

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED:

Mc Laren Regional Med Ctr
401 S. Ballenger Hwy
Flint, MI 48532

2. NRC/REGIONAL OFFICE

U.S. Nuclear Regulatory Commission
Region III
2443 Warrenville Road
Lisle, Illinois 60532

REPORT

2006-001

3. DOCKET NUMBER(S)

030-02048

4. LICENSEE NUMBER(S)

21-04174-04

5. DATE(S) OF INSPECTION

April 4, 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

George Parker

4/4/06

(10-2003)
10 CFR 2.201**Docket File Information**
SAFETY INSPECTION REPORT
AND COMPLIANCE INSPECTION

1. LICENSEE McLaren Regional Med Ctr REPORT NUMBER(S) 2006-001		2. NRC/REGIONAL OFFICE Region III 2443 Warrenville Road Lisle, IL 60532	
3. DOCKET NUMBER(S) 030-02048	4. LICENSE NUMBER(S) 21-04171-01	5. DATE(S) OF INSPECTION 4/04/06	
6. INSPECTION PROCEDURES USED 87130	7. INSPECTION FOCUS AREAS 03.01-03.07		
SUPPLEMENTAL INSPECTION INFORMATION			
1. PROGRAM CODE(S) 2240	2. PRIORITY 2	3. LICENSEE CONTACT Blake Berman, M.D.	4. TELEPHONE NUMBER 810/342-2000
<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 the regional medical center located in Flint, Michigan. Licensee has a large nuclear medicine program conducting routine diagnostic, imaging, and therapy procedures. The licensee has three techs who perform approximately 15 cardiac procedures per day. This hospital receives its radiopharmaceuticals in the form of unit doses from both Amersham and Cardinal Health. This hospital also performs approximately two to three iodine therapies per week using encapsulated iodine.

Performance Observations

The inspector toured the facilities and interviewed authorized users and staff members. Each appeared knowledgeable in radiation safety and isotope handling techniques. Package receipt procedures were demonstrated for the inspector as well as rad waste handling practices. Independent surveys by the inspector did not detect any abnormal reading and were within the expected range.

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

The inspector also toured the cancer center. Staff members demonstrated the daily checks of the HDR unit. All were completed satisfactorily. The inspector reviewed a selection of written directives for this modality. No errors were noted. The inspector reviewed the last source exchange and the associated source return. No abnormalities were detected.