| 1. LICENSEE/LOCATION INSPECTED:   |  |   | 2. NRC/REGIONAL OFFICE   |   |                           |
|---|--|---|--|---|---------------------------|
| Saint Joseph's Hospital<br>1900 Medical Arts Drive<br>Huntingburg, IN 47542 |  |   | UNITED STATES<br>NUCLEAR REGULATORY COMMISSION<br>REGION III<br>2443 WARRENVILLE ROAD, SUITE 210<br>LISLE, IL 60532-4352 |   |                           |
| REPORT 20<br>3. DOCKET NUMBER(S)  | 06-001   | EE NUMBER(S)                                  |  | 5. DATE(S)                              | OF INSPECTION             |
| 030-355   |  | 13-32277                                      | 7-01   | May 18                                  | 2006                      |
| LICENSEE:   |  |   | <b>.</b>   |   |                           |
| Nuclear Regulatory Commis<br>of procedures and represen                     | nination of the activities conduc<br>ssion (NRC) rules and regulation<br>tative records, interviews with p<br>spection findings, no violations w | ns and the conditions<br>ersonnel, and observ | of your license. Th  | ne inspection consisted or              | f selective examina       |
| 2. Previous violatio  | n(s) closed.<br>specifically described to you by   | -3  |  |   | av ware self-identifi     |
| non-repetitive, and   | corrective action was or is being  | taken, and the remain                         | ning criteria in the N   | RC Enforcement Policy, N                | UREG-1600, to             |
| exercise discretion,  |  | t .   | • B • • • • • • • • • •  |   | 2(2):                     |
| No  | on-Cited Violation(s) was/were di  | scussed involving the                         | following requireme  | nt(s) and Corrective Actio              | n(s):                     |
|   |  |   |  |   |                           |
|   |  |   |  |   |                           |
|   |  |   |  |   |                           |
| 4. During this insp   | ection certain of your activities, a   | s described below an                          | d/or attached, were i  | n violation of NRC require              | ments and are beir        |
|   | NOTICE OF VIOLATION, whic  | n may be subject to p                         | osting in accordance   |   |                           |
| (Violations and   | Corrective Actions)  |   |  |   |                           |
|   |  |   |  |   |                           |
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|   |  |   |  |   |                           |
|   |  |   |  |   |                           |
|   | Licensee's Staten  |   |  |   | This statement of         |
| corrective actions is made in   | ) days, the actions described by i<br>n accordance with the requireme  | nts of 10 CEB 2.201 (                         | corrective steps aire  | adv taken, corrective ster              | os which will be lake     |
| date when full compliance w<br>Title  | vill be achieved). I understand the<br>Printed Name  | at no further written re                      | sponse to NRC will i   | be required, unless specif<br>Signature | ically requested.<br>Date |
|   | Printed Name   |   |  | oignature                               |                           |
| LICENSEE'S  |  | · · · ·                                       |  |   | 1                         |
| LICENSEE'S<br>REPRESENTATIVE  |  |   |  |   |                           |

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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 |                          |  |  |  |  |  |  |
|---|--------------------|--|------------------------|--------------------------|--|--|--|--|--|--|
| Saint Joseph's Hospital   |                    |  | Region III             |                          |  |  |  |  |  |  |
| REPORT NUMBER(S) 2006-001   |                    |  |                        | 5. DATE(S) OF INSPECTION |  |  |  |  |  |  |
| 3. DOCKET NUMBER(S)   |                    | 4. LICENSE NUMBER(S)                   |                        |                          |  |  |  |  |  |  |
|   | 03035564           |  | 277-01                 | May 18, 2006             |  |  |  |  |  |  |
|   |                    | 7. INSPECTION FOCUS A<br>03.01 - 03.07 | neko                   |                          |  |  |  |  |  |  |
| 87130 03.01 - 03.07<br>SUPPLEMENTAL INSPECTION INFORMATION  |                    |  |                        |                          |  |  |  |  |  |  |
| 1. PROGRAM CODE(S) 2. PRIORITY 3. LICENSEE CONTACT 4. TELEPHONE NUMBER  |                    |  |                        |                          |  |  |  |  |  |  |
| 02121   | 5                  | Susan Persohn, CNMT                    |                        | 812/683-2121             |  |  |  |  |  |  |
| X Main Office Ir  | nspection          | Next Inspection Date:                  |                        | May 2011                 |  |  |  |  |  |  |
| Field Office  |                    |  |                        |                          |  |  |  |  |  |  |
| Temporary Jo  | Temporary Job Site |  |                        |                          |  |  |  |  |  |  |
| PROGRAM SCOPE   |                    |  |                        |                          |  |  |  |  |  |  |
|   |                    |  |                        |                          |  |  |  |  |  |  |
| The licensee was a medical institution authorized by the license to use any byproduct material as needed permitted by 10 CFR 35.100 and 35.200, excluding xenon-133 and generators, at the address specified on the license. The nuclear medicine department was staffed with one nuclear medicine technologist (NMT) who routinely conducts an average of 3 diagnostic studies on Monday, Wednesdays, and Fridays. Two to six diagnostic cardiac studies are scheduled for each Tuesday and Thursday each week. No I-131 is administered for uptakes or other diagnostic studies. The licensee receives unit doses and bulk vials for kit prep as ordered from a local Evansville, IN, nuclear pharmacy. All waste was held for decay-in-storage (DIS) or returned to the nuclear pharmacy as a limited quantity shipment. |                    |  |                        |                          |  |  |  |  |  |  |
| Performance Observations  |                    |  |                        |                          |  |  |  |  |  |  |
| During the inspection, the licensee's NMT demonstrated/discussed: (1) survey meter use and calibration; (2) package check-in procedures and wipe test counting; (3) dosimetry; (4) dose calibrator checks; (5) security of license materials; (6) unit dose prep and labeling; and (7) quarterly radiation safety program reviews.  |                    |  |                        |                          |  |  |  |  |  |  |
|   |                    |  |                        |                          |  |  |  |  |  |  |
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