



MILWAUKEE COUNTY
MEDICAL COMPLEX

8700 West Wisconsin Avenue

Milwaukee, WI 53226

414-257-5936

M. Julie Hanser
Hospital Administrator

August 19, 1992

Section 1
Nuclear Materials Inspection
Region III
U.S. Nuclear Regulatory Commission
799 Roosevelt Road
Glen Ellyn, IL 60137

License No.: 48-04193-01
Docket No.: 030-03444

Reply to a Notice of Violation

Dear Sir/Madam:

The following is in response to your letter dated July 22, 1992 and received by us on July 27, 1992 requesting a written response to a Notice of Violation resulting from an inspection.

Violation 1.A.

1. The violation did not occur. The person conducting the audits was on vacation during the week the inspection took place. They were not found during the inspection, but on the persons return to work a search of the files was conducted and the audits located. Copies are enclosed denoted as Attachment I.

The filing system is being reorganized and the individual has been cautioned to be more careful when placing records into files.

Violation 1.B.

1. The violation did occur. The person conducting the audits used a different form for the last quarter of 1991 and changed the form again for 1992. Therefore, the undated audits were all conducted during the last quarter of 1991, as required.
2. Since the audits were conducted and eventually dated, and by the audit form we can determine the audits were from the last quarter, then we are in compliance.
3. The responsible person has been cautioned to be aware of the importance of the completeness of required records.
4. Compliance was achieved August 11, 1992.

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REG3 LIC30
48-04193-01 PDR

1007
111

Violation 1.C.

1. The violation did occur. (1) There was no radioactive material use at the time of observation. Personnel assumed laboratory coats were required to be worn only when radioactive material was required to be worn only when the TLD extremity monitor in use. (2) The individual assigned to the TLD extremity monitor was required to be worn only when the phosphorous-32 work area to a lapse of proper technique due to a busy work schedule and the preparation of a presentation for a meeting.
2. (1) Persons were instructed to wear lab coats when in areas where radioactive materials are used, whether such material is being used at the time or not. (2) The individual was cautioned about proper storage of dosimeters.
3. Individuals in laboratories will be reminded of the importance of reviewing the general laboratory rules and requirements for working with radioactive materials and of the possible disciplinary actions for failure to comply with rules and regulations.
4. Compliance was achieved May 28, 1992.

Violation 2.

- The violation did occur. Sources not in use were stored in locations controlled by the Radiation Safety Office.
- The sealed source inventory was taken that included the sources that were not inventoried.
- The sealed source inventory form now includes all sources, whether in use or storage.
- Compliance was achieved on May 28, 1992.
- 3.

- Violation did occur. Results of leak tests were recorded below minimum detectable activity". The minimum detectable activity was not calculated in microcuries. from the previous leak test, dated January 14, 1992, converted to microcuries. The minimum detectable activity now include the calculation to list the results in microcuries.
- Compliance was achieved July 15, 1992.

Violation 1.C.

1. The violation did occur. (1) There was no radioactive material use at the time of observation. Personnel assume laboratory coats were required to be worn only when radioactive material was in use. (2) The individual assigned the TLD extremity monitor attributed the monitor being left in the phosphorous-32 work area to a lapse of proper technique due to a busy work schedule and the preparation of a presentation for a meeting.
2. (1) Persons were instructed to wear lab coats when in areas where radioactive materials are used, whether such material is being used at the time or not. (2) The individual was cautioned about proper storage of dosimeters.
3. Individuals in laboratories will be reminded of the importance of reviewing the general laboratory rules and requirements for working with radioactive materials and of the possible disciplinary actions for failure to comply with rules and regulations.
4. Compliance was achieved May 28, 1992.

Violation 2.

1. The violation did occur. Sources not in use were stored in locations controlled by the Radiation Safety Office.
2. The sealed source inventory was taken that included the sources that were not inventoried.
3. The sealed source inventory form now includes all sources, whether in use or storage.
4. Compliance was achieved on May 28, 1992.

Violation 3.

1. The violation did occur. Results of leak tests were recorded as "below minimum detectable activity". The minimum detectable activity was not calculated in microcuries.
2. Records from the previous leak test, dated January 14, 1992, were converted to microcuries.
3. Leak test now include the calculation to list the results in microcuries.
4. Compliance was achieved July 15, 1992.

Violation 4.

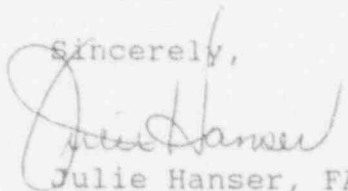
1. The violation did occur. The laboratory involved did not routinely use radioactive materials during the time in question and when they did use radioactive materials it was in very small quantities. As a result individuals forgot to log the sink disposals.
2. Persons in the laboratory were reminded of the importance of maintaining current records and cautioned of possible disciplinary actions for failure to comply with rules and regulations.
3. The sink disposal logs for laboratories will be checked on quarterly audits for thoroughness.
4. Compliance was achieved May 28, 1992.

