

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED:

Aspirus Keweenaw Hospital
205 Osceola Street
Laurium, MI 49913

REPORT NUMBER(S) 2016-001

2. NRC/REGIONAL OFFICE

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

3. DOCKET NUMBER(S)

030-18138

4. LICENSE NUMBER(S)

21-20242-01

5. DATE(S) OF INSPECTION

JUNE 15TH, 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.

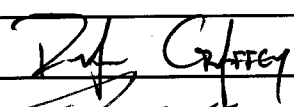
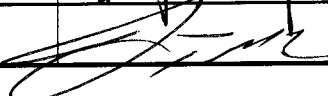
Non-cited violation(s) were discussed involving the following requirement(s):

- ☐ 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	Ryan Craffey		6/15/16
BRANCH CHIEF	Aaron McCraw		6/24/16

Docket File Information

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3. DOCKET NUMBER(S) 030-18138	4. LICENSE NUMBER(S) 21-20242-01	5. DATE(S) OF INSPECTION June 16, 2016	
6. INSPECTION PROCEDURES USED 87130	7. INSPECTION FOCUS AREAS All		

SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM CODE(S) 02121	2. PRIORITY 5	3. LICENSEE CONTACT Greg Fisher, CNMT - RSO	4. TELEPHONE NUMBER (906) 337-6568
<input checked="" type="checkbox"/> Main Office Inspection Next Inspection Date: 06/16/2021 <input type="checkbox"/> Field Office Inspection <input type="checkbox"/> Temporary Job Site Inspection			

PROGRAM SCOPE

This was an unannounced routine inspection of a community hospital authorized to use byproduct material for diagnostic medical purposes at its facility in Laurium, Michigan, and at an affiliated hospital in Ontonagon, Michigan. At the time of the inspection, two nuclear medicine technologists (one of which was the RSO) performed around 30 cardiac stress tests and 15 general diagnostic administrations per month. The licensee performed these administrations weekdays at the hospital in Laurium, expect for two Tuesdays per month, when one technologist traveled to Ontonagon to perform one or two administrations there in the morning. The licensee retained the services of a consulting physicist to review the content and implementation of the radiation safety program quarterly.

PERFORMANCE OBSERVATIONS

The inspector toured the hospital in Laurium, Michigan to evaluate the licensee's measures for materials security, hazard communication and exposure control. The inspector did not visit the Ontonagon facility, as no administrations were scheduled there that week. The inspector conducted independent and confirmatory surveys of the Laurium facility, and found no residual contamination or exposures to members of the public in excess of regulatory limits. The inspector observed the administration of one cardiac stress test while on-site, and verified the licensee's inventory of sealed sources. The licensee's staff demonstrated and discussed the implementation of procedures for dose calibrator quality control, package receipt, decay-in-storage waste handling, and area surveys. Through these observations and discussions, the inspector found the licensee's staff to be knowledgeable of radiation protection principles and regulatory requirements.

The inspector reviewed a selection of the licensee's records for package receipts, area surveys, waste handling, dose administration, survey meter calibrations, worker instruction including hazmat training and testing, dosimetry, and consulting physicist audits. The licensee had recently developed and implemented a protocol for breast lymphoscintigraphy injections; the inspector also reviewed this protocol and found that it appeared to incorporate satisfactory radiation safety practices.

No violations of NRC requirements were identified as a result of this inspection.