

## SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

## 1. LICENSEE/LOCATION INSPECTED:

Baraga County Memorial Hospital  
Nuclear Medicine Department  
18341 U.S. Highway 41  
L'Anse, MI 49946-8024

REPORT NUMBER(S) 2014001

## 2. NRC/REGIONAL OFFICE

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

## 3. DOCKET NUMBER(S)

030-10984

## 4. LICENSE NUMBER(S)

21-16394-01

## 5. DATE(S) OF INSPECTION

4/23/14

## 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:

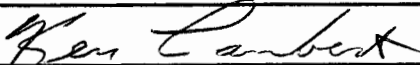
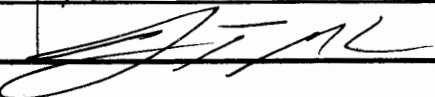
- ☒ 1. Based on the inspection findings, no violations were identified.
- ☐ 2. Previous violation(s) closed.
- ☐ 3. The violation(s), specifically described to you by the inspector as non-cited violations, are not being cited because they were self-identified, non-repetitive, and corrective action was 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             | Ken Lambert     |  | 4/23/14 |
| BRANCH CHIEF              | Aaron T. McCraw |  | 5/2/14  |

STW  
5/2/14

## Docket File Information

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April 23, 2014

## 6. INSPECTION PROCEDURES USED

87130

## 7. INSPECTION FOCUS AREAS

03.01 - 03.08

## SUPPLEMENTAL INSPECTION INFORMATION

## 1. PROGRAM CODE(S)

2121

## 2. PRIORITY

5

## 3. LICENSEE CONTACT

Calvin Koski, RSO

## 4. TELEPHONE NUMBER

(906) 524-6166

☒ Main Office Inspection

Next Inspection Date: April 23, 2019

☐ Field Office Inspection☐ Temporary Job Site Inspection

## PROGRAM SCOPE

The licensee was a small community hospital authorized for radioactive materials under 35.100, 35.200 and 31.11. The hospital employed one part time technologist who is also the radiation safety officer (RSO). The licensee's staff performs 8 - 10 studies per month, with 80 percent cardiac and the remainder primarily bone and gallbladder. The licensee performed studies Monday thru Friday. The licensee received unit doses from a local nuclear pharmacy and received 50 millicuries of bulk tech on days when the technologist was present. The licensee had contracted with a health physics consultant who conducts an annual visit of the facility to perform the annual review of the radiation safety program and calibrate survey instruments.

## PERFORMANCE OBSERVATIONS

Licensed material was observed adequately secured within the hot lab during the inspection and was not readily accessible to members of the general public. Interviews conducted with the technologist/RSO revealed an adequate level of understanding of radiation safety practices and emergency procedures. The inspector reviewed dose calibrator daily checks, quarterly linearity and annual accuracy checks, package receipt surveys, daily and weekly surveys, waste handling and disposal. The RSO demonstrated daily dose calibrator checks, package receipt surveys, and daily and weekly surveys.

The licensee exchanged badges on a quarterly basis and used a NVLAP approved vendor. Records reviewed indicated that the maximum exposures were 5 millirem (mrem) deep-dose equivalent (DDE) and 87 mrem shallow-dose equivalent (SDE) for 2014 through April 14; 33 mrem DDE and 140 mrem SDE for 2013; 35 mrem DDE and 270 mrem SDE for 1012; 40 mrem DEE and 570 mrem SDE for 2012; and 85 mrem DDE and 2080 mrem SDE for 2010.

Independent measurements take in the hot lab, imaging and unrestricted areas were indistinguishable from background.

No violations of regulatory requirements were identified.