NRC Form 591 (12-81) 10 CFR 2:201

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DED DES

SAFETY INSPECTION

LICENSEE		2. REGIONAL OFFIC	.	Ken works
ST. MECHAEL'S HOSPETAL DEPARTMENT OF MUCLEUR MEDICENE GOO ELLENDES AVENUE STEVENS POENT, MIWE 54481		U.S. NUCLEAR REGULATORY COMMISSION REGION III 799 ROOSEVELT ROAD GLEN ELLYN, IL 60137		
DOCKET NUMBER(S)	4. LICENSE NUMBERIS		B. DATE OF INSPECTION	
030-03480	48-12270	2-01	15 November	1989
e inspection was an examination of the actingulatory Commissions (NRC) rules and regular representative records, interviews, with permission of this inspection, not also the inspection also verified the steps you	aletions and the conditions of yoursennel, and observations by the violations were observed.	our license. The inspect inspector. The finding	ion consisted of selective examinations are as a result of this inspection are as	ons of procedures follows:
those actions at this time. 3. During this inspection certain of your a THIS IS A NOTICE OF VIOLATION	activities, as checked below, were	e in violation of NRC re	aguirements.	
Of 8			was not properly posted to in	
B, Containers located in				were not properly
labeled to indicate the presence of	radioactive material. 10 CFR 20	0.203(f)(1), or (f)(2).		
			of sealed sources were not pe. 5	ormed at the proper
frequencies. 10 OFR		Licens	e Condition Number	
D. Records of		or License Condition	Numberwere not p	roperly maintained
E. Documents were not properly post				
F. Reports or notifications of				made in accordance
with 10 CFR		or License Condition	Number	
Пн				
8912040026 REG3 LIC30 48-12272-0	891115 — 1 PDC			
I have by state that with le 30 days the action	ns described by me to the inspec	tor will be taken to cor	rect the violations identified in the	tems checked abov
This statement of corrective actions is made the NRC.	s in accordance with the requirer	ments of 10 CFR 2.201		