

DCD/DCB

NOV 9 1989

Flint Osteopathic Hospital
ATTN: Tim Washburn
Radiology Supervisor
3921 Beecher Road
Flint, MI 48502

License No. 21-04074-01

Gentlemen:

As a result of the inspection conducted on November 9, 1989, a NRC Form 591, SAFETY INSPECTION, is issued. The enclosed form sets forth the violation noted. Please acknowledge receipt of this form by signing and dating in the appropriate space on all copies. You are requested to retain the original and return four signed and dated copies to this office within ten days.

I wish to express my appreciation for the cooperation extended to me during the inspection.

Sincerely,

Sam Mulay
Radiation Specialist

Enclosure: NRC Form 591

RIII *[Signature]* RIII *[Signature]*
Mulay/gd Caniano

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