

(10-2003)  
10 CFR 2.201

## SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED: <b>Morgan Hospital and Medical Center 2209 John R. Wooden Dr. Martinsville, IN 46151</b>		2. NRC/REGIONAL OFFICE <b>U.S. Nuclear Regulatory Commission Region III 2443 Warrenville Road Lisle, Illinois 60532-4351</b>	
REPORT                      2006-001			
3. DOCKET NUMBER(S) <b>030-12775</b>	4. LICENSEE NUMBER(S) <b>13-17449-01</b>	5. DATE(S) OF INSPECTION <b>September 22 2006</b>	

## 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.

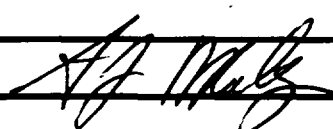
\_\_\_\_\_ Non-Cited Violation(s) was/were discussed involving the following requirement(s) and Corrective Action(s):

- ☐ 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	S. J. Mulay		9/22/06

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

1. LICENSEE  <b>Morgan Hospital and Medical Center</b>		2. NRC/REGIONAL OFFICE  <b>Region III 2443 Warrenville Road Lisle, IL 60532</b>	
REPORT <b>2006001</b>			
3. DOCKET NUMBER(S) <b>030-12775</b>	4. LICENSE NUMBER(S) <b>13-17449-01</b>	5. DATE(S) OF INSPECTION <b>September 22, 2006</b>	
6. INSPECTION PROCEDURES <b>87131</b>	7. INSPECTION FOCUS AREAS <b>03.01-03.07</b>		
<b>SUPPLEMENTAL INSPECTION INFORMATION</b>			
1. PROGRAM <b>2120</b>	2. PRIORITY <b>G3</b>	3. LICENSEE CONTACT <b>James Michaels, MD, RSO</b>	4. TELEPHONE NUMBER
<input checked="" type="checkbox"/> Main Office Inspection <input type="checkbox"/> Field <input type="checkbox"/> Temporary Job Site		Next Inspection Date: <b>September 2009</b>	

**PROGRAM SCOPE**

This active medical program performs about 40 diagnostic procedures monthly utilizing one full-time technologist. Approximately one xenon-133 and two Tc99m aerosol procedures are done monthly. Moly/tc99 generators are not received. Unit doses are obtain from an area pharmacy. The overall program performs cardiac and other routine nuclear medicine procedures.

Although authorized, the licensee does not currently perform radiopharmaceutical therapy treatments and is staffed from 7:00am-3:00 pm Monday through Friday

**Performance Observations**

Interviews conducted with available staff revealed an adequate level of understanding of emergency and material handling procedures and techniques. Dose calibrator constancy checks, area surveys, package check-in procedures and injection techniques were successfully demonstrated or described. Proper dosimetry was observed worn by the staff during the inspection

The hot-lab room was observed locked upon arrival and adequate surveillance of the hot-lab area was well maintained during the review. Licensed material was not readily accessible to members of the general public.

Independent measurements taken indicated 0.06 mr/hr maximum in the hot-lab area and essentially background (0.02mr/hr) in imaging and unrestricted areas. Side by side comparison with the NRC and licensee survey instruments revealed similar response.

Personal dosimetry records reviewed for 2005 revealed readings of 309 mrem whole-body and 50 extremity. Readings for YTD 2006 revealed 213 mRem whole-body and 80 mRem extremity.

The licensee retains a consultant to perform compliance audits quarterly. A random review of documents, along with interviews of technical staff indicated adequate program oversight.