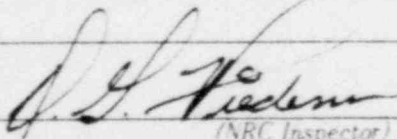


INSPECTION FINDINGS AND LICENSEE ACKNOWLEDGMENT

1. LICENSEE Grim-Smith Hospital and Clinic ATTN: Mr. Ron Lewis, Administrator 112 East Patterson Avenue Kirksville, MO 63501		2. REGIONAL OFFICE U. S. Nuclear Regulatory Commission Region III 799 Roosevelt Road Glen Ellyn, IL 60137	
3. DOCKET NUMBER(S) 070-02754	4. LICENSE NUMBER(S) SNM-1796	5. DATE OF INSPECTION March 4, 1981	
6. INSPECTION FINDINGS The inspection was an examination of the activities conducted under your license as they relate to radiation safety and to compliance with the Commission's rules and regulations and the conditions of your license. The inspection consisted of selective examinations of procedures and representative records, interviews with personnel, and observations by the inspector. The findings as a result of this inspection are as follows:			
<input checked="" type="checkbox"/> No items of noncompliance or unsafe conditions were found.			
The following items of noncompliance related to records, signs, and labels were found:			
<input type="checkbox"/> A. Rooms or areas were not properly posted to indicate the presence of a RADIATION AREA. 10 CFR 20.203(b) or 34.42			
<input type="checkbox"/> B. Rooms or areas were not properly posted to indicate the presence of a HIGH RADIATION AREA. 10 CFR 20.203(c) (1) or 34.42			
<input type="checkbox"/> C. Rooms or areas were not properly posted to indicate the presence of an AIRBORNE RADIOACTIVITY AREA. 10 CFR 20.203(d)			
<input type="checkbox"/> D. Rooms or areas were not properly posted to indicate the presence of RADIOACTIVE MATERIAL. 10 CFR 20.203(e)			
<input type="checkbox"/> E. Containers were not properly labeled to indicate the presence of RADIOACTIVE MATERIAL. 10 CFR 20.203(f) (1) or (f) (2)			
<input type="checkbox"/> F. A current copy of 10 CFR 20, a copy of the license, or a copy of the operating procedures was not properly posted or made available. 10 CFR 20.206(b)			
<input type="checkbox"/> G. Form NRC-3 was not properly posted. 10 CFR 20.206(c)			
<input type="checkbox"/> H. Records of the radiation exposure of individuals were not properly maintained. 10 CFR 20.401(a) or 34.33(b)			
<input type="checkbox"/> I. Records of surveys or disposals were not properly maintained. 10 CFR 20.401(b) or 34.43(d)			
<input type="checkbox"/> J. Records of receipt, transfer, disposal, export or inventory of licensed material were not properly maintained. 10 CFR 30.51, 40.61 or 70.51			
<input type="checkbox"/> K. Records of leak tests were not maintained as prescribed in your license, or 10 CFR 34.25(c)			
<input type="checkbox"/> L. Records of inventories were not maintained. 10 CFR 34.26			
<input type="checkbox"/> M. Utilization logs were not maintained. 10 CFR 34.27			
<input type="checkbox"/> N. Records of radiation survey instrument calibration were not maintained. 10 CFR 34.24			
<input type="checkbox"/> O. Records of teletherapy electrical interlock tests were not maintained as prescribed in your license.			
<input type="checkbox"/> P. Other _____			
 _____ (NRC Inspector)			
7. The NRC Inspector has explained and I understand the items of noncompliance listed above. The items of noncompliance will be corrected within the next 30 days.			
_____ (Date)		_____ (Licensee Representative - Title or Position)	

ORIGINAL TO LICENSEE