

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED:

ST. Francis Hospital & Health Centers
Mooresville, Indiana & Indianapolis, Indiana

REPORT NUMBER(S) 2008-001

2. NRC/REGIONAL OFFICE

U.S. Nuclear Regulatory Commission
Region III
2443 Warrenville Road
Suite 210
Lisle, Illinois 60532-4351

3. DOCKET NUMBER(S)

030-09348

4. LICENSEE NUMBER(S)

13-02128-03

5. DATE(S) OF INSPECTION

4/17-18/2008

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.
- ☐ 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

Michael M LaFranzo

Michael M LaFranzo

4/18/08

SAFETY INSPECTION REPORT
AND COMPLIANCE INSPECTION

1. LICENSEE St. Francis Hospital & Health Centers REPORT NUMBER(S) 2008-011		2. NRC/REGIONAL OFFICE Region III 2443 Warrenville Road, Suite 210 Lisle, IL 60532	
3. DOCKET NUMBER(S) 030-09398	4. LICENSE NUMBER(S) 13-02128-03	5. DATE(S) OF INSPECTION 4/17-18/2008	
6. INSPECTION PROCEDURES USED 87130/87131/87132	7. INSPECTION FOCUS AREAS 3.1-3.7		

SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM CODE(S) 2240	2. PRIORITY 2	3. LICENSEE CONTACT Berry Stewart - RSO	4. TELEPHONE NUMBER 317-865-5649
----------------------------	------------------	--	-------------------------------------

<input checked="" type="checkbox"/> Main Office Inspection	Next Inspection Date: _____
<input checked="" type="checkbox"/> Field Office Mooresville, Indiana; South Emerson Avenue, Indianapolis, Indiana	
<input type="checkbox"/> Temporary Job Site Inspection	

PROGRAM SCOPE

The licensee is permitted to perform licensed operations pursuant to 10 CFR 35.100, 200, 300, 400 and 500. The licensee has performed the following activities at the following authorized locations:
Mooresville: 35.100 and 35.200 activities are performed. 1-2 patients per day, 5 days/week

Beechgrove: 35.100, 35.200, and 35.300 activities. Approximately 10-12 diagnostic administrations occurred 5 days a week. Approximately 100 administrations of I-131 occur annually – most are less than 30 millicuries. The licensee also possessed a blood irradiator and a Cs-137 source used for radiation survey instrument calibration.

South Emerson: 35.100, 35.200, 35.300 activities. Approximately 10-12 diagnostic administrations occurred 5 days a week. Approximately 100 administrations of I-131 occur annually – most are less than 30 millicuries. HDR activities are performed at this facility – 120-140 treatments are performed annually.

The licensee had not performed manual brachytherapy activities under 35.400 nor activities under 35.500 since the last inspection.

Performance Observations

The licensee demonstrated a package receipt survey, daily dose calibrator check, radiological surveys, and diagnostic dose preparation for injection; no regulatory issues were identified. The inspector also observed an HDR administration. The inspector reviewed a selected number of written directives and identified no regulatory issues. The inspector performed independent and confirmatory radiation surveys; no abnormal radiation levels were identified. The inspector reviewed documentation associated with leak tests, dosimetry, radiation safety audits and source inventories; the inspector did not identify any regulatory issues. Interviews with licensee staff indicated a sufficient knowledge of radiation safety practices to ensure the safe use of licensed material.

258