

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED:

Franciscan St. Elizabeth Health Lafayette
Nuclear Medicine Department
1701 S. Creasy Lane
Lafayette, IN 47905

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)

030-01642

4. LICENSE NUMBER(S)

13-09788-01

5. DATE(S) OF INSPECTION

October 18, 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 violations(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.


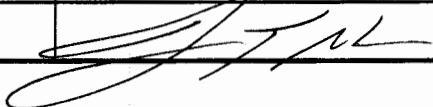
Non-cited violation(s) were discussed involving the following requirement(s):

- ☐ 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	Luis Nieves Folch		10-18-16
BRANCH CHIEF	Aaron T. McCraw		11/4/16

Docket File Information

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6. INSPECTION PROCEDURES USED

87131

7. INSPECTION FOCUS AREAS

03.01-03.08

SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM CODE(S)

02120

2. PRIORITY

3

3. LICENSEE CONTACT

Robert T. Anger, Jr

4. TELEPHONE NUMBER

(765) 447-6811

☒ Main Office Inspection Next Inspection Date: October 17, 2019

☒ Field Office Inspection Rensselaer, Indiana

☐ Temporary Job Site Inspection

PROGRAM SCOPE

This was an unannounced routine inspection of a 175-bed hospital in Lafayette, Indiana and a 25-bed hospital in Rensselaer, Indiana.

The Lafayette location is authorized by the NRC license to use unsealed byproduct material for diagnostic and therapeutic procedures under 10 CFR 35.100, 35.200, and 35.300. At this facility, the licensee had two hot labs. One hot lab was used for cardiac studies and was staffed with two full-time nuclear medicine technologist (NMT) that performed 5 cardiac studies a day. The other hot lab was staffed by one full-time NMT that performed 3 diagnostic procedures per day and therapies. This location operated Monday through Friday.

At the Rensselaer location, the hospital employed one full-time NMT who staffed the department on Mondays, Wednesdays, and Fridays. At this location, the licensee performed three diagnostic procedures per day. The licensee did not administer therapeutic dosages at this location.

Performance Observation.

The inspector observed three diagnostic administrations of licensed materials. The inspector toured the nuclear medicine departments and hot labs to evaluate the licensee's measures for materials security, hazard communication, and exposure control. Through observation and interviews, the inspector determined that licensee personnel had an adequate level of understanding of emergency and material handling procedures and techniques. Licensee personnel successfully demonstrated dose calibrator constancy checks, package receipt surveys, daily surveys, and waste handling and disposal procedures. An outside consultant served as the Radiation Safety Officer and also performed quarterly program audits that the inspector determined were adequate to oversee the program. The inspector observed survey meter that was calibrated, operational, and performed well in side-by-side comparison with an NRC instrument.

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