

INSPECTION FINDINGS AND LICENSEE ACKNOWLEDGMENT

1. LICENSEE LAWRENCE CAPITAL HARRIS, JENNIFER DEPT. 14517 DEWITT AVE. LAWRENCE ILL 60137		2. REGIONAL OFFICE U. S. Nuclear Regulatory Commission Office of Inspection & Enforcement Region III 799 Roosevelt Road Glen Ellyn, Illinois 60137	
3. DOCKET NUMBER(S)	4. LICENSE NUMBER(S) 34-01177-01	5. DATE OF INSPECTION 1-27-76	

LEA  
riority  
IV

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:

No items of noncompliance or unsafe conditions were found.

The following items of noncompliance related to records, signs, and labels were found:

- A. Rooms or areas were not properly posted to indicate the presence of a RADIATION AREA. 10 CFR 20.203(b) or 34.42
- 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
- C. Rooms or areas were not properly posted to indicate the presence of an AIRBORNE RADIOACTIVITY AREA. 10 CFR 20.203(d)
- D. Rooms or areas were not properly posted to indicate the presence of RADIOACTIVE MATERIAL. 10 CFR 20.203(e)
- E. Containers were not properly labeled to indicate the presence of RADIOACTIVE MATERIAL. 10 CFR 20.203(f) (1) or (f) (2)
- 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)
- G. Form AEC-3 was not properly posted. 10 CFR 20.206(c)
- H. Records of the radiation exposure of individuals were not properly maintained. 10 CFR 20.401(a) or 34.33(b)
- I. Records of surveys or disposals were not properly maintained. 10 CFR 20.401(b) or 34.43(d)
- 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
- K. Records of leak tests were not maintained as prescribed in your license, or 10 CFR 34.25(c)
- L. Records of inventories were not maintained. 10 CFR 34.26
- M. Utilization logs were not maintained. 10 CFR 34.27
- N. Records of radiation survey instrument calibration were not maintained. 10 CFR 34.24
- O. Records of teletherapy electrical interlock tests were not maintained as prescribed in your license.
- P. Other \_\_\_\_\_

\_\_\_\_\_  
(AEC Compliance Inspector)

7. The AEC Compliance Inspector has explained and I understand the items of noncompliance listed above. The items of noncompliance will be corrected within the next 30 days.

A48

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Licensee Representative - Title or Position)

Licensee and Address:

Lakewood Hospital

Facility:

Type of Licensee:

Medical

Location:

Lakewood, Ohio

Type of Inspection:

Announced Reinspection

Date(s) of Inspection:

10/27/76

Date(s) of Previous Inspection:

9/17/73

License No.

Amend. No. & Date

Report No.

Category

Priority

34-01197-01

#23, 7/10/75

7601

G

IV

(03002671)

Principal Inspector:

Lasuk

Other Accompanying Personnel:

None

Accompanying Inspector(s):

None

Reviewed By:

Joseph W. ...  
Chief of MRPS

Title:

Findings: 591 or Ltr:

591

Compliance: Yes

No

No. of Violations:

1

Recommended Reinspection Date:

10/79

No. of Safety Items:

0

Proprietary Information:

None

Licensee Participants:

Dr. William J. Fayen, M.D. and Mrs. Mary Frick

Management Summary:

Individual(s) (including title) with whom inspection was summarized:

Dr. W. J. Fayen - Director of Nuclear Medicine Dept.

Violations & Safety Items Noted:

Regulation

Brief Statement of Problem

Paragraph of Report  
Where Discussed

10CFR 20.401(b)

No record of waste survey results.

22

13. Inspection Summary (Including violations and safety items, and status of previously reported violations and safety items, etc.)

A 591 with one item of noncompliance regarding records was issued for the previous inspection on 9/17/73.

A 591 with one item of noncompliance regarding records was issued at the conclusion of this inspection (see #22).

14. Summary of Licensed Program (Kind of program, number of people, rate of use or quantities on hand, places and frequency of use, type, quantity and use as authorized, etc.)

Nuclear Medicine program—performed 2,241 procedures in 1974 and 2,480 in 1975; these procedures in 1976 have increased by ~10% over 1975. The 1975 total included 358 thyroid uptakes, 829 brain scans, 460 liver scans, 579 lung scans, & 176 bone scans; all uses are as authorized. Licensee's only standing order is 150 mCi/day of <sup>99m</sup>Tc pertechnetate which they receive five days/week from Isotope Industries, Inc in Brook Park, Ohio. Other BPM on hand on (see other side)

15. Organization and Administration (Management organization, RSO, authorities and responsibilities, authorized users, qualifications, supervision, etc.)

