

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

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| 1. LICENSEE/LOCATION INSPECTED: Pennock Hospital 1009 West Green Street Hastings, Michigan 49058 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) 030-14015 | 4. LICENSEE NUMBER(S) 21-18667-01 | 5. DATE(S) OF INSPECTION July 26, 2007 |
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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 | Geoffrey M. Warren |  | 7/26/07 |

**Docket File Information
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AND COMPLIANCE INSPECTION**

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| 1. LICENSEE Pennock Hospital REPORT NUMBER(S) 2007-001 | | 2. NRC/REGIONAL OFFICE Region III | |
| 3. DOCKET NUMBER(S) 030-14015 | 4. LICENSE NUMBER(S) 21-18667-01 | 5. DATE(S) OF INSPECTION July 26, 2007 | |
| 6. INSPECTION PROCEDURES USED 87131 | 7. INSPECTION FOCUS AREAS 03.01 - 03.08 | | |

SUPPLEMENTAL INSPECTION INFORMATION

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| 1. PROGRAM CODE(S) 02120 | 2. PRIORITY 3 | 3. LICENSEE CONTACT Eric Ward., M.D., RSO | 4. TELEPHONE NUMBER 269-945-1212 x383 |
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Main Office Inspection Next Inspection Date: 7/2010

Field Office _____

Temporary Job Site _____

PROGRAM SCOPE

The licensee was a 100-bed hospital located in Hastings, Michigan, which served a two-county area in western Michigan. Licensee had authorization to use byproduct materials under Sections 35.100, 35.200, and 35.300. Licensed activities were conducted only at the facility identified on the license.

The nuclear medicine department was staffed with two full-time nuclear medicine technologists and two assistants who did not administer licensed materials. The licensee's nuclear medicine staff typically administered 200 diagnostic doses monthly. Doses were primarily technetium-99m for cardiac, bone, and other studies. Doses were received as unit doses from a licensed radiopharmacy or prepared from bulk technetium. Licensee had performed three iodine-131 treatments for hyperthyroidism since the previous inspection, 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 activities. Licensee personnel demonstrated dose calibrator constancy tests, package receipt, meter and thyroid probe QC, and daily and weekly contamination surveys. The inspector found no concerns with these activities. The inspector reviewed written directives for all iodine-131 procedures performed since the last inspection, and found no issues. Interviews with licensee staff indicated adequate knowledge of radiation safety procedures and concepts. Surveys indicated appropriate radiation levels in restricted and unrestricted areas.