

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED: Bell Memorial Hospital Ishpeming, Michigan REPORT 2007-001	2. NRC/REGIONAL OFFICE REGION III US NUCLEAR REGULATORY COMMISSION 2443 WARRENVILLE ROAD, SUITE 210 LISLE, ILLINOIS 60532
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3. DOCKET NUMBER(S) 030-13856	4. LICENSEE NUMBER(S) 21-02037-03	5. DATE(S) OF INSPECTION 1/23/07
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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	Michael M LaFranzo		1/23/07

**Docket File Information
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AND COMPLIANCE INSPECTION**



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3. DOCKET NUMBER(S) 030-13856	4. LICENSE NUMBER(S) 21-02037-03	5. DATE(S) OF INSPECTION 1/23/2007	
6. INSPECTION PROCEDURES USED 87130		7. INSPECTION FOCUS AREAS 3.1-3.7	

SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM CODE(S) 2120	2. PRIORITY G5	3. LICENSEE CONTACT Michael Altmann M.D. - RSO	4. TELEPHONE NUMBER 906-486-4431
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Main Office Inspection Next Inspection Date: **1/2012**

Field Office _____

Temporary Job Site _____

PROGRAM SCOPE

The licensee is authorized to conduct diagnostic procedures that do not require a written directive. Approximately 80 procedures are performed per month, a vast majority of them are cardiac imaging studies. The licensee receives a 2 Ci generator each week. Generators are delivered over the weekend. The licensee has one FTE technician which handles the day-to-day operations with RSO oversight. Typical times of operation are Monday thru Friday; 6:30 am to 2:00 pm.

Observations and Findings

The inspector determined that all licensed material was properly secured. The licensee staff interviewed has sufficient knowledge to ensure the safe handling of radioactive material. Checks on the dose calibrator and contamination surveys were performed as required. The licensee has not had an incident of lost material or a significant spill of radioactive material since the last inspection. The inspector performed a side-by-side comparison with the licensee's survey meters and found they were within 20% of one another. The inspector performed independent radiological surveys where licensed material is used and found no contamination.