NRC FORM 591M PART 1 (10-2003) 10 CFR 2.201

U.S. NUCLEAR REGULATORY COMMISSION

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED:	2. NRC/REGIONAL OFFICE
DMC/Sinai - Grace Hospital Detroit, MI REPORT 2007-001	**U.S. Nuclear Regulatory Commission** **Region III** **2443 Warrenville Road** **Suite 210** **Lisle, Illinois 60532-4351**

3. DOCKET NUMBER(S)	4. LICENSEE NUMBER(S)	5. DATE(S) OF INSPECTION
070-03072 030-01492	SNM-1991 21-00299-04	Feb 1, 2007

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.

One Non-Cited Violation(s) was/were discussed involving the following requirement(s) and Corrective Action(s):

Failure to use a properly prepared written directive for 2 I-131 hyperthyroid treatments administered on 4/27/06 and 5/1/06 as required by 10 CFR 35.40(a). Specifically, these two written directives were prepared and signed by physician who was not an authorized user. The licensee's consultant identified this violation during a summer 2006 audit. Corrective actions included training the Technologists and developing a list of authorized users for I-131 as a reference in the hot lab.

☐ 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	**Deborah A. Piskura**	D A Piskura	2/1/2007

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
DMC/Sinai-Grace Hospital REPORT **2007-001**	**Region III** **2443 Warrenville Road, Suite 210** **Lisle, IL 60532**

3. DOCKET NUMBER(S)	4. LICENSE NUMBER(S)	5. DATE(S) OF INSPECTION
030-01992 / 070-03072	21-00299-01 / SNM-1991	Feb. 1, 2007

6. INSPECTION PROCEDURES USED	7. INSPECTION FOCUS AREAS
87130, 87131, 87132	03.01, 03.02, 03.03, 03.04, 03.05, 03.06, 03.07, and 03.08

SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM CODE(S)	2. PRIORITY	3. LICENSEE CONTACT	4. TELEPHONE NUMBER
02230	G 2	Timothy Applegate, RT(N), RSO	313.966.4391

[X] Main Office Inspection — Next Inspection Date: Feb. 2009

[ ] Field

[ ] Temporary Job Site

PROGRAM SCOPE

This licensee was a medical institution, authorized to use licensed material permitted by Sections 35.100, 35.200, 35.300, 35.400, and Ir-192 within an HDR unit. The licensee also possessed several Sr-90 and Cs-137 calibration sources as well as a Sr-90 eye applicator; these sources were maintained in secured storage. The licensee was investigating disposal options for these materials.

The nuclear medicine department was staffed with six technologists who performed approximately 600 diagnostic nuclear medicine procedures per month. The licensee received unit doses and bulk Tc-99m from a licensed radiopharmacy. The hospital performed a full spectrum of nuclear diagnostic imaging studies. Typically, in a year, the hospital administered 5 iodine-131 thyroid carcinoma therapies, 30 hyperthyroidism treatments, and 10-15 whole body CA follow up studies. The hospital obtained its I-131 in capsule form. The department had not administered any beta-emitting radiopharmaceuticals since the previous inspection. Under License No. SNM-1991, the licensee maintained quarterly contacts with one Pu nuclear pacemaker patient (the last surviving case). The licensee retained the services of a consulting physicist to audit the nuclear medicine radiation safety activities on a quarterly basis.

The radiation therapy department was staffed with 1 medical physicists, 2 dosimetrists, and 2 physicians (authorized users). The department used I-125 for permanent prostate implants to treat approximately 3-4 cases per year. The oncology department possessed a Nucletron Classic HDR unit, however the unit had been maintained in secure storage and without a source since 2/2005. The licensee was considering resuming use of its HDR activities in the near future and acquiring a new HDR unit.

This inspection consisted of interviews with licensee personnel, a review of selected records, tours of the nuclear medicine and radiation oncology departments, independent measurements, and a confirmatory inventory of all calibration sources in the licensee's possession. The inspector observed licensee nuclear medicine personnel prepare, assay and administer a unit dose for a bone imaging procedure. The inspection included observations of security of byproduct material, use of personnel monitoring, dose calibrator QA checks, package receipts and surveys, and area surveys.

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