

## SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

## 1. LICENSEE/LOCATION INSPECTED:

King's Daughters' Hospital and Health Services  
One King's Daughters' Drive  
Madison, Indiana 47250

## 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)

030-14051

## 4. LICENSEE NUMBER(S)

13-18692-01

## 5. DATE(S) OF INSPECTION

May 23, 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.

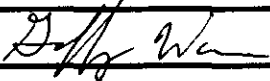
\_\_\_\_\_ Non-Cited Violation(s) was/were discussed involving the following requirement(s) and Corrective Action(s):

- ☐ 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		5/23/06

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

1. LICENSEE

**King's Daughters Hospital and Health Services**

REPORT NUMBER(S) 2006-001

2. NRC/REGIONAL OFFICE

**Region III**

3. DOCKET NUMBER(S)

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**13-18692-01**

5. DATE(S) OF INSPECTION

**May 23, 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

**William Skiles, M.D., RSO**

4. TELEPHONE NUMBER

**812-265-0135**

Main Office Inspection

Next Inspection Date: **May 2009**

Field Office



Temporary Job Site

**PROGRAM SCOPE**

The licensee was a 120-bed hospital located in Poplar Bluff, Missouri which served the surrounding nine-county area in Indiana and Kentucky. Licensee had authorization to use byproduct materials under Sections 35.100, 35.200 (excluding generators and xenon-133), and 35.300. Licensed activities were conducted only at the facility indicated on the license.

The nuclear medicine department was staffed with six full-time nuclear medicine technologists who also worked in ultrasound and other areas. The technologists typically performed 260 diagnostic procedures monthly in the nuclear medicine area. Doses were primarily technetium-99m for cardiac, bone, hepatobiliary, and other studies. In addition, licensee performed occasional studies using iodine-123. Doses were received as unit doses from a licensed radiopharmacy or prepared from bulk technetium-99m. Licensee performed around four iodine-131 hyperthyroid treatments annually, with the iodine-131 in capsule form. All waste was returned to the radiopharmacy or held for decay-in-storage.

**Performance Observations**

The inspector was observed two diagnostic administrations of licensed material, including dose preparation and disposal. Licensee personnel demonstrated package receipt surveys, dose calibrator constancy tests, and daily contamination surveys. Licensee staff explained procedures for weekly contamination surveys, wipe counter checks, and package return surveys. The inspector found no concerns with these activities. The inspector reviewed written directives for radiopharmaceutical 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.