Violation 5.

1. The violation did occur. From time to time these signs have been removed by individuals not authorized to do so. The door to room C-224 was posted prior to the inspection.
2. The door to room C-224 has been posted.
3. As part of the audit process, each door will be observed for proper posting, including the "Caution Radioactive Materials" sign.
4. Compliance was achieved August 17, 1992.

If you wish additional information or clarification of any statement in this report, please contact my office at 414-257-5936.

Sincerely,


Julie Hanser, FACHE
Hospital Administrator

Attachments

cc: U.S. Nuclear Regulatory Commission
ATTN: Document Control Desk
Washington D.C. 20555

Laboratory Audit 1991

15

Lab Room No.: C644-45

Auth. User: GROSS, GARRETT

Categories: R1,G2

Lab Manager: JEANNINE MOORE

Authorization Expiration: 31-Dec-90

R1: I125

B1:

G1:

G3:

B2:

G2: CR51,NB95,RU103,CE141

S1:

S2:

Calendar Quarter

1. Date

20 Feb 91 ¹ 2 3 4

Surveyor

PDB

2. Person(s) interviewed

JRM

3. Active Use

Yes

NO

RECORD KEEPING

4. Lab Surveys Performed

a. as required/on time Wipe

G-M

b. recorded properly Wipe

G-M

c. contaminated areas cleaned and retested

N/A

d. floor plan current

yes

5. Quarterly inventory returned

N/A

6. Dosimeters returned on time

7. Sink disposal log current

N/A

8. New worker training documented

N/A

LABORATORY POSTINGS

Check to ensure postings are current, legible and in good shape

9. NRC Form 3 & Notice to Employees-current

Not posted

10. Caution Radiation Signs

a. doors

b. work areas

c. sinks

d. containers

e. "cold zones"

f. emergency procedures

11. Laboratory Appearance

a. food and drink in area

Good

None

RADIATION SAFETY SURVEY

12. Radiation Safety Survey G-M

vial number(s)

OK

COMMENTS ON REVERSE SIDE OF THIS FORM

~~Set Lab floor plan - room 606~~

ATTACHMENT I

Laboratory Audit 1991

41

Lab Room No.: MFRC6047

Auth. User: MARKHAM, BRUCE

Categories: B1,B2,G1

Lab Manager: ~~BRIAN DAIKE~~

Authorization Expiration: 31-Dec-91

R1:

B1: H3,C14,S35

G1: I125

G3:

B2: P32

G2:

S1:

S2:

Calendar Quarter

1

2

3

4

1. Date

25 Feb 91

Surveyor

DDC

2. Person(s) interviewed

RB

3. Active Use

Yes

No

✓

RECORD KEEPING

4. Lab Surveys Performed

a. as required/on time Wipe

G-M

Missing Wipe test Book

b. recorded properly Wipe

G-M

GAD new log

c. contaminated areas cleaned and retested

See Resonance

d. floor plan current

Left - Survey Book missing

5. Quarterly inventory returned

W/A

6. ~~Dosimeters returned on time~~

7. Sink disposal log current

W/A

8. ~~New worker training documented~~

LABORATORY POSTINGS

Check to ensure postings are current, legible and in good shape

9. NRC Form 3 & Notice to Employees-current

10. Caution Radiation Signs

a. doors

b. work areas

c. sinks

d. containers

e. "cold zones"

f. emergency procedures

11. Laboratory Appearance

a. food and drink in area

✓

✓

✓

✓

✓

✓

✓

None

RADIATION SAFETY SURVEY

12. Radiation Safety Survey G-M

vial number(s)

22

225 2)

COMMENTS ON REVERSE SIDE OF THIS FORM

Conducted December 1991 PDB

OFFICE OF RADIATION SAFETY QUARTERLY LABORATORY AUDIT

Date _____

Audit Performed by PATRICK BEYER

AUTHORIZED LABORATORIES

| ROOM | AUTHORIZED USERS | USE | NUCLIDES |
|--------|---------------------|-----|---------------------|
| MCW324 | HAAS | W | C14 H3 I125 P32 S35 |

COMMENTS

324 No food or drink in lab - in application

No survey done Nov

Food in Lab but in Cold Zone

SURVEYS

Performed Timely Y / ☒ N

Post Procedure Weekly Monthly

Type of Survey ☒ GM ☒ WIPE

Appropriate to materials used ☒ Y / N

RADIOACTIVE MATERIAL CONTROL

Are Inventory Control Logs Current ☒ Y / N

Are all entries properly completed ☒ Y / N

Are Materials stored properly ☒ Y / N

Are Work / Storage areas Identified ☒ Y / N

RADIATION PROTECTION

Are Emergency procedures Posted ☒ Y / N

Are work areas neat & clutter free ☒ Y / N

Is appropriate shielding in place ☒ Y / N

Are dosimeters being worn ☒ Y / N

Are Contamination Surveys Current ☒ Y / N

Last survey Date 8-DEC-91 Reading _____

Performed By _____