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**SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION**

1. LICENSEE/LOCATION INSPECTED: <i>Community Memorial Hosp. 748 South Main St. Chebogue, ME 49721</i>		2. NRC/REGIONAL OFFICE U.S. Nuclear Regulatory Commission Region III 2443 Warrenville Road Suite 210 Lisle, Illinois 60532-4351	
REPORT <i>07-01</i>			
3. DOCKET NUMBER(S) <i>030-19514</i>	4. LICENSEE NUMBER(S) <i>21-20250-01</i>	5. DATE(S) OF INSPECTION <i>8/8/07</i>	

**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	Kenneth J. Lambert	<i>Kenneth J. Lambert</i>	<i>8/8/07</i>

Initial	Announced	<input checked="" type="checkbox"/> X	Unannounced	<input checked="" type="checkbox"/> X	Routine	Special
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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  <b>Community Memorial Hospital 748 South Main Street Cheboygan, MI</b>		2. NRC/REGIONAL OFFICE  <b>U.S. Nuclear Regulatory Commission Region III, 2443 Warrenville Road Suite 210 Lisle Illinois, 60532-4352</b>	
REPORT NOS      07-01			
3. DOCKET NUMBER(S)  030-19514	4. LICENSE NUMBER(S)  21-20250-01	5. DATE(S) OF INSPECTION  08/08/2007	
6. INSPECTION PROCEDURES USED  87131	7. INSPECTION FOCUS AREAS  03.01-08	8. INSPECTOR  K. Lambert	

**SUPPLEMENTAL INSPECTION INFORMATION**

1. PROGRAM CODE(S)  02120	2. PRIORITY  3	3. LICENSEE CONTACT  Michael Sunday, M.D.	4. TELEPHONE NUMBER  616-627-5601
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<input checked="" type="checkbox"/> Main Office Inspection	Next Inspection Date: 08/2010
Field Office _____	
Temporary Job Site _____	

**PROGRAM SCOPE**

This was a routine unannounced inspection at a small community hospital which is authorized for 35,100, 200 and 300 materials. The hospital conducts 70-90 studies/month with 75 percent cardiac stress tests. Nuclear Medicine is staffed Monday thru Friday, with the technologist on call during the weekend. While the facility is authorized for 35,300 materials for radiopharmaceutical therapy, none has been performed since the last inspection. The hospital performs iodine-131 diagnostic studies using 10-15 microcuries. The facility uses all unit doses.

The inspection consisted of interviews with licensee personnel, a review of selected records, a tour of the nuclear medicine department and independent measurements. The inspection included observations of security of byproduct material, use of personnel monitoring, dose calibrator QA checks, areas surveys, and radioactive material packages receipt surveys. The inspector also observed licensee nuclear medicine personnel prepare, assay and administer several unit doses for various imaging procedures. The inspector reviewed dosimetry records, inventory records, package receipt survey results, waste storage records, annual radiation program review records and training records. The hospital had two spills of radioactive materials, one October 2002 and the second in November 2005, which were appropriately documented. No violations or issues were identified during the inspection.