In Reply Refer To: License: 35-00376-02 Docket: 30-02872/89-01

St. John Medical Center ATTN: Dr. Keith Jones 1923 South Utica Avenue Tulsa, Oklahoma 74104

Gentlemen:

Enclosed for your signature is NRC Form 591, "Safety Inspection." Please note the apparent violation which was observed during the March 30, 1989, inspection of your NRC Byproduct Material License, and which was reported to Dr. Keith Jones at the conclusion of the inspection. By signing the NRC Form 591, you agree to correct the violation within 30 days. Please keep the original for your records and return the remaining copies in the envelope provided. If you have any questions concerning this matter, please call me at (817) 860-8100.

Sincerely,

Original Signed By

Wesley L. Holley Radiation Specialist

Enclosures:

1. NRC Form 591

2. Self-addressed envelope

CC:

Oklahoma Radiation Control Program Director

bce:

RDMartin

ABBeach WLFisher

LShea, RM/ALF (AR-2015)

*DAPowers

*WLHolley

*MIS System

*RIV Files (2)

*NMIS File

*RSTS Operator (close report)

*w/766

RIV:NMINAN WLHolley/ch 5/9/89

C:NMISON DAPowers 5/9/89 Duro