ENCLOSURE 5

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
Parkview Hospital **2200 Randallia Dr.** **Fort Wayne, IN 46805** REPORT 2006/001	**Nuclear Regulatory Commission** **Region III** **2443 Warrenville Road, Suite 210** **Lisle, Illinois 60532**

3. DOCKET NUMBER(S)	4. LICENSEE NUMBER(S)	5. DATE(S) OF INSPECTION
030-01593	**13-01284-02**	03/22/2006

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 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	**Tony Go**		03/22/2006

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
Parkview Health REPORT 2006/001	Region III

3. DOCKET NUMBER(S)	4. LICENSE NUMBER(S)	5. DATE(S) OF INSPECTION
030-01593	13-01593-02	03/ 22 /06

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

SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM	2. PRIORITY	3. LICENSEE CONTACT	4. TELEPHONE NUMBER
2240	2	Subhash C. Sharma, Ph.D.	260-373-7884

[X] Main Office Inspection — Next Inspection Date: 03/08

[X] Field 2500 E. State Blvd, Fort Wayne, IN

[ ] Temporary

PROGRAM SCOPE

The licensee is a large 450-bed hospital with a large nuclear medicine (NM) department, and a separate facility for outpatient oncology clinic located at a 2500 E. State Blvd., Fort Wayne. This main facility is located in Randallia drive, Fort Wayne, Indiana. At the main facility, the NM department staff performed approximately 400 diagnostic procedures per month. In addition, the department also performed 120 hyperthyroid therapies per year using I-131 capsules with doses greater than 5 mCi, and approximately 30 ablation therapies per year with doses between 100 and 200 mCi of I-131. The licensee also performed approximately three "Bexxar Radioimmunotherapy" procedures containing I-131 radiopharmaceutical to treat non Hodgkin's lymphoma. All doses were ordered through a radiopharmacy in Fort Wayne, Indiana. The licensee employed six technologists at the NM department. The Oncology Clinic and the NM department were independently operated; however, both departments were under the oversight of the Radiation Safety Committee and the appointed RSO.

The medical staff at the oncology clinic also performed permanent prostate implants with I-125 seeds at the licensee's new surgical suite. Additionally, the staff also performed low dose LDR brachytherapies using Cs-137 tubes at the hospital. The licensee also performed HDR therapies using Nucletron Microselectron HDR at the clinic where the HDR unit was stored at the LINAC room. At the clinic, the oncology staff performed approximately more than 120 fractions for lung and gynecological therapies per year with the HDR unit.

Performance Observations

During the inspection, the licensee's NM technologists demonstrated the following activities to the inspector: (1) a daily radiation survey; (2) a weekly removable contamination survey; (3) a package receipt and a return survey; and (4) a daily dose calibrator constancy check. The inspector observed few administrations of NM doses, and during the administration, the inspector observed that technologists and the authorized staffs used both whole body and extremity dosimeters during administration and during handling of licensed materials. In addition, technologists were observed using syringe shields, dosimeters, lab coats and gloves while administering radioactive materials. The inspector did not identify any radioactive contaminations at the unrestricted areas near the hot lab at the NM department.

The HDR unit maintenance record was also reviewed during the inspection, and no safety problems were identified during the quarterly preventive maintenance by the manufacturer's representative. The licensee also retained a consultant physicist to audits the licensee's radiation safety programs. No violations of NRC requirements were identified during the inspection.