

SAFETY INSPECTION

1. LICENSEE <i>Medical College of Virginia Richmond, VA</i>		2. REGIONAL OFFICE REGION II U S NUCLEAR REGULATORY COMMISSION 101 MARIETTA STREET NW SUITE 2900 ATLANTA GA 30323	
3. DOCKET NUMBER(S) <i>030-00511</i>	4. LICENSE NUMBER(S) <i>45-00048-19</i>	5. DATE OF INSPECTION <i>2/22/93, 2/25/93</i>	

LICENSEE:
The inspection was an examination of the activities conducted under your license as they relate to radiation safety and to compliance with the Nuclear Regulatory Commission (NRC) 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:

- 1. Within the scope of this inspection, no violations were observed. *(see page 2)*
- 2. The inspector also verified the steps you have taken to correct the violations identified during the last inspection. We have no further questions on those actions at this time.
- 3. During this inspection certain of your activities, as described below or attached, were in violation of NRC requirements. This form is a **NOTICE OF VIOLATION**, which is required to be posted in accordance with 10 CFR 19.11.
 - A. _____ was not properly posted to indicate the presence of a _____ 10 CFR 20.203(b),(c),(d),(e) or 34.42.
 - B. _____ of sealed sources were not performed at the proper frequencies. 10 CFR _____ or License Condition Number _____.
 - C. Records of _____ were not properly maintained. 10 CFR _____ or License Condition Number _____.
 - D. Documents were not properly posted or otherwise made available. 10 CFR 19.11.
 - E. Reports or notification of _____ were not made in accordance with 10 CFR _____ or License Condition Number _____.
 - F. _____

I hereby state that, within 30 days, the actions described by me to the Inspector will be taken to correct the violations identified in the items checked above. This statement of corrective actions is made in accordance with the requirements of 10 CFR 2.201. No further response will be submitted unless required by the NRC.

SIGNATURE - LICENSEE <i>9404110051 930225 PDR ADOCK 03000511 C PDR</i>		DATE <i>2/25/93</i>	SIGNATURE - NRC INSPECTOR <i>[Signature]</i>		DATE <i>2/25/93</i>
---	--	------------------------	---	--	------------------------

SAFETY INSPECTION

1. LICENSEE
*Medical College of Virginia
Richmond, VA*

2. REGIONAL OFFICE
REGION II
U S NUCLEAR REGULATORY COMMISSION
101 MARIETTA STREET NW SUITE 2900
ATLANTA GA 30323

3. DOCKET NUMBER(S)
030-00511

4. LICENSE NUMBER(S)
45-00048-19

5. DATE OF INSPECTION
2/22/93

3. (Continued)

G.

H.

I.

4.

The violations listed below are not being cited because they were self-identified, and corrective action was or is being taken, and the remaining criteria in 10 CFR 2, App. C, to exercise discretion were satisfied.

A.

Contrary to License Condition #23, a portable survey meter capable of measuring up to 1 R/hr, and calibrated in accordance with procedures described in Attachment 9.2 of Application dated April 28, 1987, was not available to the most frequent user of licensed material under this license.

B.

C.

SAFETY INSPECTION

1. LICENSEE
*Medical College of Virginia
Richmond, VA*

2. REGIONAL OFFICE
REGION II
U S NUCLEAR REGULATORY COMMISSION
101 MARIETTA STREET NW SUITE 2900
ATLANTA GA 30323

3. DOCKET NUMBER(S)
030-00511

4. LICENSE NUMBER(S)
45-00048-19

5. DATE OF INSPECTION
2/22/93

3. (Continued)

G.

H.

I.

4. The violations listed below are not being cited because they were self-identified, and corrective action was or is being taken, and the remaining criteria in 10 CFR 2, App. C, to exercise discretion were satisfied.

A. *Contrary to license condition #23, a portable survey meter capable of measuring up to 1 R/hr, and calibrated in accordance with procedures described in Attachment 9.2 of Application dated April 28, 1987, was not available to the most frequent user of licensed material under this license.*

C.