

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

<p>1. LICENSEE/LOCATION INSPECTED: Good Samaritan Hospital 520 South 7th Street Vincennes, IN 47591</p> <p>REPORT NUMBER(S) 2008-001</p>		<p>2. NRC/REGIONAL OFFICE U.S. Nuclear Regulatory Commission Region III 2443 Warrenville Road Suite 210 Lisle, Illinois 60532-4351</p>	
<p>3. DOCKET NUMBER(S) 030-01600</p>	<p>4. LICENSEE NUMBER(S) 13-01787-01</p>	<p>5. DATE(S) OF INSPECTION July 30 , 2008</p>	

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)

Handwritten initials

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.

	Printed Name	Signature	Date
LICENSEE'S REPRESENTATIVE			
NRC INSPECTOR	Sam Mulay	<i>Sam Mulay</i>	7/30/08

SAFETY INSPECTION REPORT
AND COMPLIANCE INSPECTION

1. LICENSEE

Good Samaritan Hospital
REPORT NUMBER(S) **2008-01**

2. NRC/REGIONAL OFFICE

Region III
2443 Warrenville Road, Suite 210
Lisle, IL 60532

3. DOCKET NUMBER(S)

030-01600

4. LICENSE NUMBER(S)

13-01787-01

5. DATE(S) OF INSPECTION

July 30, 2008

6. INSPECTION PROCEDURES USED

87131

7. INSPECTION FOCUS AREAS

03.01-03.07

SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM CODE(S)

2120

2. PRIORITY

G3

3. LICENSEE CONTACT

John Mathis, DO., RSO

4. TELEPHONE NUMBER

812-882-5220

Main Office Inspection

Next Inspection Date: **08/2011**

Field Office

Temporary Job Site
Inspection

PROGRAM SCOPE

This active medical facility performs about 500 diagnostic nuclear medicine procedures monthly approximately 40 percent of which are cardiac studies. The licensee does not receive Moly/Tc99m generators and unit doses are obtained from an area pharmacy. Approximately five lung ventilations are performed monthly using both xenon-133 and Tc-99m DTPA aerosol. Six full-time technologists are currently on staff.

The licensee's iodine-131 program consists of the administrations of four HTT monthly and one ablation treatment annually, both in capsule form. Occasional Sr-89 and Sm-153 treatments are also performed. The licensee's conventional brachytherapy program involves approximately five cesium-137 implants and about fifteen prostate seed implants utilizing palladium-103 annually.

Performance Observations

Interviews conducted with available nuclear medicine staff revealed an adequate level of understanding of emergency and material handling procedures and techniques. Patient injections, area surveys, package wipes, QMP procedures and dose calibrator constancy checks were demonstrated, described, or observed with no regulatory issues noted. Compliance audits are performed quarterly by a consultant which appear to adequately oversee licensed activities. A review of six month Radiation Safety Committee meeting documentation revealed appropriate discussions regarding licensed activities.

A random review of radiopharmaceutical and sealed source implant written directives included all required information and did not reveal medical or recordable events. A physical count of brachytherapy sealed sources verified the licensee's most recent inventory. Side-by side survey instrument readings revealed similar results with the NRC meter.

Personal dosimetry records were reviewed for 2007 and revealed whole-body readings of 286 mRem and extremity readings of 2630 mRem. YTD 2008 records indicated whole-body and extremity measurements of 164 mRem and 610 mRem respectively.

A separate waste storage area is located adjacent to the nuclear medicine department. This area was observed locked and posted. Additionally, licensed material was observed well secured and/or under surveillance in the hot-lab area and brachytherapy storage and was not readily accessible to members of the general public. Independent measurements taken in restricted and unrestricted areas of nuclear medicine and the brachytherapy storage room did not indicate readings above expected.