Mr. Duane Horning — Hospital Administrator

William J. Fayen, M.D. — Director of Nuclear Medicine Dept.

William R. Pudvan, M.D. — Radiologist

Wilfrid M. Gill, M.D. — Radiologist

Ms. Mary Frick (ARRT) — Chief Tech in Nuclear Med.

Ms. Maureen North — Nucl. Med Tech

Nuclear Medicine Associates (Cleveland) — Consultant as of 10/1/76  
(see other side)

16. Facilities (Use facilities, storage facilities, control of access, control devices and alarms, etc.)

The Nuclear Med Dept. is on the first floor of this 360-bed, 4 story hospital. The Dept layout is shown on the attached sketch. All doors are locked when unoccupied; keys are maintained by N.M. Dept personnel plus Security, Housekeeping and Head of Biometrics (i.e., EKG, Nucl. Med, & EEG).

17. Equipment (Devices utilizing licensed material, monitoring instrumentation, special equipment as glove boxes, hoods, handling tools, respirators, etc.)

Radiation Detection Equipment is shown on Application dated 10/17/72 plus one Anton Electronics Lab GM survey meter CDV-700, Ser #821 (0-50 mR/hr on 3 ranges). Delete Victoreen Survey Meter #2035 from list on the application.

Other equipment includes Pb brick shield, syringe shields, tongs tweezers, vial shields, small refrig.

18. Radiological Safety Procedures (Written operating and emergency procedures, availability of procedures, license and regs., training, Form NRC-3, etc.)

Written emergency procedures, the license, AEC-3 and notice stating where documents identified in 10CFR19.11 may be examined were posted on a Bulletin Board in the Hot Lab. Mrs Frick has been Tech in this Nucl Med program for 13 years. Mrs North received O-T-J training for 2 years and does not handle BPM unless Mrs Frick is present or one of the M.D.

19. Personnel Monitoring and Exposure to External Radiation (Type of monitoring, range of exposures, supplier, period worn, exposure history, etc.)

*Lundauer's ① body & ③ finger film badge service on monthly basis. NRC-5 equivalent information is maintained.*

*Exposure records reviewed for the period of 1973 thru 9/4/76.*

*Max exposures were Maureen North ① 950 mrem & ③ 4,810 mrem for 197*

*Annual exposures for 1973-75 were less than the above.*

20. Exposure of Employees to Airborne Radioactive Materials (Method of evaluation, type of samples, radioisotopes, records, bioassay, etc.)

*None*

21. Effluents to Unrestricted Areas (Types, source, measurements, flow rates, applicable MPC, analytical procedures, environmental samples, etc.)

*None*

22. Disposals (Methods, typical quantities, etc.)

(N/C)

Approx  $\frac{1}{2}$  Ft<sup>3</sup> of waste such as syringes, needles, gloves, Kleenex, etc is discarded to normal trash on weekly basis if the survey shows background level. However, contrary to 10CFR 20.401(b), no record is maintained of these survey results.

Decayed Tc-99m, in vials, is checked in dose calibrator & if nothing above bkgd, recorded as such in notebook before discarding vials to normal trash. Licensee's previous item of noncompliance was in regard (see other side)

23. Miscellaneous Surveys, Evaluations and Records (External radiation levels, contamination levels, leak tests, etc.)

Periodic surveys conducted in Nucl Med Dept with GM survey meter.

24. Special License Conditions

No problems identified regarding license conditions.

25. Posting and Labelling

All in accordance with 10 CFR 20.203

26. Independent Measurements (Type, results, comparison to licensee results, etc.)

Direct survey in Nucl Med Dept using Licensee's CDV-700 GM survey meter. Max reading at surface of cabinet door behind which was a box containing recently ~~do~~ used syringes - reading was 0.5 mR/hr.

27. Operations Observed

None

28. Incidents, Overexposures, Theft or Loss, Equipment Malfunction (Those not described elsewhere should be reported here.)

*None*

29. Other Information or Continuation from Previous Paragraphs

*The daily delivery of Tc-99m Pertechnetate is taken directly to the Nuclear Med Dept by the supplier (Mr. Markov of Isotope Industries, Inc) who is let into the Dept by Security personnel.*



Lead  
Brick--

Storage

HOT LAB

ACTIVE  
STORAGE

Stainless  
Stool  
Sink

Sink

Scanner

Scintillation  
Cameraa

Patient  
Interview

Storage: 2" x 4" x 6" lead bricks in storage base cabinet.

Well Counting  
&  
Uptakes

Attachment