

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED: Borgess Medical Center 1521 Gull Road Kalamazoo, MI 49001		2. NRC/REGIONAL OFFICE U.S. Nuclear Regulatory Commission Region III 2443 Warrenville Road Suite 210 Lisle, Illinois 60532-4351	
REPORT NUMBER(S) 2008-001	3. DOCKET NUMBER(S) 030-02115	4. LICENSEE NUMBER(S) 21-12275-02	5. DATE(S) OF INSPECTION January 16, 2008

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, **at Plainwell, MI**
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	Robert P. Hays		1/16/08
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RPH

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AND COMPLIANCE INSPECTION**

1. LICENSEE Borgess Medical Center REPORT NUMBER(S) 2008-001		2. NRC/REGIONAL OFFICE Region III 2443 Warrenville Road, Suite 210 Lisle, IL 60532	
3. DOCKET NUMBER(S) 03002115	4. LICENSE NUMBER(S) 21-12275-02	5. DATE(S) OF INSPECTION January 16, 2008	
6. INSPECTION PROCEDURES USED 87130 (10/24/02)	7. INSPECTION FOCUS AREAS 03.01-03.07		

SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM CODE(S) 02110	2. PRIORITY 2	3. LICENSEE CONTACT Ami Burke, CNMT	4. TELEPHONE NUMBER 269-685-0700
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Main Office Inspection Next Inspection Date: **January 2010**

Field Office **Borgess-Pipp Health Center, Plainwell, MI 49080**

Temporary Job Site Inspection

PROGRAM SCOPE

The licensee was a medical broadscope authorized by the license to use various byproduct materials for diagnostic, therapeutic, and brachytherapy procedures, including research, animal studies, instrument calibrations, motion correction, in-vitro studies, and student instruction. The majority of licensed activities at this facility were diagnostic medical studies conducted on Tuesdays, Wednesdays, and Thursdays each week in the nuclear medicine suite. The nuclear medicine department was staffed with one nuclear medicine technologist (NMT) and other allied health staff who routinely conducted an average of 6-10 patient studies per day. The licensee received unit doses as ordered from a local nuclear pharmacy. All waste was held for decay-in-storage (DIS) or returned to the nuclear pharmacy as a limited quantity shipment.

Performance Observations

During the inspection, the licensee's NMT demonstrated/discussed: (1) package check-in procedures and wipe test counting; (2) dosimetry; (3) dose calibrator checks; (4) unit dose handling procedures; (5) security of licensed material; (6) radiation safety program audits; (7) rad waste procedures; and (8) sealed source inventory.

