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
LakeView Community Hospital 408 Hazen Street Paw Paw, Michigan 49079 REPORT 2007-001	REGION III US NUCLEAR REGULATORY COMMISSION 2443 WARRENVILLE ROAD, SUITE 210 LISLE, ILLINOIS 60532

3. DOCKET NUMBER(S)	4. LICENSEE NUMBER(S)	5. DATE(S) OF INSPECTION
030-34119	21-26716-01	July 27 , 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		7/27/07

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
LakeView Community Hospital REPORT NUMBER(S) 2007-001	**Region III**

3. DOCKET NUMBER(S)	4. LICENSE NUMBER(S)	5. DATE(S) OF INSPECTION
030-34119	21-26716-01	July 27, 2007

6. INSPECTION PROCEDURES USED	7. INSPECTION FOCUS AREAS
087130	03.01 - 03.08

SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM CODE(S)	2. PRIORITY	3. LICENSEE CONTACT	4. TELEPHONE NUMBER
02121	5	Leonard A. Brunette, M.D., RSO	269-657-3141

[X] Main Office Inspection — Next Inspection Date: **7/2012**

[ ] Field Office _____

[ ] Temporary Job Site _____

PROGRAM SCOPE

The licensee was a 25-bed hospital located in Paw Paw, Michigan, which served the local county. Licensee had authorization to use byproduct materials under 10 CFR 35.100 and 35.200. Licensed activities were conducted at the location indicated on the license.

Bronson Medical Center in Kalamazoo had expressed interest in acquiring this hospital. Because the hospital was community-owned, an election was planned for November 2007, in which the community would decide whether to accept Bronson's offer. The licensee was aware that a change of ownership must be approved in advance by NRC.

The nuclear medicine department was staffed with one full-time nuclear medicine technologist, and one additional technologist filled in as needed. The licensee's nuclear medicine staff typically administered 120 diagnostic doses monthly. Doses were primarily technetium-99m for cardiac, bone, and other studies. In addition, licensee performed occasional studies using xenon-133, iodine-123, and indium-111. All doses were received as unit doses from a licensed radiopharmacy. All waste was either held for decay-in-storage (DIS) or returned to the radiopharmacy.

Performance Observations

The inspector observed three administrations of licensed material, including dose preparation and disposal. Licensee personnel demonstrated survey meter and well counter QC, package receipt, dose calibrator constancy checks, and daily contamination surveys. The inspector identified no concerns with these activities. Interviews with licensee staff indicated adequate knowledge of radiation safety concepts and procedures. Surveys indicated appropriate radiation levels in restricted and unrestricted areas.