

**SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION**

1. LICENSEE/LOCATION INSPECTED: <i>Community Hospitals of Indiana          Community Hospital North          7150 Clearvista Drive          Indianapolis, IN.</i> REPORT NUMBER(S)	2. NRC/REGIONAL OFFICE U.S. Nuclear Regulatory Commission Region III 2443 Warrenville Road Suite 210 Lisle, Illinois 60532-4351
--	--

3. DOCKET NUMBER(S) <i>030-01625</i>	4. LICENSEE NUMBER(S) <i>13-06009-01</i>	5. DATE(S) OF INSPECTION <i>5/14/08</i>
---	---	--

**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)

*PZJ*

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	<i>Ken Lambert</i>	<i>Ken Lambert</i>	<i>5/14/08</i>
---------------	--------------------	--------------------	----------------

SAFETY INSPECTION REPORT  
AND COMPLIANCE INSPECTION

1. LICENSEE Community Hospitals of Indiana REPORT NUMBER(S) 08-02		2. NRC/REGIONAL OFFICE Region III 2443 Warrenville Road, Suite 210 Lisle, IL 60532	
3. DOCKET NUMBER(S) 030-01625	4. LICENSE NUMBER(S) 13-06009-01	5. DATE(S) OF INSPECTION May 14, 2008	
6. INSPECTION PROCEDURES USED 87131,	7. INSPECTION FOCUS AREAS 03.01 – 03.07		

## SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM CODE(S) 2240	2. PRIORITY 2	3. LICENSEE CONTACT Andrea Brown, Ph.D., RSO	4. TELEPHONE NUMBER 317/355-5865
----------------------------	------------------	---	-------------------------------------

Main Office Inspection

Next Inspection Date: May 2010 Field Office 7150 Clearvista Drive and 7250 Clearvista Drive, Indianapolis, Indiana Temporary Job Site  
Inspection

## PROGRAM SCOPE

The licensee was a medical institution with four authorized locations of use. The licensee is authorized to use any byproduct materials for diagnostic and therapeutic medical procedures under 10 CFR 35.100, 200, 300, 400 and 600, including HDR, and 35.1000. This inspection was conducted at the licensee's facility located at 7150 and 7250 Clearvista Drive, Indianapolis, Indiana. The licensee has not used material at the 7250 Clearvista Drive location, rather patients are taken to 7250 Clearvista Drive for diagnostic injections of radioactive materials for sentinel lymph node localization. Patients are returned to 7250 Clearvista for imaging. The 7150 location currently only performs nuclear medicine studies and iodine-131 ablations using capsules only. This facility conducts an average of 115 administrations/scans per month for routine diagnostic imaging, including approximately 45 bone scans, 7 cardiac, and 10 I-131 studies using less than 30 mCi. The Hammond facility performs 1-2 thyroid ablations per month using iodine-131 capsules. The facility employs 3 full time nuclear medicine technologists.

## Performance Observations

Interviews conducted with available staff revealed an adequate level of understanding of emergency and material handling procedures and techniques. Dose calibrator constancy, linearity and geometry checks, area surveys and wipes, package check-in procedures, and injection techniques were successfully demonstrated or observed. The licensee possessed two Ludlum survey instruments that were within calibration. Proper personal dosimetry was observed worn by available staff during the inspection.

The hot-lab area was observed locked upon arrival. Licensed material was not readily accessible to members of the general public.

Personal dosimetry records reviewed for 2007 indicated maximum doses of 126 mrem whole body and 11106 mrem extremity. Personal dosimetry records reviewed for 2008 to February 19, 2008, indicated minimal whole body doses and 104 mrem extremity.

No violations were identified.