

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED:

Bell Memorial Hospital
901 Lakeshore Drive
Ishpeming, MI 49849

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)

030-13856

4. LICENSE NUMBER(S)

21-02037-03

5. DATE(S) OF INSPECTION

June 26, 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	Andrew M. Bramnik	<i>Andrew M. Bramnik</i>	6/26/12
BRANCH CHIEF	<i>Hirshon Peterson</i>	<i>[Signature]</i>	7/9/12

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

Steve Hill, NMT

4. TELEPHONE NUMBER

(906) 486-4431

☒ Main Office Inspection

Next Inspection Date: 06/26/2015

☐ Field Office Inspection

☐ Temporary Job Site Inspection

PROGRAM SCOPE

This was a routine inspection of a 25 bed hospital that performed four diagnostic nuclear medicine procedures per day. One full time nuclear medicine technologist performed all patient procedures Mondays through Fridays. The licensee obtained a molybdenum/technetium generator every 10 to 14 days for diagnostic administrations and did not use Xe-133. The licensee performed primarily cardiac, lung, bone, and gall bladder scans. In March 2009 the licensee was approved to resume administrations of licensed material requiring a written directive. Since then, the licensee had performed approximately one administration of I-131 per month.

PERFORMANCE OBSERVATIONS

The inspector observed the technologist make up a kit for one diagnostic administration of technetium-99m during the inspection. This observation, combined with interviews of available staff, revealed an adequate level of understanding of emergency and material handling procedures and techniques. The licensee successfully described or demonstrated dose calibrator constancy checks, daily surveys, molybdenum breakthrough testing, and waste handling and disposal procedures. The inspector confirmed that these activities were successfully completed by reviewing selected records since the previous inspection. The inspector also observed the receipt and check-in survey procedure for a molybdenum/technetium generator that was delivered during the inspection.

The inspector reviewed the written directives and supporting documentation for all of the administrations that required a written directive since the previous inspection. The administrations were completed in accordance with regulatory requirements and the licensee's procedure. Additionally, the licensee's technologist was familiar with the definition of a medical event. A contract physicist performed quarterly program audits that were adequate to oversee the program.

Licensed material was adequately secured and not readily accessible to members of the general public. The licensee possessed a radiation survey meter that was calibrated and operational. Personal whole body and extremity dosimetry badges were observed being worn by the staff during the inspection, and records did not indicate doses in excess of 10 CFR Part 20 limits. Dosimetry records indicated that the highest annual whole body and extremity readings since the previous inspection were 297 millirem (mrem) and 3320 mrem, respectively.

No violations were identified during this inspection.

