NRC FORM 591M PART 1 U.S. NUCLEAR REGULATORY COMMISSION
(10-2003)
10 CFR 2.201

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED:	2. NRC/REGIONAL OFFICE
Children's Hospital of Michigan **3901 Beaubien Blvd.** **Detroit, MI 48201** REPORT **2006-001**	**U.S. Nuclear Regulatory Commission** **Region III** **2443 Warrenville Road** **Lisle, Illinois 60532-4351**

3. DOCKET NUMBER(S)	4. LICENSEE NUMBER(S)	5. DATE(S) OF INSPECTION
030-13166	**21-03298-05**	May 10, 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:

X	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	**Ken Lambert**	Ken Lambert	5/16/06

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
Children's Hospital of Detroit REPORT 2006001	Region III 2443 Warrenville Road Lisle, IL 60532

3. DOCKET NUMBER(S)	4. LICENSE NUMBER(S)	5. DATE(S) OF INSPECTION
030-13166	21-03298-05	May 10, 2006

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

SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM	2. PRIORITY	3. LICENSEE CONTACT	4. TELEPHONE NUMBER
2120	G3	Chad M. Grant, RSO	313/745-0090

[X] Main Office Inspection — Next Inspection Date: May 2009

[ ] Field

[ ] Temporary Job Site

PROGRAM SCOPE

This active medical program performs about 150 to 180 diagnostic nuclear medicine procedures monthly. The department consists of 3 full-time and 1 part-time technologists. The licensee does not use xenon-133 or moly/tc99 generators. Unit doses are received from an area pharmacy. The licensee has not performed any I-131 treatments since the last inspection. The license authorizes several labs that utilize primarily H-3, C-14, P-32 and Cr-51 for in vitro clinical diagnosis and laboratory research.

Performance Observations

Interviews conducted with available staff revealed an adequate level of understanding of emergency and material handling procedures and techniques. Dose calibrator constancy checks, area surveys, package check-in procedures and injection techniques were successfully demonstrated or described. Proper personal dosimetry was observed being worn by available staff during the inspection.

The hot-lab room was observed locked upon arrival and adequate surveillance was well maintained during the inspection. Licensed material was not readily accessible to members of the general public.

Independent measurements were performed and indicated 0.2 mr/hr maximum in the hot-lab area and indistinguishable from background in imaging and unrestricted areas.

Personal dosimetry records reviewed for 2005 indicated 310 mRem extremity and 25 mRem whole-body. YTD 2006 demonstrated "M" extremity and 3 mRem whole-body.

Labs observed were locked and radioactive materials were adequately stored and secured. Use of radioactive materials in research is very limited, with no current research utilizing radioactive materials. In vitro diagnostic studies primarily use H-3. Diagnostic studies were not currently being performed.

The radioactive material waste storage area was observed locked and properly posted. Area surveys outside the storage room indicated measurements that were indistinguishable from background.