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NRC FORM 591 PART 1

(7-91) 10 CFR 2.201

SAFETY INSPECTION

U.S. NUCLEAR REGULATORY COMMISSION

				Page 1 of
Norman Regional Hospital Norman, OK 73070		2. REGIONAL OFFICE REGION IV U S NUCLEAR REGULATORY COMMISSION 611 RYAN PLAZA DRIVE SUITE 400 ARLINGTON TX 76011-8064		
3. DOCKET NUMBER(S)	4 LICENSE NUMBER(S)		5. DATE OF INSPECTION	
030-08009 /96-01	35-14145-01		11/20/96	
LICENSEE: The inspection was an examination of the act Regulatory Commission (NRC) rules and regu- procedures and representative records, intervited in the control of the	lations and the condition	is of your license. The ins	spection consisted of selective e	examinations of
1 Within the scope of this inspection,	no violations were observ	ved.		
The inspector also verified the steps questions on those actions at this ti During this inspection certain of your	me. ur activities, as described	below or attached, were i	in violation of NRC requirements	
NOTICE OF VIOLATION, which is re	quired to be posted in ad	coordance 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 frequency	uencies. 10 CFR	or License	Condition Number	
C. Records of			were not prope	rly maintained.
10 CFR	_ or License Condition f	Number		
D. Documents were not properly	posted or otherwise man	de available. 10 CFR 19.	11.	
E. Reports or notification of			were not made i	n accordance with
10 CFR	or License Condition !	Number		
F				
				- 191
I hereby state that, within 30 days, the actions above. This statement of corrective actions is unless required by the NRC.				
SIGNATURE - LICENSEE 9612240146 961120 PDR ADOCK 03008009 C PDR	DATE	SIGNATURE FURC INS	Era-	DATE / 1/20/96