

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED
 Mid Michigan Medical Center
 4005 Crehara Drive
 Midland, MI 48670
 REPORT NUMBER(S) 2010-002

2. NRC/REGIONAL OFFICE
 REGION III
 US NUCLEAR REGULATORY COMMISSION
 2443 WARRENVILLE ROAD
 LISLE IL 60532

3. DOCKET NUMBER(S)
 03002013

4. LICENSE NUMBER(S)
 21-01549-02

5. DATE(S) OF INSPECTION
 Apr 28, 2010

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) were discussed involving the following requirement(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) *dit*
 10CFR 35.643 requires a licensee authorized to use a remote afterloader unit for medical use shall satisfy the spot-checks of each remote afterloader facility. One spot check requires the presence of source exposure indicator lights on the facility.
 Contrary to the above, the licensee did not have adequate source exposure indicator lights in the facility as of April 28, 2010.
 As corrective action, licensee had maintenance repair/replace the exposure indicator lights.

Statement of Corrective Actions

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	LARRY LANGRILL	<i>[Signature]</i>	4/25/10
NRC INSPECTOR	G. Parker	<i>[Signature]</i>	4/28/10

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Docket File Information
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1. LICENSEE/LOCATION INSPECTED: MidMichigan Medical Center REPORT NUMBER(S) 2010-002		2. NRC/REGIONAL OFFICE REGION III	
3. DOCKET NUMBER(S) 03002013		4. LICENSE NUMBER(S) 21-01549-02	5. DATE(S) OF INSPECTION April 28, 2010
6. INSPECTION PROCEDURES USED 87123		7. INSPECTION FOCUS AREAS 03.01 - 03.07	

SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM CODE(S) 2310	2. PRIORITY 2	3. LICENSEE CONTACT Larry Langrill	4. TELEPHONE NUMBER 989-839-3452
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Main Office Inspection Next Inspection Date: 04/28/2012

Field Office Inspection _____

Temporary Job Site Inspection _____

PROGRAM SCOPE

This facility is a 250 bed general hospital located in Midland, Michigan. The licensee has a large nuclear medicine program where four technologists administer twenty or more injections daily. The licensee administers about three iodine treatments per week using iodine - 131. Licensee has administered approximately 50 fractions this year using the high dose rate (HDR) brachytherapy delivery system. Licensee has seen approximately 12 patients at its gamma knife facility.

PERFORMANCE OBSERVATIONS

The inspector observed the injection of radiopharmaceuticals by the staff as well as the administration of iodine for the treatment of graves disease. Technique employed by the staff was suitable for the tests being performed. The inspector interviewed members of the staff and each seemed to have an adequate level of knowledge of radiation safety. The inspector reviewed written directives for the administration of iodine. Each contained the required information. The licensee performed the daily checks of the HDR unit for the inspector. The licensee was cited for a violation of 10 CFR 35.643 (d)(2) for failure to have operational source position indicator lights to indicate when the source was out of its storage position. As corrective action for this problem, licensee had maintenance repair the defective source position indicator light. Licensee has treated approximately 12 patients with its gamma knife this year. The inspector toured the facility, performed radiation surveys of the facility which when examined against those of the licensee were comparable. The inspector also reviewed a selection of written directives for this modality. The written directives for this facility were found to be complete and contained the information required by regulation. Dosimetry for this licensee was supplied by Landauer. Results for each modality were generally below ALARA I levels.