

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED:

Metropolitan Hospital (d/b/a Metro Health Hospital)
1919 Boston Ave., SE
Grand Rapids, Michigan 49506

2. NRC/REGIONAL OFFICE

REGION III
US NUCLEAR REGULATORY COMMISSION
2443 WARRENVILLE ROAD, SUITE 210
LISLE, ILLINOIS 60532

REPORT 2007-001

3. DOCKET NUMBER(S)

030-02134

4. LICENSEE NUMBER(S)

21-12829-01

5. DATE(S) OF INSPECTION

May 24, 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.

_____ 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

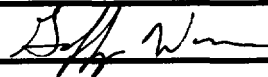
Signature

Date

LICENSEE'S
REPRESENTATIVE

NRC INSPECTOR

Geoffrey M. Warren



5/24/07

Docket File Information
SAFETY INSPECTION REPORT
AND COMPLIANCE INSPECTION

1. LICENSEE Metropolitan Hospital REPORT NUMBER(S) 2007-001		2. NRC/REGIONAL OFFICE Region III	
3. DOCKET NUMBER(S) 030-02134	4. LICENSE NUMBER(S) 21-12829-01	5. DATE(S) OF INSPECTION May 24, 2007	
6. INSPECTION PROCEDURES USED 87131	7. INSPECTION FOCUS AREAS 03.01 - 03.08		
SUPPLEMENTAL INSPECTION INFORMATION			
1. PROGRAM CODE(S) 02120	2. PRIORITY 3	3. LICENSEE CONTACT Jeffrey J. McClure, M.D., RSO	4. TELEPHONE NUMBER 616-252-7200
<div style="display: flex; justify-content: space-between;"><div><input checked="checked" type="checkbox"/> Main Office Inspection</div><div>Next Inspection Date: May 2010</div></div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"><div><input type="checkbox"/> Field Office</div><div></div></div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"><div><input type="checkbox"/> Temporary Job Site</div><div></div></div>			

PROGRAM SCOPE

The licensee was a 250-bed hospital located in Grand Rapids, Michigan, which served western Michigan. Licensee had authorization to use byproduct materials under Sections 35.100, 35.200, 35.300, and 35.500. Licensed activities were conducted only at the facility identified on the license.

The licensee expected to move into their new facility on September 30, 2007. They stated that there had been no changes in the plans since the request for an amendment to add the location of use was submitted to NRC.

The nuclear medicine department was staffed with three full-time nuclear medicine technologists and one part-time technologist. The licensee's nuclear medicine staff typically administered 400 diagnostic doses monthly. Doses were primarily technetium-99m for cardiac, bone, and other studies. In addition, licensee performed studies using xenon-133. Doses were received as unit doses from a licensed radiopharmacy or prepared from bulk technetium. Licensee performed around 10 iodine-131 treatments annually, including whole-body scans and thyroid ablations with the iodine-131 in capsule form. All waste was held for decay-in-storage or returned to the radiopharmacy.

Performance Observations

The inspector observed two diagnostic administrations of licensed material including dose preparation and disposal, and identified no issues with the procedures. Licensee personnel demonstrated package receipt, dose calibrator constancy tests, and survey meter QC procedures. The inspector found no concerns with these activities. The inspector reviewed written directives for iodine-131 procedures, and found no issues. Interviews with licensee staff indicated adequate knowledge of radiation safety procedures. Radiation surveys indicated radiation levels consistent with licensee survey records.