

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED:
Davie Community Hospital
1314 East Walnut
Washington, IN
REPORT NUMBER(S): 11-01

2. NRC/REGIONAL OFFICE
U.S. Nuclear Regulatory Commission, Region III
2443 Warrenville Road, Suite 210
Lisle, Illinois 60532

3. DOCKET NUMBER(S)
030-10475

4. LICENSEE NUMBER(S)
13-16138-01

5. DATE(S) OF INSPECTION
8/5/11

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) 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

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	Ken Lambert		8/5/11
Branch Chief	Tamara E. Bloomer		8/7/11

Docket File Information
SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED: Daviess Community Hospital REPORT NUMBER(S) 11-01		2. NRC/REGIONAL OFFICE Region III: 2443 Warrenville Rd., Ste. 210 Lisle, IL 60532-4352	
3. DOCKET NUMBER(S) 030-10475		4. LICENSE NUMBER(S) 13-16138-01	5. DATE(S) OF INSPECTION 08/05/2011
6. INSPECTION PROCEDURES USED 87131		7. INSPECTION FOCUS AREAS 03.01-03.07	

SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM CODE(S) 2120	2. PRIORITY 3	3. LICENSEE CONTACT Vashev Lohano, M.D., RSO	4. TELEPHONE NUMBER (812) 254-8898
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- ☒ Main Office Inspection Next Inspection Date: August 2014
- ☐ Field Office Inspection _____
- ☐ Temporary Job Site Inspection _____

PROGRAM SCOPE

This small community hospital employees two full time nuclear medicine technologists and performs studies Monday thru Friday. The licensee was authorized for 35,100, 200 and 300 materials, prepackaged kits. The licensee performed approximately 20 studies per week including bone, HIDA, cardiac, lung using Tc-99m, and whole body scans using iodine-123. The licensee used all unit doses from a local nuclear pharmacy. The licensee received 100 mCi of bulk Tc-99m for emergency studies daily. The licensee performed approximately one thyroid therapy treatment monthly using iodine-131 in capsule form. All waste was held for decay or returned to the nuclear pharmacy. Program audits were conducted semi-annually by the RSO.

PERFORMANCE OBSERVATIONS

The inspector observed several diagnostic administrations of licensed material including dose preparation and disposal. Licensee staff discussed/ demonstrated dose calibrator daily constancy checks, package receipt, daily and weekly contamination surveys and wipes, with no issues identified. Interviews of staff indicated an adequate knowledge of radiation safety procedures. The inspector noted that staff were wearing appropriate dosimetry. The inspector reviewed dosimetry records and noted the following whole body (WB) and extremity exposures for 2011 to May 19: 67 mrem WB and 560 mrem extremity. Earlier dosimetry were located in the department manager's locked office, with the manager on vacation.

The inspector noted that the licensee's hot lab area was located within the imaging suite, which was properly secured from unauthorized access during the inspection.

Independent measurement taken within the imaging suite with a Ludlum Model 3403 survey meter coupled to a compensated Geiger-Mueller detector ranged between background and 0.05 millirem per hour. Background measurement was 0.02 millirem per hour. The survey meter was last calibrated on September 6, 2011.

No violations of regulatory requirements were identified.