

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED:

Jackson County Schneck Memorial Hospital
411 West Tipton
P.O. Box 490
Seymour, IN 47274

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)

030-01622

4. LICENSE NUMBER(S)

13-05605-01

5. DATE(S) OF INSPECTION

October 20, 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.

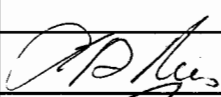
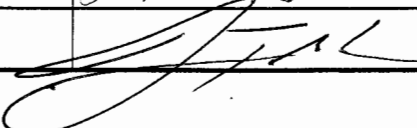
Non-cited violation(s) were discussed involving the following requirement(s):

- ☐ 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	Luis Nieves Folch		10-20-16
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

Lisa Cosby, RSO

4. TELEPHONE NUMBER

(812) 522-0145



Main Office Inspection

Next Inspection Date: October 20, 2019



Field Office Inspection



Temporary Job Site Inspection

PROGRAM SCOPE

This was an unannounced routine inspection of a 96-bed community hospital authorized for medical use of 10 CFR 35.100, 35.200, and 35.300 byproduct materials that performed about 6 studies per day, with 50-60 percent cardiac and the remaining bone and HIDA studies using technetium-99m (Tc-99m) as unit doses prepared by a local nuclear pharmacy. The licensee's security staff escorted the nuclear pharmacy delivery person to the hot lab. The licensee occasionally performed lung studies using xenon-133. The licensee had not administered iodine-131 requiring written directives since 2008. The licensee received a 100-millicurie bulk dose of Tc-99m occasionally for after hours and emergency studies. The licensee employed 3 full time technologists who also performed ultrasound procedures. One of the technologists was the radiation safety officer. The licensee contracted with a health physics service who performed quarterly audits of the radiation safety program. The radiation safety committee met every six months. Waste was either held for decay in storage or returned to the nuclear pharmacy.

Performance Observations:

The inspector observed that radioactive materials were properly secured when not in use or under the constant surveillance of licensee personnel. The inspector observed the injection of Tc-99m to a patient. Licensee personnel demonstrated/discussed daily checks of the dose calibrator and survey instruments, package receipt, and daily surveys. The inspector reviewed the following records: patient doses; instrument calibrations; daily and weekly surveys; dose calibrator daily checks, quarterly linearity test, and annual accuracy test; well counter daily checks; inventories; leak tests; waste disposals; and training. The inspector also reviewed radiation safety committee meeting minutes and the quarterly consultant reports. Interviews with licensee staff indicated an adequate knowledge of radiation safety concepts and procedures. The inspector observed the staff wearing appropriate dosimetry. The inspector performed independent and confirmatory radiation measurements, which indicated results consistent with licensee survey records and were below regulatory limits.

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