

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED Lawrence & Memorial Hospital 365 Montauk Avenue New London, CT 06320-4769 REPORT NUMBER(s) 2021001	2. NRC/REGIONAL OFFICE Region 1 2100 Renaissance Blvd Suite 100 King of Prussia, PA 19406-2713
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3. DOCKET NUMBER(S) 030-01275	4. LICENSE NUMBER(S) 06-09261-01	5. DATE(S) OF INSPECTION 09/16/2021 - 10/13/2021
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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 inspection findings are as follows:

- 1. Based on the inspection findings, no violations were identified.
- 2. Previous violation(s) closed.
- 3. The violation(s), specifically described to you by the inspector as non-cited violations, are not being cited because they were self-identified, non-repetitive, and corrective action was or is being taken, and the remaining criteria in the NRC Enforcement Policy, to exercise discretion, were satisfied.

_____ Non-cited violation(s) were discussed involving the following requirement(s):

- 4. During this inspection, certain of your activities, as described below and/or attached, were in violation of NRC requirements and are being cited in accordance with the NRC Enforcement Policy. This form is a NOTICE OF VIOLATION, which may be subject to posting in accordance with 10 CFR 19.11. (Violations and Corrective Actions)

10 CFR 35.92(b) requires, in part that a licensee may hold byproduct material with a physical half-life of less than or equal to 120 days for decay-in-storage before disposal without regard to its radioactivity if it retains a record of each disposal permitted.

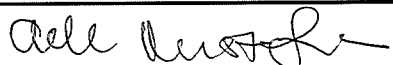
Contrary to the above, from October 17, 2018, to September 16, 2021, the licensee did not retain a record of each disposal permitted by 10 CFR 35.92. Specifically, the licensee did not maintain a log of PET waste held for decay in storage and did not maintain a record of the surveys performed prior to disposal without regard to its radioactivity.

This is a severity level IV violation. Enforcement Policy 6.3

Corrective Actions: The licensee developed and implemented a waste log to record surveys made of waste removed from decay in storage at the PET center prior to disposal.

Statement of Corrective Actions

I hereby state that, within 30 days, the actions described by me to the Inspector will be taken to correct the violations identified. This statement of corrective actions is made in accordance with the requirements of 10 CFR 2.201 (corrective steps already taken, corrective steps which will be taken, date when full compliance will be achieved). I understand that no further written response to NRC will be required, unless specifically requested.

TITLE	PRINTED NAME	SIGNATURE	DATE
LICENSEE'S REPRESENTATIVE	Adel Mustafa, Ph.D., RSO		10/13/2021
NRC INSPECTOR	Robin Elliott	Robin L. Elliott <small>Digitally signed by Robin L. Elliott Date: 2021.10.13 11:28:21 -04'00'</small>	
BRANCH CHIEF	Anne DeFrancisco		