

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED:

Johnson County Memorial Hospital
1125 West Jefferson Street
Franklin, IN 46131

REPORT NUMBER(S) 14-01

2. NRC/REGIONAL OFFICE

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

3. DOCKET NUMBER(S)

030-08553

4. LICENSE NUMBER(S)

13-14817-01

5. DATE(S) OF INSPECTION

March 25, 2014, with in-office
review until March 31, 2014

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:

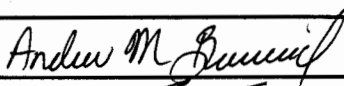
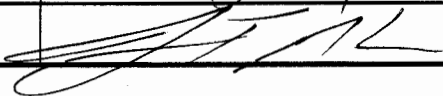
- ☒ 1. Based on the inspection findings, no violations were identified.
- ☐ 2. Previous violation(s) closed.
- ☐ 3. The violation(s), specifically described to you by the inspector as non-cited violations, are not being cited because they were self-identified, non-repetitive, and corrective action was 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		4/3/2014
BRANCH CHIEF	Aaron T. McCraw		4/4/14

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 Andrea Browne, M.D., RSO	4. TELEPHONE NUMBER (317) 736-3300
<input checked="" type="checkbox"/> Main Office Inspection Next Inspection Date: 03/31/2017 <input type="checkbox"/> Field Office Inspection <input type="checkbox"/> Temporary Job Site Inspection			

PROGRAM SCOPE

This was a routine inspection of a 200-bed hospital that was authorized to use byproduct materials in 10 CFR Sections 35.100, .200, and .300. The nuclear medicine area was staffed with two full time technologists who administered between three and eight diagnostic administrations daily in addition to three or fewer administrations of I-131 per year. The nuclear medicine staff received unit doses from an area pharmacy with no generators. At the time of the inspection, the licensee performed cardiac testing in a separate office in its attached professional building. The professional building had its own hot lab with dose calibrator, survey meter, and camera; however, all doses were delivered and checked-in to the main hospital hot lab.

PERFORMANCE OBSERVATIONS

The inspector observed one diagnostic administration of byproduct material 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 demonstrated routine equipment QA/QC checks, package receipt, area surveys, and waste handling and disposal procedures. A contract physicist performed quarterly audits to help oversee the nuclear medicine program and served as the Radiation Safety Officer. The inspector confirmed that these activities were successfully and routinely completed by reviewing selected records. The nuclear medicine staff conducted leak tests for their sealed sources using their well counter. The inspector verified that the well counter was calibrated within the last 12 months and was capable of detecting 0.005 microcuries of activity. The inspector also reviewed records for I-131 administrations requiring a written directive since the previous inspection. The licensee's records and procedures demonstrated that each administration was in accordance with the written directive.

Licensed material was adequately secured and not readily accessible to members of the general public. The licensee possessed radiation survey meters that were 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 380 millirem (mrem) and 739 mrem, respectively.