

(10-2003)
10 CFR 2.201

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED:

Bluffton Health System, LLC
303 South Main Street
Bluffton, Indiana 46714

2. NRC/REGIONAL OFFICE

REGION III
US NUCLEAR REGULATORY COMMISSION
2443 WARRENVILLE ROAD, SUITE 210
LISLE, ILLINOIS 60532

REPORT 2006-001

3. DOCKET NUMBER(S)

030-01596

4. LICENSEE NUMBER(S)

13-01629-03

5. DATE(S) OF INSPECTION

February 2, 2006

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, NUREG-1600, to exercise discretion, were satisfied.

Non-Cited Violation(s) was/were discussed involving the following requirement(s) and Corrective Action(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. This form is a NOTICE OF VIOLATION, which may be subject to posting in accordance with 10 CFR 19.11.

(Violations and Corrective Actions)

Licensee's Statement of Corrective Actions for Item 4, above.

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

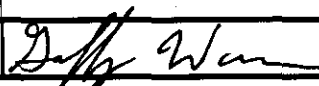
Date

LICENSEE'S

REPRESENTATIVE

NRC INSPECTOR

Geoffrey M. Warren



2/2/06

**Docket File Information
SAFETY INSPECTION REPORT
AND COMPLIANCE INSPECTION**

1. LICENSEE Bluffton Health System, LLC REPORT NUMBER(S) 2006-001		2. NRC/REGIONAL OFFICE Region III	
3. DOCKET NUMBER(S) 030-01596	4. LICENSE NUMBER(S) 13-01629-03	5. DATE(S) OF INSPECTION February 2, 2006	
6. INSPECTION PROCEDURES USED 87131	7. INSPECTION FOCUS AREAS 03.01 - 03.07		
SUPPLEMENTAL INSPECTION INFORMATION			
1. PROGRAM CODE(S) 02120	2. PRIORITY 3	3. LICENSEE CONTACT Brett A. Hagedorn, M.D., RSO	4. TELEPHONE NUMBER 260-824-3210
<input checked="" type="checkbox"/> Main Office Inspection		Next Inspection Date: February 2009	
<input type="checkbox"/> Field Office			
<input type="checkbox"/> Temporary Job Site			

PROGRAM SCOPE

The licensee was a 92-bed hospital located in Bluffton, Indiana, which served Wells County and the surrounding area. Licensee had authorization to use byproduct materials under Sections 35.100, 35.200, 35.300, and 35.500. While authorized to perform radiopharmaceutical therapies under 35.300, the licensee had not performed any such therapies since before the previous NRC inspection, and planned to remove the authorization from the license. Licensed activities were conducted only at the facility indicated on the license.

The nuclear medicine department was staffed with one full-time and one part-time nuclear medicine technologists. The licensee's nuclear medicine staff typically performed 100 diagnostic procedures monthly in the nuclear medicine area. Doses were primarily technetium-99m for cardiac, bone, and other studies. In addition, licensee occasionally performed studies using indium-111 and iodine-125. Doses were received as unit doses from a licensed radiopharmacy or prepared from bulk technetium-99m. All waste was returned to the radiopharmacy or held for decay-in-storage (DIS).

Performance Observations

The inspector observed one diagnostic administration of licensed material including dose preparation and disposal, and identified no issues with the procedures. Licensee personnel demonstrated package receipt, dose calibrator constancy tests, well counter daily checks, and survey meter checks, and explained procedures for daily and weekly contamination surveys, and kit preparation. The inspector found no concerns with these activities. Interviews with licensee staff indicated adequate knowledge of radiation safety procedures. Radiation surveys indicated radiation levels consistent with licensee survey records.