NRC FORM 591M PART 1
(10-2003)
10 CFR 2.201

U.S. NUCLEAR REGULATORY COMMISSION

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED:	2. NRC/REGIONAL OFFICE
Bronson Methodist Hospital 601 John Street Kalamazoo, Michigan 49007 REPORT 2006-001	REGION III US NUCLEAR REGULATORY COMMISSION 2443 WARRENVILLE ROAD, SUITE 210 LISLE, ILLINOIS 60532

3. DOCKET NUMBER(S)	4. LICENSEE NUMBER(S)	5. DATE(S) OF INSPECTION
030-02146	21-13125-01	March 14, 2006

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, NUREG-1600, to exercise discretion, were satisfied.

_____ Non-Cited Violation(s) was/were discussed involving the following requirement(s) and Corrective Action(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. This form is a NOTICE OF VIOLATION, which may be subject to posting in accordance with 10 CFR 19.11.

(Violations and Corrective Actions)

Licensee's Statement of Corrective Actions for Item 4, above.

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	Geoffrey M. Warren		3/14/06

NRC FORM 591M PART 3
(10-2003)
10 CFR 2.201

U.S. NUCLEAR REGULATORY COMMISSION

Docket File Information
SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE	2. NRC/REGIONAL OFFICE
Bronson Methodist Hospital REPORT NUMBER(S) 2006-001	**Region III**

3. DOCKET NUMBER(S)	4. LICENSE NUMBER(S)	5. DATE(S) OF INSPECTION
030-02146	21-13125-01	March 14, 2006

6. INSPECTION PROCEDURES USED	7. INSPECTION FOCUS AREAS
87131, 87132	03.01 - 03.07; 03.01 - 03.07

SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM CODE(S)	2. PRIORITY	3. LICENSEE CONTACT	4. TELEPHONE NUMBER
02240	2	Mark Watts, CNMT, RSO	269-341-6240

[X] Main Office Inspection — Next Inspection Date: **March 2008**

[X] Field Office 252 East Lovell St., Kalamazoo, MI

[ ] Temporary Job Site

PROGRAM SCOPE

The licensee was a 300-bed hospital located in Kalamazoo, Michigan. Licensee had authorization to use byproduct materials under Sections 35.100, 35.200, 35.300, and 35.400, as well as for intravascular brachytherapy (IVB). In addition, licensee was authorized for and possessed licensed material in a blood irradiator. Licensed activities were conducted only at the locations indicated on the license.

The nuclear medicine department was staffed with five full-time and one part-time nuclear medicine technologists. The licensee's nuclear medicine staff typically administered 600 diagnostic doses monthly in the nuclear medicine area. Doses were primarily technetium-99m for cardiac, bone, and other studies. In addition, licensee performed occasional studies using other isotopes. Doses were received as unit doses from a licensed radiopharmacy or prepared from bulk technetium. Licensee performed around 10 iodine-131 treatments monthly, including whole-body scans, hyperthyroid treatments, and thyroid ablations with the iodine-131 in capsule form. In addition, the licensee performed occasional radiopharmaceutical therapies using other isotopes. All waste was held for decay in storage; unused doses were returned to the radiopharmacy.

The radiation therapy staff performed around five temporary seed implants annually. These therapies were performed at this facility by an outside therapy group whose doctors were authorized under this license, and all required records were retained at this facility. The licensee had discontinued IVB therapies, had returned the sources to the manufacturer, and intended to remove the authorization from the license.

Performance Observations

The inspector observed one diagnostic administration of licensed material including dose preparation, administration, and disposal, and identified no issues with the procedures. Licensee personnel demonstrated package receipt, dose calibrator constancy tests, survey meter daily checks, and daily contamination surveys, as well as procedures for the use of the blood irradiator. The inspector found no concerns with these activities. The inspector reviewed written directives for radiopharmaceutical therapies and temporary seed implants and found no issues. Interviews with licensee staff indicated adequate knowledge of radiation safety procedures. Radiation surveys indicated radiation levels consistent with licensee postings.