

(07-2012)
10 CFR 2.201

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED:

Mercy Health Partners
d/b/a Mercy Health Muskegon
1500 East Sherman Boulevard
Muskegon, MI 49444

REPORT NUMBER(S) 2017001

2. NRC/REGIONAL OFFICE

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

3. DOCKET NUMBER(S)

030-02016

4. LICENSE NUMBER(S)

21-02187-01

5. DATE(S) OF INSPECTION

January 18, 2017

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.

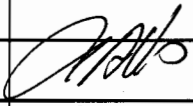
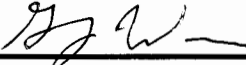
Non-cited violation(s) were discussed involving the following requirement(s):

- ☐ 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		2/1/17
BRANCH CHIEF	Aaron T. McCraw	 for ATM	2/1/17

Docket File Information

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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

Jennifer H. Fisher, MS- RSO

4. TELEPHONE NUMBER

(231) 672-2011

☐ Main Office Inspection Next Inspection Date: January 18, 2019

☒ Field Office Inspection 1440 East Sherman Blvd, 1700 Clinton St.

☐ Temporary Job Site Inspection

PROGRAM SCOPE

This was an unannounced routine inspection of a local healthcare system authorized to use byproduct material under 10 CFR 35.100, 200, 300, 400, and 600 among four locations in Muskegon, Michigan. At the time of the inspection, the licensee performed a full spectrum of diagnostic nuclear medicine studies at its main facility and at the Clinton Street location. The licensee performed six therapeutic administrations of I -131 in the last year at the Clinton Street location. The licensee's radiation oncology department performed two gynecological HDR treatments per month and nine prostate seed implants in 2015. In 2016, the licensee did not perform any prostate seed implants. The licensee retained the services of a medical physics consultant to perform quarterly audits of each nuclear medicine department. The licensee also maintained a quarterly radiation safety committee.

PERFORMANCE OBSERVATIONS

The inspector toured the nuclear medicine department at the Clinton street location to evaluate the licensee's measures for materials security, hazard communication, and exposure control. The inspector observed the preparation and administration a MUGA scan and a HIDA scan using Tc-99m. The inspector conducted independent and confirmatory surveys and found no residual contamination or exposures to members of public in excess of regulatory limits. The technologists on staff demonstrated implementation of procedures for package receipt; administration of I -131 therapies, including patient release evaluation; area surveys; and waste handling. The inspector observed a fraction of an HDR administration. The licensee also demonstrated HDR daily checks and brachytherapy treatment planning and verification. Through these demonstrations and other discussions, the licensee's staff demonstrated adequate knowledge of radiation protection principles, licensee procedures, and NRC requirements. The inspector reviewed the licensee's records for the administration of byproduct material requiring a written directive, including several I-131 therapies, as well as a selection of HDR and brachytherapy treatments, performed since the last inspection. The inspector also reviewed a selection of nuclear medicine records, dosimetry, quarterly audits and RSC meeting minutes.

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