

NRC FORM 591X PART 1
(11-2001) 10 CFR 2.201

U.S. NUCLEAR REGULATORY COMMISSION

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/CERTIFICATE HOLDER

Location Inspected: **Columbus Regional Hospital
2400 East 17th Street
Columbus, IN 47201**

2. REGIONAL OFFICE

**US Nuclear Regulatory Commission
Region III
2443 Warrenville Road, Suite 210
Lisle, IL 60532**

REPORT NUMBER(S) 2007- 01

3. DOCKET NUMBER(S)

030-01597

4. LICENSE/CERTIFICATE NUMBER(S)

13-01631-05

5. DATE(S) OF INSPECTION

6/ 26 /2007

Inspection Procedures Used:
87131 & 87132

Inspection Focus Areas: **02.03 thru 02.11; 02.12e, 02.13 thru 02.14; 02.16 thru 02.19; and 02.21.**

LICENSEE/CERTIFICATE HOLDER:

The inspection was an examination of the activities conducted under your license/certificate as they relate to radiation safety and to compliance with the Nuclear Regulatory Commission (NRC) rules and regulations and the conditions of your license/certificate. 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

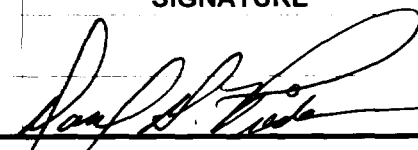
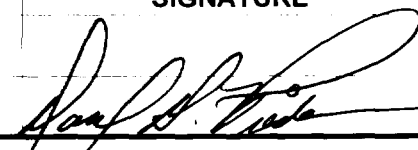
1. Based on the inspection findings, no violations were identified.
2. Previous Violation(s) Closed
3. The violation(s), specifically described to you by the inspector as non-cited violations, are not being cited because they were self-identified, non-repetitive, and corrective action was or is being taken, and the remaining criteria in the NRC Enforcement Policy, NUREG-1600, to exercise discretion, were satisfied.

non-cited violation(s) were discussed involving the following requirement(s):

4. During this inspection certain of your activities, as described in the 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.

STATEMENT OF CORRECTIVE ACTIONS

I hereby state that, within 30 days, the actions described by me to the inspector and as described in the attachment 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/ CERTIFICATE HOLDER	Michael Parrott, Ph.D, RSO		6/ /2007
NRC INSPECTOR	Darrel G. Wiedeman		6/ 26 /2007

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Supplemental Inspection Information

Program Code(s):
02120

Priority: **3**

Licensee Contact:
Michael Parrott, Ph.D, RSO

Telephone No. :
(812) 379-4441

☒ Main Office Inspection

Next Inspection Date: **06/2010**

☐ Field Office

☐ Temporary Job Site

Program Scope

This licensee is a 225 bed County owned and operated general hospital.

Under this license the licensee oversees the nuclear medicine, radiopharmaceutical, and a limited low-dose rate brachytherapy program.

Nuclear Medicine and Radiopharmaceutical Therapy

The licensee employees four (4) full time nuclear medicine technologist and the department is staffed with fourteen (14) authorized users (physicians). The licensee receives unit doses and two single bulk doses of Tc99m/daily (135 and 235 mCi) supplied by a local nuclear pharmacy. The workload consists of the following: 175 diagnostic scans per month, 20% cardiac scans, 40% bone scans, 10% gall bladder/liver scans and 30% thyroid scans. The licensee occasionally uses P-32, and Sr-89 for cancer therapy. The licensee conducts approximately three (3) hyper thyroid treatments/months and one (1) thyroid cancer treatments/month.

This inspection consisted of an in-depth review of the licensee's medical program.

According to the licensee staff that were interviewed, there have been no fires, explosions, fatalities (involving radioactive material) , medical events, recordable events or over exposures to radiation since the last NRC inspection. The inspector did not identify anything contrary to the above statements made by licensee staff. The highest wholebody exposure for CY 2006-2007 was <500 mrem/year to date and the highest extremity exposure was 490 mrem/year to date. The inspector concluded that no worker or member of the public received a dose of radiation in excess of the limits specified in 10 CFR 20.1201 or 20.1301. The inspector interviewed the nuclear medicine technologists and discussed their procedures for determining doses for patients undergoing iodine-131 hyper thyroid therapy. The inspector reviewed ten (10) written directives for iodine-131 hyper thyroid therapy. No deficiencies were identified. The inspector observed the licensee conduct a physical inventory of their calibration and brachytherapy sources. All sources were accounted for.

Brachytherapy program

The licensee's typical workload is three (3) cesium-137 implants/year. The Oncology department is staffed with one medical physicist, one dosimetrist, and one authorized user (physician). The inspector reviewed four written directives for cesium-137 implants (GYN). No deficiencies were identified. The inspector observed the licensee conduct a physical inventory of all brachytherapy sources in storage. All sources were accounted for.

No violations of NRC requirements were identified within the scope of this inspection.