

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED: <i>St. John's River District Hospital</i> <i>East China, MI</i> REPORT NUMBER(S) <i>2009-001</i>	2. NRC/REGIONAL OFFICE U.S. Nuclear Regulatory Commission Region III 2443 Warrenville Road Suite 210 Lisle, Illinois 60532-4351
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3. DOCKET NUMBER(S) <i>030-31795</i>	4. LICENSEE NUMBER(S) <i>21-26213-01</i>	5. DATE(S) OF INSPECTION <i>August 20, 2009</i>
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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	Deborah A. Piskura	<i>Deborah A Piskura</i>	<i>8/20/2009</i>

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1. LICENSEE St. John River District Hospital REPORT NUMBER(S) 2009-001		2. NRC/REGIONAL OFFICE Region III 2443 Warrenville Road, Suite 210 Lisle, IL 60532	
3. DOCKET NUMBER(S) 030-31795	4. LICENSE NUMBER(S) 21-26213-01	5. DATE(S) OF INSPECTION August 20, 2009	
6. INSPECTION PROCEDURES USED 87130	7. INSPECTION FOCUS AREAS 03.01 - 03.08		

SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM CODE(S) 02121	2. PRIORITY 5	3. LICENSEE CONTACT H. Tansuche, M.D., RSO	4. TELEPHONE NUMBER 810-329-7111
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Main Office Inspection Next Inspection Date: Aug. 2014
 Field Office _____
 Temporary Job Site Inspection _____

PROGRAM SCOPE

This licensee was a small hospital, authorized to use licensed material permitted by Sections 35.100, 35.200, and Gd-153 transmission sources. The nuclear medicine department was staffed with two full-time technologists who performed approximately 100+ diagnostic nuclear medicine procedures per month. The licensee received unit doses and bulk Tc-99m from a licensed radiopharmacy. The hospital performed a full spectrum of nuclear diagnostic imaging studies. The licensee retained the services of a consulting physicist to audit the radiation safety program on a quarterly basis (last audit 7/29/2009 with no findings or violations identified).

This inspection consisted of interviews with licensee personnel, a review of selected records, tours of the nuclear medicine and departments, and independent measurements. The inspector observed licensee nuclear medicine personnel prepare, assay and administer a unit dose for a cardiac stress testing procedure. The inspection included observations of dose calibrator QA checks, and a package receipt and surveys.