NRC FORM 591M PART 1
(10-2003)
10 CFR 2.201

U.S. NUCLEAR REGULATORY COMMISSION

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED:	2. NRC/REGIONAL OFFICE
Reid Hospital and Health Care Services 1401 Chester Boulevard Richmond, Indiana 47374 REPORT 2006-001	REGION III US NUCLEAR REGULATORY COMMISSION 2443 WARRENVILLE ROAD, SUITE 210 LISLE, ILLINOIS 60532

3. DOCKET NUMBER(S)	4. *LICENSEE NUMBER(S)*	5. DATE(S) OF INSPECTION
030-01614	13-03284-02	February 1, 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		2/1/06

NRC FORM 591M PART 3
(10-2003)
10 CFR 2.201

U.S. NUCLEAR REGULATORY COMMISSION

Docket File Information
SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE	2. NRC/REGIONAL OFFICE
Reid Hospital and Health Care Services REPORT NUMBER(S) 2006-001	**Region III**

3. DOCKET NUMBER(S)	4. LICENSE NUMBER(S)	5. DATE(S) OF INSPECTION
030-01614	13-03284-02	February 1, 2006

6. INSPECTION PROCEDURES USED	7. INSPECTION FOCUS AREAS
87131, 87132	03.01 - 03.07, 03.01 - 03.07

SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM CODE(S)	2. PRIORITY	3. LICENSEE CONTACT	4. TELEPHONE NUMBER
02120	3	Charles S. Narayanan, M.S., RSO	765-983-3166

[X] Main Office Inspection — Next Inspection Date: **February 2009**

[ ] *Field Office* _____

[ ] Temporary Job Site _____

PROGRAM SCOPE

The licensee was a 220-bed hospital located in Richmond, Indiana, which served the local five-county area. Licensee had authorization to use byproduct materials under Sections 35.100, 35.200, 35.300, and 35.400. Licensed activities were conducted only at the facilities indicated on the license.

The nuclear medicine department was staffed with five full-time nuclear medicine technologists. The licensee's nuclear medicine staff typically performed 600 diagnostic procedures monthly in the nuclear medicine area. Doses were primarily technetium-99m for cardiac, bone, gall bladder, and other studies. In addition, licensee performed studies using xenon-133, indium-111, iodine-123, and gallium-67. Doses were received as unit doses from a licensed radiopharmacy or prepared from bulk technetium-99m. Licensee performed around 25 iodine-131 treatments annually, including whole-body scans, hyperthyroid treatments, and thyroid ablations, with the iodine-131 in capsule form. All waste was returned to the radiopharmacy or held for decay-in-storage.

The radiation therapy staff consisted of one oncologist and two physicists and dosimetrists. In 2005, the staff performed eight temporary implants using cesium-137 seeds.

Licensee was building a new hospital in the area and was planning to move nuclear medicine and radiation oncology services to the new facility. In addition, the licensee was considering adding HDR and permanent seed implant procedures at the new facility. Licensee was aware of the requirement to get NRC approval for the new facilities before moving the services.

Performance Observations

The inspector was unable to observe any diagnostic administrations of licensed material. Licensee personnel demonstrated dose preparation, administration, and disposal, as well as package receipt, dose calibrator constancy tests, and survey meter checks. Licensee staff explained procedures for daily and weekly contamination surveys and kit preparation, as well as seed implant therapy procedures. The inspector found no concerns with these activities. The inspector reviewed written directives for radiopharmaceutical and permanent seed implant therapies and found no issues. Interviews with licensee staff indicated adequate knowledge of radiation safety procedures. Radiation surveys indicated radiation levels consistent with licensee survey records.