



New
England
Memorial
Hospital

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Frank J. Perez, FACHE
President & Chief Executive Officer

December 20, 1993

U.S. Nuclear Regulatory Commission
Attn.: Document Control Desk
Washington, DC 20555

Docket No. 030-01881
License No. 20-06006-02

Gentlemen,

Thank you for the letter of December 8, 1993, regarding the recent inspection of New England Memorial Hospital.

As an overall corrective measure, I have delegated the Radiology Director, who has supervision over the Nuclear Medicine Program, to immediately institute a weekly review process of all surveys and affected violation notices. This review shall be signed off by her, the R.S.O. and the Chief of Nuclear Medicine. This process will continue over three months to bring into compliance the noted violations. The Radiation Safety Committee shall meet and discuss these items in their quarterly meetings.

The following are responses to the individual items.

ITEM A.

The inventory list of all sealed services is in place and recorded by the consultant physicist. The R.S.O. shall review the quarterly audit and sign off on this sealed source inventory. (The latest inventory sheet is enclosed.)

ITEM B.

The annual accuracy tests are part of the audit provided by the consultant physicist. The R.S.O. shall review the accuracy tests in the appropriate quarter and sign this document (the latest accuracy test is enclosed).

ITEM C.

Weekly surveys for removable contamination shall be provided using the NaI detector and multi-channel analyzer with upgraded software program. These

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surveys had been done but the data was suspect and the new program shall correct this. These surveys, especially, shall be reviewed weekly as described above by the Radiology Director, R.S.O. and the Chief of Nuclear Medicine.

ITEM D.

The dose calibrator quarterly testing for linearity shall be provided as required and specifically discussed as to compliance at each quarterly radiation safety committee meeting.


ITEM E.

The calculation for the Spilled Gas Clearance Time for ^{133}Xe was provided for the recent license renewal but not posted. A copy of this is enclosed.

These corrections are ongoing immediately and compliance by the staff shall be reviewed weekly for the next three months and then quarterly thereafter, and at the annual program review.

I trust these changes will bring the program into compliance. Please let me know if there is anything further you need.

Sincerely yours,



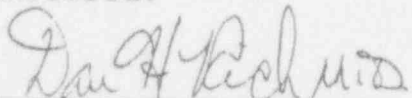
Frank J. Perez, President

Enclosures


- cc: 1) N.R.C. Region I, Regional Administrator
2) R.S.C. File
3) J. Bucci, Radiology Director
4) J.B. Boyd, CNMT, Chief of Nuclear Medicine
5) N. Gaeta, CHP

Information for NRC Inspection 11/16/93/;

1. RSO shall sign off on the quarterly audit by the consultant physicist. He shall review and sign off on all other records. The Chief Tech shall assure these are done, at least monthly.
2. CNMT is arranging files for easier access.
3. CNMT and consultant shall assure that wipes of all areas are done weekly.
4. Linearity of dose calibrator for period 12/92 thru 5/93 was actually done but data sheet missing. The technologist certifies that it was done and does not want to give values without actual numbers. The consultant physicist shall assure that these records are in order.
5. Spilled Gas Clearance Time (SGCT) date sheet is enclosed.
6. Sheets of sealed sources inventory and survey test results are enclosed. The annual dose calibrator accuracy sheet is enclosed.



Dan H. Rich, M.D.
Chief of Nuclear Medicine



Neil Gaeta
Radiation Physicist

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SPILLED GAS CLEARANCE TIME
(SGCT)

In the event of a needed evacuation, the clearance times of areas in Nuclear Medicine Department are as follows: (see attached)

Hot Lab (SGCT) = 18 minutes

Scan Room (SGCT) = 26.7 minutes (for restricted area concentration)
94.7 minutes (for unrestricted area concentration)

Neil A. Gaeta, CHP



