

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED:

Holland Community Hospital
602 Michigan Avenue
Holland, MI 49423

2. NRC/REGIONAL OFFICE

Region III: 2443 Warrenville Rd., Ste. 210 Lisle, IL 60532-4352

REPORT NUMBER(S) 11-01

3. DOCKET NUMBER(S)

030-13801

4. LICENSE NUMBER(S)

21-18502-01

5. DATE(S) OF INSPECTION

08/31/2011

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, to exercise discretion, were satisfied.

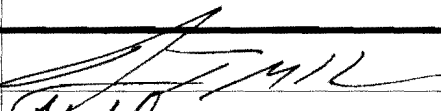
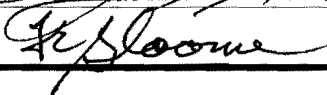
Non-cited violation(s) were discussed involving the following requirement(s):

- ☐ 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)

Statement of Corrective Actions

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	Aaron T. McCraw		9/1/11
BRANCH CHIEF	Tamara E. Bloomer		9/1/11

Docket File Information
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3. DOCKET NUMBER(S) 030-13801		4. LICENSE NUMBER(S) 21-18502-01	5. DATE(S) OF INSPECTION 08/31/2011
6. INSPECTION PROCEDURES USED IP 87131		7. INSPECTION FOCUS AREAS 03.01-03.09	

SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM CODE(S) 02120	2. PRIORITY 3	3. LICENSEE CONTACT Edward J. Maas, M.D., RSO	4. TELEPHONE NUMBER (616) 392-5141
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☒ Main Office Inspection Next Inspection Date: 08/01/2014

☐ Field Office Inspection _____

☐ Temporary Job Site Inspection _____

PROGRAM SCOPE

This was a routine inspection of a 209-bed community hospital in Holland, Michigan. The licensee was authorized to use radioactive materials under 10 CFR 35.100, 35.200, and 35.300 (limited to 33 mCi of iodine-131) for diagnostic studies and therapeutic procedures. The licensee performed approximately 300 diagnostic studies per month and 2-3 therapeutic procedures using iodine-131 per year. The licensee primarily received unit doses for the daily, scheduled studies, but also received bulk doses of Technetium-99m for emergency scans and weekend calls. The licensee employed three full-time, experienced nuclear medicine technologists and had access to part-time technologists to cover vacations and weekends, as needed. The nuclear medicine department was fully staffed (two technologists) on weekdays and was on call on weekends.

PERFORMANCE OBSERVATIONS

Interviews conducted with the nuclear medicine staff revealed an adequate level of understanding of emergency and material handling procedures and techniques. The inspector discussed patient identification, written directive administration, package surveys and wipes, and spill cleanup procedures with the licensee staff. The inspector observed one patient injection. The licensee staff demonstrated equipment checks, area surveys, package receipt, and waste disposal procedures.

The inspector observed that licensed material was adequately secured during the review and was not readily accessible to members of the general public. An outside consultant performed quarterly program audits and calibrated the licensee's equipment and instruments, as required.

The inspector observed personnel dosimetry being worn by the staff during the inspection, and records did not indicate doses in excess of 10 CFR Part 20 limits. The inspector conducted independent surveys of the nuclear medicine department and found all areas to be within regulatory limits for restricted and unrestricted areas, respectively. The licensee possessed calibrated and operable survey instruments that performed well in side-by-side comparisons with the inspector's survey instrument.

No violations were identified during this inspection.