

APPENDIX

NOTICE OF VIOLATION

Wagoner Community Hospital
Wagoner, Oklahoma 74467

Docket: 030-33322
License: 35-21462-02

During an NRC inspection conducted on May 24, 1994, violations of NRC requirements were identified. In accordance with the "General Statement of Policy and Procedure for NRC Enforcement Actions," 10 CFR Part 2, Appendix C, the violations are listed below:

- A. 10 CFR 35.51(c) requires, in part, that a licensee check each survey instrument for proper operation with the dedicated check source each day of use.

Contrary to the above, as of May 24, 1994, the licensee routinely did not check its survey meter with a dedicated check source on days when the instrument was used.

This is a Severity Level IV violation (Supplement VI).

- B. 10 CFR 35.70(d) requires, in part, that a licensee establish radiation dose trigger levels for the daily and weekly surveys of areas where radiopharmaceuticals are routinely prepared for use or administered and areas where radiopharmaceutical or radiopharmaceutical waste is stored. Additionally, 10 CFR 35.70(g) requires, in part, that a licensee establish removable contamination trigger levels for weekly surveys of all areas where radiopharmaceuticals are routinely prepared for use, administered, or stored.

Contrary to the above, as of May 24, 1994, the licensee did not establish radiation dose trigger levels or removable contamination trigger levels for its daily and weekly surveys of areas where radiopharmaceuticals are prepared, administered, stored, or held as waste.

This is a Severity Level IV violation (Supplement VI).

Pursuant to the provisions of 10 CFR 2.201, Wagoner Community Hospital is hereby required to submit a written statement or explanation to the U.S. Nuclear Regulatory Commission, ATTN: Document Control Desk, Washington, D.C. 20555, with a copy to the Regional Administrator, Region IV, 611 Ryan Plaza Drive, Suite 400, Arlington, Texas 76011, within 30 days of the date of the letter transmitting this Notice of Violation (Notice). This reply should be clearly marked as a "Reply to a Notice of Violation" and should include for each violation: (1) the reason for the violation, or, if contested, the basis for disputing the violation, (2) the corrective steps that have been taken and the results achieved, (3) the corrective steps that will be taken to avoid further violations, and (4) the date when full compliance will be achieved. If an adequate reply is not received within the time specified in this Notice, an order or a Demand for Information may be issued to show cause why the license should not be modified, suspended, or revoked, or why such other

action as may be proper should not be taken. Where good cause is shown, consideration will be given to extending the response time.

Dated at Arlington, Texas
this 17th day of June, 1994

bcc:
 DMB - Original (IE-07)
 LJCallan
 SJCcollins
 RAScarano
 DWeiss, OC/LFDCB (T-9E10)
 *WLFisher
 *CLCain
 *FAWenslawski
 *MLMcLean
 *NMIB
 *MIS System
 *RIV Files (2)
 SLMerchant, NMSS/IMAB (T 8 F5)

 *W/IFS Form

RIV:NMIB <i>mjm</i>	AC:NMIB <i>VC</i>	DD:DRSS	D:DRSS	
MLMcLean	CLCain	RAScarano	SJCOLLINS	
06/16/94	06/16/94	06/ /94	06/ /94	

IFS Data Entry Form

Reviewed By: JAC

Date: 6/16/94

Reactor/Generator Inspection (IFS Option 1) Docket Related P21 Items (IFS Option 4)
 Materials Inspection (IFS Option 2) LER Items (IFS Option 3)
 Non-Docket Related Items (IFS Option 5)

Date Opened (Y/N): _____ Enter Log Number: _____
 Enter LER Number: _____
 Clear (Y/N): N

Site Name: WAGONER COMMUNITY

Report Transmittal Date: 06/17/94 HOSP

Lead Inspector: MJM Responsible Org. Code: 4304

Report End Date: 5/24/94

Region: 4

	Report NBR	Docket NBR
A	<u>94001</u>	<u>030-33322</u>
B	_____	_____
C	_____	_____

Materials Only
License NBR <u>35-21462-02</u>

*Docket Name

Update? (Y/N): _____ Opened IR/LER/P21 LOG/IFS Number: _____

***Sequence NBR: 01 Item Type: V10 **Severity: 4 **Supplement: 6

Status	*UPD I/R	*Proj. Closeout	*Actual Closeout	Materials Only	License Cond.	Tie Down
A	_____	_____	_____	10 CFR <u>35.51</u>	_____	_____
B	_____	_____	_____	_____	_____	_____
C	_____	_____	_____	_____	_____	_____

Title: FAILURE TO CHECK INSTRUMENT (55 character width)

*Closeout Org: _____ *Closeout EMP: _____ *Contact EMP: _____ *Procedure: _____ *Funct Area: _____
 *Cause CD: _____ **EA Number: _____ **NOV/NNC Issue Date: 06/17/94

Text: Visual A See Attached - highlighted

Update? (Y/N): 02 Opened IR/LER/P21 LOG/IFS Number: _____

***Sequence NBR: 02 Item Type: V10 **Severity: 4.5 **Supplement: 6

Status	*UPD I/R	*Proj. Closeout	*Actual Closeout	Materials Only	License Cond.	Tie Down
A	_____	_____	_____	10 CFR <u>35.70</u>	_____	_____
B	_____	_____	_____	_____	_____	_____
C	_____	_____	_____	_____	_____	_____

Title: FAILURE TO ESTABLISH TRIGGER LEVELS (55 character width)

*Closeout Org: _____ *Closeout EMP: _____ *Contact EMP: _____ *Procedure: _____ *Funct Area: _____
 *Cause CD: _____ **EA Number: _____ **NOV/NNC Issue Date: 06/17/94

Text: See attached Vis B highlighted

* Optional Fields.

** Severity, Supplement, and NOV/NCC only applicable for Violations; EA Number only applicable for Apparent Violations.

*** Sequence NBR is not applicable for docket related/P21, LER, or non-docket related items.

ITEMS CONTINUED? (Y/N): _____