following policy to your manual:

The RSO will monitor and document, on a daily basis, NRC regulations to insure proper documentation. A report of his/her findings will be sent to Mr. Jack Taylor, COO, Mrs. Nancy Burns, Risk Management Coordinator, and Mr. J. Lynn Weekley, Administrative Director on a monthly basis.

Any NRC infraction will be handled as follows:

- 1st. infraction - written warning
- 2nd. infraction - disciplinary leave of
three days (without pay)
- 3rd. infraction - termination of employment

The interval between each infraction will be taken into consideration and a determination will be made as to which disciplinary action will be taken.

Each new employee shall read and sign off on this policy.

We cannot allow our patients to be deprived of this needed service by neglecting to document our surveys.

GUERNSEY MEMORIAL HOSPITAL

NUCLEAR MEDICINE

QUALITY ASSURANCE

MONTH _____

YEAR _____

MONTHLY SUMMARY OF NRC REGULATIONS

BY: WILLIAM P. WALKER RSO

NRC regulations are monitored on a daily basis by Mr. Walker, RSO. To assure management's control of the radiation safety program, Mr. Walker will submit this form to Mr. Jack Taylor, Chief Operating Officer; Mr. Lynn Weekley, Administrative Director; and Mrs. Nancy Burns, Risk Management Coordinator on a monthly basis. Mr. Walker will report on a quarterly basis to the radiation safety committee.

Description of monitor	RSO Approval	Comments
Daily floods on camera's		
Daily package surveys and wipe tests		
Daily calibration of well counter		
Daily Constancy check of dose calibrator		
Daily molybdenum-99 concentration test		
Daily survey's of elution, prep, inj. areas		
Daily logging of kit preparations		
Daily logging radiopharmaceutical usage		
Daily Tc-99m elution records		
Weekly area survey's of Nuc. Med. Dept.		
Weekly wipe test of Nuc. Med. Dept.		
Monthly review of ring & whole body badges		

Identification of a Problem area by RSO:

Management's response: