

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED:

St. John Hospital & Medical Center
ATTN: Nuclear Medicine
22101 Moross Road
Detroit, Michigan 48236-2172

REPORT NUMBER(S) 2016001

2. NRC/REGIONAL OFFICE

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

3. DOCKET NUMBER(S)

030-02028

4. LICENSE NUMBER(S)

21-03210-01

5. DATE(S) OF INSPECTION

May 26, 2016

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:

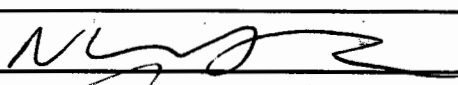
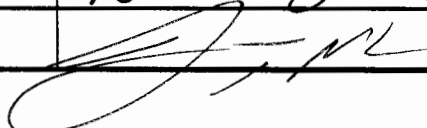
- ☒ 1. Based on the inspection findings, no violations were identified.
- ☐ 2. Previous violation(s) closed.
- ☐ 3. The violation(s), specifically described to you by the inspector as non-cited violations, are not being cited because they were self-identified, non-repetitive, and corrective action was 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	Navid Tehrani		5/26/16
BRANCH CHIEF	Aaron McCraw		6/14/16

Docket File Information**SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION**

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6. INSPECTION PROCEDURES USED

87131 & 87132

7. INSPECTION FOCUS AREAS

03.01-03.08

SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM CODE(S)

02230

2. PRIORITY

2

3. LICENSEE CONTACT

Laura Smith

4. TELEPHONE NUMBER

(313) 343-7719

☒ Main Office Inspection Next Inspection Date: 05/26/2018

☒ Field Office Inspection 19229 Mack Avenue, Grosse Point Woods, MI

☐ Temporary Job Site Inspection

PROGRAM SCOPE

This was an unannounced routine inspection of a large hospital authorized by its NRC license to use unsealed byproduct material authorized by 10 CFR 35.100, 35.200, 35.300, 35.400, 35.600, and 35.1000 (I-125 treatments) at its facility in Detroit, Michigan. The licensee receives one Mo/Tc-99 generator (and unit doses for as needed tests) each week from a local radiopharmacy for a wide variety of diagnostic procedures. The hospital employs four full-time and one part-time technologists who perform approximately 15 diagnostic procedures per day and 10-15 HDR procedures per month. The hospital retains the services of a hospital employed medical physicist to perform instrument calibrations, sealed source leak tests, quarterly audits of the radiation safety program and annual ALARA audits. These audits are then reviewed on a quarterly basis by a Radiation Safety Committee (RSC).

Interviews of available staff revealed an adequate level of understanding of emergency and material handling procedures and techniques. Dose calibrator constancy checks, package receipt, daily surveys, and waste handling and disposal procedures were successfully demonstrated. The inspector was not able to observe the preparation and administration of any procedures since none were scheduled at the time of the inspection. The inspector also reviewed seven I-131 and one brachytherapy written directives and four HDR written directives with no concerns to note. The inspector was unable to observe any therapies because none were scheduled during the time of the inspection. A hospital employed medical 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 radiation survey meters that were calibrated, operational, and performed well in side-by-side comparison with an NRC instrument. Independent measurements did not indicate readings in excess of Title 10 of the Code of Federal Regulations (10 CFR) Part 20 limits in restricted or unrestricted areas. Personal whole body and extremity dosimetry were observed worn by the staff during the inspection, and records did not indicate doses in excess of 10 CFR Part 20 limits.

No violations of NRC requirements were identified during this inspection.