

(10-2003)

10 CFR 2.201

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED:

Henry County Memorial Hospital
1000 North 16th Street
New Castle, Indiana 47362

2. NRC/REGIONAL OFFICE

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

REPORT 2007-001

3. DOCKET NUMBER(S)

030-13716

4. LICENSEE NUMBER(S)

13-17958-01

5. DATE(S) OF INSPECTION

August 8, 2007

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

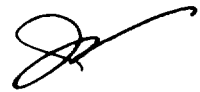
NRC INSPECTOR

Geoffrey M. Warren



8/8/07

Docket File Information
SAFETY INSPECTION REPORT
AND COMPLIANCE INSPECTION



1. LICENSEE Henry County Memorial Hospital REPORT NUMBER(S) 2007-001		2. NRC/REGIONAL OFFICE Region III	
3. DOCKET NUMBER(S) 030-13716	4. LICENSE NUMBER(S) 13-17958-01	5. DATE(S) OF INSPECTION August 8, 2007	
6. INSPECTION PROCEDURES USED 87131	7. INSPECTION FOCUS AREAS 03.01 - 03.08		

SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM CODE(S) 02120	2. PRIORITY 3	3. LICENSEE CONTACT Randy W. Fields, M.D., RSO	4. TELEPHONE NUMBER 765-521-1445
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☒ Main Office Inspection Next Inspection Date: **August 2010**

☐ Field Office _____

☐ Temporary Job Site _____

PROGRAM SCOPE

The licensee was a 100-bed hospital located in New Castle, Indiana, which served a primarily the local county. Licensee had authorization to use byproduct materials under Sections 35.100, 35.200, 35.300, and 35.500. Licensed activities were conducted only at the facility identified on the license.

The nuclear medicine department was staffed with two full-time nuclear medicine technologists, two part-time technologists, and a student who acted only under direct supervision of other technologists. The licensee's nuclear medicine staff typically administered 350 diagnostic doses monthly. Doses were primarily technetium-99m for cardiac, hepatobiliary, and other studies. The licensee also performed occasional lung scans using xenon-133. Doses were received as unit doses from a licensed radiopharmacy or prepared from bulk technetium. Licensee performed approximately three iodine-131 treatments for hyperthyroidism annually, with the iodine-131 in capsule form. All waste was held for decay-in-storage or returned to the radiopharmacy.

Performance Observations

The inspector observed two diagnostic administrations of licensed material including dose preparation and disposal, and identified no issues with the activities. Licensee personnel demonstrated package receipt and return surveys, survey meter QC, dose calibrator constancy tests, and daily and weekly contamination surveys. The inspector found no concerns with these activities. The inspector reviewed written directives for iodine-131 procedures, and found no issues. Interviews with licensee staff indicated adequate knowledge of radiation safety procedures and concepts. Surveys indicated appropriate radiation levels in restricted and unrestricted areas.