

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED:

DLP Marquette General Hospital, LLC
d/b/a UP Health System - Marquette
580 W. College Ave.
Marquette, MI 49855

REPORT NUMBER(S) 2019001

2. NRC/REGIONAL OFFICE

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

3. DOCKET NUMBER(S)

030-18133

4. LICENSE NUMBER(S)

21-05432-04

5. DATE(S) OF INSPECTION

May 22, 2019

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:

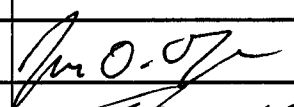

- ☒ 1. Based on the inspection findings, no violations were identified.
- ☐ 2. Previous violation(s) closed.
- ☐ 3. The violation(s), specifically described to you by the inspector as non-cited violations, are not being cited because they were self-identified, non-repetitive, and corrective action was 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	Jason D. Draper, Health Physicist		5/22/19
BRANCH CHIEF	Aaron T. McCraw		6/17/19

Docket File Information

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May 21-22, 2019

6. INSPECTION PROCEDURES USED

87131

7. INSPECTION FOCUS AREAS

03.01-03.09

SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM CODE(S)

02240

2. PRIORITY

2

3. LICENSEE CONTACT

Renee Brundin, Director of Imaging

4. TELEPHONE NUMBER

(906) 225-3328

- ☒ Main Office Inspection Next Inspection Date: 05/21/2021
- ☒ Field Office Inspection 580 W. Magnetic St and 850 W. Baraga Ave.
- ☐ Temporary Job Site Inspection

PROGRAM SCOPE

This was an unannounced, routine inspection of a hospital in Marquette, Michigan authorized to use byproduct material permitted by 10 CFR 35.100, 200, and 300, as well as yttrium-90 SIR-Spheres. At the time of the inspection, the licensee was in the process of moving operations from the College Ave and Magnetic St locations to the new hospital on Baraga Ave and planned to complete the move during the week of June 2, 2019. The licensee employed 6 NMTs and received Mo-99/Tc-99m generators as well as bulk and unit dosages from a local radiopharmacy to perform a variety of diagnostic nuclear medicine procedures daily. They also administered unit dosages of F-18 for PET studies Wednesday-Friday using a mobile PET unit. In addition, the licensee performed approximately 8-10 Ra-223 Xofigo treatments per year and 3-5 I-131 treatments per year. The licensee had not performed any SIR-Sphere treatments since the last inspection. At the time of the inspection, the only material at the new location were sealed sources. The licensee's radiation safety program was reviewed quarterly by a medical physics consultant.

PERFORMANCE OBSERVATIONS

The inspector toured both hospital locations to observe material security, postings, and any other potential hazards to the material. The inspector observed the preparation and administration of three diagnostic dosages, and interviewed the NMTs with regard to package receipt, material handling, emergency procedures, and surveys. The inspector also performed independent surveys of the storage and administration areas and did not identify any radiation readings that could result in excessive exposures. A review of records associated with written directives, inventories, leak tests, dose calibrator tests, spill reports, surveys, dosimetry, radiation safety training, and radiation safety program reviews did not reveal any issues.

At the time of the inspection the licensee was preparing to move all their operations to a new hospital building. The licensee planned on contracting their radiopharmaceutical supplier to transport the licensed material to the new hospital building as well as contracting their medical physics consultant to facilitate the installation and testing of the licensee's equipment as well as validating the licensee's shielding calculations for the new PET administration areas.

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