

**SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION**

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1 LICENSEE/LOCATION INSPECTED: Mt Clemens Gen Hospital 1000 Harrington Blvd Mt. Clemens, MI 48042 REPORT 2006001	2. NRC/REGIONAL OFFICE US Nuclear Regulatory Commission 2443 Warrenville Rd Suite 210 Hisle, IL 60532
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3 DOCKET NUMBER(S) 03002040	4. LICENSEE NUMBER(S) 21-04080-01	5. DATE(S) OF INSPECTION April 6, 2006
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**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	G. Parker		4/6/06

**Docket File Information**  
**SAFETY INSPECTION REPORT  
AND COMPLIANCE INSPECTION**

1. LICENSEE <b>Mt. Clemens General Hospital</b> REPORT NUMBER(S) 2006-001		2. NRC/REGIONAL OFFICE Region III 2443 Warrenville Road Liste, IL 60532	
3. DOCKET NUMBER(S) 030-04080	4. LICENSE NUMBER(S) 21-04080-01	5. DATE(S) OF INSPECTION 4/6/06	
6. INSPECTION PROCEDURES USED 87131	7. INSPECTION FOCUS AREAS 03.01-03.07		

**SUPPLEMENTAL INSPECTION INFORMATION**

1. PROGRAM CODE(S) 2230	2. PRIORITY 2	3. LICENSEE CONTACT A. Lewis Katzowitz, M.D.	4. TELEPHONE NUMBER 810/493-8000
<input checked="" type="checkbox"/> Main Office Inspection		Next Inspection Date: 4/2008	
<input type="checkbox"/> Field Office			
<input type="checkbox"/> Temporary Job Site			

**PROGRAM SCOPE**

Licensee is a small regional hospital located in Mt. Clemens, Michigan (north of Detroit). Licensee has a moderate sized nuclear medicine program conducting a host of procedures. The licensee has four techs who perform approximately 20 procedures per day. This hospital receives its radiopharmaceuticals in the form of unit doses from Mallinckrodt and occasional doses from G. E. Health. This licensee performs cardiac stress studies, diagnostic iodine procedures, bone studies, gastric studies and other work using licensed materials.

**Performance Observations**

The inspector toured the facilities and interviewed authorized users and staff members. Each appeared knowledgeable in radiation safety and radionuclide handling techniques. Licensee personnel demonstrated package receipt procedures for the inspector. Staff members also demonstrated proper rad waste handling practices. Independent surveys by the inspector did not detect any abnormal reading and were within the expected range.

The inspector observed members of the nuclear medicine staff perform injections of licensed materials. Techniques employed by the staff demonstrated good handling practices as well as an adequate knowledge of radiation safety. During the course of the inspection, no abnormalities were noted.

Licensee has added a HDR unit to its procedures listing since the last inspection. The inspector reviewed daily check of equipment and written directives for the treatments delivered by HDR. Checks of equipment and training of staff were adequate. No errors were observed in the written directives reviewed.