

Hartford Hospital

April 2, 1981

Mr. John D. Kinneman
Chief Materials Radiological Protection Section
USNRC Region I Office
631 Park Avenue
King of Prussia, PA 19406

RE: License Nos. 06-00253-04
SNM-1454
Docket Nos. 30-1239
70-1494
Inspection No. 81-01

Dear Mr. Kinneman:

The following actions have been taken to correct the deficiencies that Mr. Phillip Jerman identified during his February 25, 1981 routine inspection.

ITEM 1. DOSE CALIBRATOR CALIBRATION

Instrument linearity calibration was being performed semi-annually instead of quarterly.

Corrective steps taken:

The dose calibrator was sent to the manufacturer for servicing, and, upon receipt of the instrument all appropriate tests will be conducted and scheduled accordingly. In the meantime, an identical instrument from the Squibb Corporation (Model CRC-17) has been loaned to the department.

Corrective steps to avoid future noncompliance:

- A) A procedure manual detailing these and all other requirements and their periodicity has been prepared for use in the department.
- B) Periodic inspections by the Radiation Safety Office will be conducted to insure compliance.

Date when full compliance will be achieved:

No later than two-weeks after receipt of the dose calibrator; expected arrival date is April 27, 1981.

ITEM 2. RECEIPT OF RADIOACTIVE MATERIALS SHIPMENT

Package opening procedure and receipt form usage were not being followed.

Corrective steps taken:

These requirements were reviewed and discussed with the department personnel. Procedures for the opening of radioactive materials packages and the generation of a receipt report, to be kept on file, have been performed as of March 25, 1981.

Corrective steps to avoid future noncompliance:

- A) See Item 1, A.
- B) Periodic review of these procedures and inspection by the Radiation Safety Office have been implemented.

Date when full compliance will be achieved: March 25, 1981.

ITEM 3. DAILY G-M METER

Failure to survey elution, preparation and injection areas on a daily basis.

Corrective steps taken:

These requirements were reviewed and discussed with the department personnel. Daily surveys have been performed as of March 16, 1981.

Corrective steps to avoid future noncompliance:

- A) See Item 1, A.
- B) See Item 2, B.

Date when full compliance will be achieved: March 16, 1981.

ITEM 4. MONTHLY LABORATORY SURVEYS

Corrective steps taken:

These requirements were reviewed and discussed with the department director. A minimum of one survey per month will be conducted as of April 4, 1981.

Corrective steps to avoid future noncompliance:

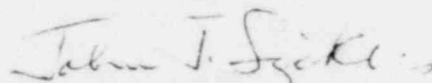
- A) See Item 1, A.
- B) See Item 2, B.

Date when full compliance will be achieved: Commencing April 4, 1981.

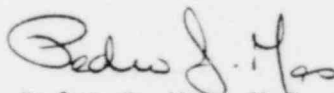
We believe the corrective action described herein will adequately remedy these deficiencies and meet the approval of your office.

Hartford Hospital regards the establishment of a sound radiological safety program as an essential component to the health and well-being of its personnel. These inspections serve to further improve the hospital's working environment and your agency's efforts are appreciated.

Sincerely,



John J. Sziklas, M.D.
Chairman Nuclear Medicine Committee



Pedro J. Mas, M.S.
Health Physicist

PJM/mvm