NRC Form 991			U.S. NUCLEAR REGULATORY COMMISSION
(12-81) 10 CFR 2.201 4	SAFETY INS	PECTION	_ /
			LADIDE B
1. LICENSEE	2.1	REGIONAL OFFICE	the state of the s
St. Catherine's Hospi	tal		R REGULATORY COMMISSION
Radiology Department REGION III 799 ROOSEVELT ROAD			I DAIN
3556 Seventh Avenue Kenosha, Wisconsin	53140	GLEN ELLYN,	
3. DOCKET NUMBER(S)	4. LICENSE NUMBER(S)		B. DATE OF INSPECTION
030-00537	48-01670-02	2	October 4, 1990
Licensee			
The inspection was an examination of the activities Regulatory Commissions (NRC) rules and regulation and representative records, interviews, with person 1. Within the scope of this inspection, no viole	ons and the conditions of your lie one), and observations by the insp	pense. The inspection of	onsisted of selective examinations of procedures
2. The inspector also verified the steps you have those actions at this time.	ve taken to correct the violations	identified during the la	st inspection. We have no further questions on
3. During this inspection certain of your activity THIS IS A NOTICE OF VIOLATION which			
			was not properly posted to indicate the presence
			10 CFR 20.203(b), (c), (d), (e) or 30.42.
B. Containers located in	active material, 10 CFR 20 2030	f)(1), or (f)(2)	were not properly
frequencies. 10 CFR		CONTRACTOR OF THE PROPERTY OF	sealed sources were not performed at the proper
requercies. To CFR	\$100 PM 100 PM 1	License Cond	ittion Number
D. Records of			were not properly mainteined.
10 CFR	or Li	cense Condition Number	PF
E. Documents were not properly posted or	otherwise made available. 10 CF	R 19.11.	
F. Reports or notifications of		****	were not made in accordance
with 10 CFR	or Li	cense Condition Number	pr
On November 2. 3 AF	itor checks were not	properly main	rtained r 2 and December 29, 1989
April 3, 1990. 10 CFF		And the second of the second o	A WIN ACCESSED A ST. 1907
P01031020 REG3 LIC3 48-01670-	02 901004 80 -02 PDC		
I hereby state that within 30 days the actions described	ribed by me to the inspector will i	taken to correct the	violations identified in the items checked above.
This statement of corrective actions is made in according NRC.	prosince with the requirements of	10 CFR 2.201. No fuer	ther response will be submitted unless required by
001			
lester my yland	111-4-91	A. R. Shell	ma 110.4.90
STONATURE - LICENSEE	DATE	SIGNATURE .	NECT INSPECTOR DATE
			IEO7