

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED:

Dearborn County Hospital
600 Wilson Creek Road
Lawrenceburg, IN 47025

REPORT NUMBER(S) 12-01

2. NRC/REGIONAL OFFICE

Region III
U. S. Nuclear Regulatory Commission
2443 Warrenville Road, Suite 210
Lisle, IL 60532-4352

3. DOCKET NUMBER(S)

030-12564

4. LICENSE NUMBER(S)

13-17327-01

5. DATE(S) OF INSPECTION

January 12, 2012

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:

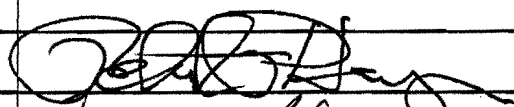
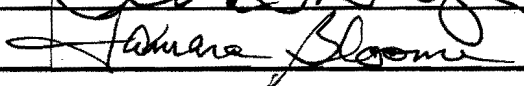
- ☒ 1. Based on the inspection findings, no violations were identified.
- ☐ 2. Previous violation(s) closed.
- ☐ 3. The violation(s), specifically described to you by the inspector as non-cited violations, are not being cited because they were self-identified, non-repetitive, and corrective action was 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 in accordance with NRC Enforcement Policy. 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	Robert P. Hays		1/12/12
BRANCH CHIEF	Tamara E. Bloomer		1/31/12

Docket File Information

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6. INSPECTION PROCEDURES USED

87131

7. INSPECTION FOCUS AREAS

03.01-03.07

SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM CODE(S)

02120

2. PRIORITY

3

3. LICENSEE CONTACT

Bruce Canfield, RSO

4. TELEPHONE NUMBER

(812) 537-8155

☒ Main Office Inspection

Next Inspection Date: 01/12/2015

☐ Field Office Inspection

☐ Temporary Job Site Inspection

PROGRAM SCOPE

The licensee was a medical institution with authorization by the license to use byproduct materials for diagnostic and therapeutic medical procedures under 10 CFR 35.100, 35.200, 35.300, and 35.400.

The licensee's Nuclear Medicine Department routinely conducts a daily average of 6-10 patient studies with a staff of 3 nuclear medicine technologists. The majority of diagnostic studies are cardiac tests using sestimibi. The licensee also has a PET imaging center and conducts PET studies, however, the licensee no longer uses a rubidium-82 generator for cardiac PET studies since the recall. Iodine-131 procedures requiring a written directive averaged one administration per quarter with no administration greater than 12 millicuries. The licensee receives unit doses and bulk pertechnetate from a Cincinnati, OH nuclear pharmacy.

The licensee is authorized for low dose brachytherapy procedures and the licensee performs only prostate iodine-125 seed implants and the number of patient implants average one procedure per month using pre-loaded needles. Any unused seeds are stored for decay.

Performance Observations

During the inspection, the licensee's NMT staff demonstrated/discussed: (1) survey instruments and required surveys; (2) package receipt and check-in procedures; (3) wipe test counting; (4) unit dose, kit preparation, and safe handling procedures; (5) I-131 procedures, written directives, and 10 CFR 35.75 requirements; (6) seed implant procedures and written directives; (7) waste handling; (8) sealed source inventories and leak tests; (9) security and storage of licensed material; (10) radiation safety committee meetings; (11) radiation safety program audit results; (12) dosimetry; [CY 2010: 425mr-DDE; 2280mr-SDE], [CY 2011 392mr-DDE; 4440mr-SDE]; and (13) HAZMAT refresher Training. The inspector performed independent and confirmatory radiation measurements, which indicated results consistent with licensee survey records and postings.