

**Docket File Information**

**SAFETY INSPECTION REPORT  
AND COMPLIANCE INSPECTION**

1. LICENSEE <b>Saint Joseph Regional Medical Center-Mishawaka</b>		2. NRC/REGIONAL OFFICE <b>Region III 2443 Warrenville Road Lisle, IL 60532</b>	
REPORT <b>2007-001</b>			
3. DOCKET NUMBER(S) <b>030-13705</b>	4. LICENSE NUMBER(S) <b>13-17943-01</b>	5. DATE(S) OF INSPECTION <b>November 14, 2007</b>	
6. INSPECTION PROCEDURES USED <b>87131</b>	7. INSPECTION FOCUS AREAS <b>03.01-03.07</b>		
<b>SUPPLEMENTAL INSPECTION INFORMATION</b>			
1. PROGRAM <b>2120</b>	2. PRIORITY <b>G3</b>	3. LICENSEE CONTACT <b>Tooraj (Tom) Torabi, Ph.D., RSO</b>	4. TELEPHONE NUMBER <b>574-287-4146</b>
<input checked="" type="checkbox"/> Main Office Inspection		Next Inspection Date: <b>November 2010</b>	
<input type="checkbox"/> Field			
<input type="checkbox"/> Temporary Job Site			

**PROGRAM SCOPE**

This 55 bed hospital is authorized for possession and use of 35.100-300 material. The licensee performs approximately 140 diagnostic procedures monthly using technetium-99m in a variety of imaging techniques. One full-time technologist currently performs all patient procedures. Generators are not received and all material is obtained from an area nuclear pharmacy in the form of unit doses. The licensee performs approximately three lung ventilations monthly using xenon-133. The licensee has performed one thyroid treatment (HTT) involving iodine-131 in capsule form since the last inspection. An outside consultant performs quarterly program audits which appears to adequately maintain program compliance.

According to licensee representatives, a new facility in Mishawaka is currently being built and will replace the existing plant in 2009. License amendment requirements, close-out surveys, etc., were discussed with the licensee during this inspection.

**Performance Observations**

Licensed material was observed adequately secured during the review and was not readily accessible to members of the general public. According to the technologist, the hot-lab/imaging area is locked when not under direct surveillance. The licensee's sealed source inventory was verified and accounted for during the review. A review of the iodine-131 treatment and written directive did not indicate issues or regulatory concerns.

Independent measurements taken indicated a maximum reading of 0.2 mr/hr in the hot-lab and essentially background (0.02mr/hr) in imaging and unrestricted areas.

Interviews conducted with the technologist revealed an adequate level of understanding of emergency and material handling procedures and techniques. Dose calibrator constancy checks, daily surveys, package check-in procedures were described or demonstrated with no problems noted.

Personal dosimetry records reviewed indicated whole-body readings for 2006 of 465 mRem and 2530 mRem extremity. YTD 2007 readings showed whole-body exposure of 313 mRem and extremity of 1140 mRem.

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1. LICENSEE/LOCATION INSPECTED: <b>Saint Joseph Regional Medical Center-Mishawaka 215 West 4th Street Mishawaka, IN 46544</b>		2. NRC/REGIONAL OFFICE <b>U.S. Nuclear Regulatory Commission Region III 2443 Warrenville Road Lisle, Illinois 60532-4351</b>	
REPORT                    2007-001			
3. DOCKET NUMBER(S) <b>030-13705</b>	4. LICENSEE NUMBER(S) <b>13-17943-01</b>	5. DATE(S) OF INSPECTION <b>November 14, 2007</b>	

**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.

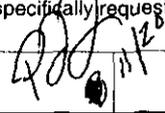
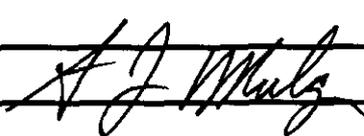
\_\_\_\_\_ Non-Cited Violation(s) was/were discussed involving the following requirement(s) and Corrective Action(s):

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	<b>S. J. Mulay</b>		<b>11/14/07</b>