

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED:

Saint Margaret Mercy Healthcare Centers
5454 Hohman Avenue
Hammond, IN 46320

2. NRC/REGIONAL OFFICE

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

REPORT NUMBER(S) **2010-01**

3. DOCKET NUMBER(S)
030-01602

4. LICENSEE NUMBER(S)
13-02047-02

5. DATE(S) OF INSPECTION
November 15, 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

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'S REPRESENTATIVE | | | |
| NRC INSPECTOR | Robert P. Hays |  | 11/15/10 |
| Branch Chief | Tamara E. Bloomer |  | 12/23/10 |

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|---|---|--|--|
| NRC FORM 591 M PART 3 (06-2010) 10 CFR 2.201 | | U.S. NUCLEAR REGULATORY COMMISSION | |
| <i>Docket File Information</i> SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION | | | |
| 1. LICENSEE Saint Margaret Mercy Healthcare Centers 5454 Hohman Avenue Hammond, IN 46320 REPORT NUMBER(S) 2010-01 | | 2. NRC/REGIONAL OFFICE U.S. Nuclear Regulatory Commission Region III 2443 Warrenville Road, Suite 210 Lisle, Illinois 60532-4351 | |
| 3. DOCKET NUMBER(S) 03001602 | 4. LICENSE NUMBER(S) 13-02047-02 | 5. DATE(S) OF INSPECTION November 15, 2010 | |
| 6. INSPECTION PROCEDURES 87131 (10/24/02) | 7. INSPECTION FOCUS AREAS 03.01-03.07 | | |
| SUPPLEMENTAL INSPECTION INFORMATION | | | |
| 1. PROGRAM 2230 | 2. PRIORITY 2 | 3. LICENSEE CONTACT Terry Harrigan, Supervisor | 4. TELEPHONE NUMBER 219-932-2300, x. 45070 |
| <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Main Office Inspection <input checked="" type="checkbox"/> Field Office Inspection <u>South Campus, 24 Joliet Street, Dyer, IN</u> <input type="checkbox"/> Temporary Job Site Inspection _____ </div> <div style="text-align: right;"> Next Inspection Date: <u>November 2012</u> </div> </div> | | | |
| <p style="text-align: center;">PROGRAM SCOPE</p> <p>The licensee was a medical institution with two authorized locations in Hammond and Dyer, Indiana, with authorization by the license to use any byproduct materials for diagnostic and therapeutic medical procedures under 10 CFR 35.100, 35.200, 35.300, 35.400, and a HDR afterloader. The North Campus was reviewed during the previous inspection.</p> <p>The South Campus is authorized by the license to use any byproduct materials for diagnostic and therapeutic medical procedures under 10 CFR 35.100, 35.200, 35.300, 35.400, and <u>in-vitro</u> studies. The licensee routinely conducts an average of 10-15 administrations/scans per day for routine diagnostic, imaging, and therapeutic procedures with a staff of 3 nuclear medicine technologists. The licensee receives all licensed material as unit doses from a local nuclear pharmacy as needed. Iodine-131 procedures average 1-2 cases per month. Dosages up to 150 millicuries are administered to thyroid carcinoma therapy patients who are released in accordance with 10 CFR 35.75, and are contacted at home for several days after the administration to ensure patient is following instructions. The licensee possesses cesium-137 sources for low-dose brachytherapy which have been in storage and not used since the previous inspection. The inspector performed independent and confirmatory radiation measurements which indicated results consistent with licensee survey records and postings.</p> <p style="text-align: center;"><u>Performance Observations</u></p> <p>During the inspection, the licensee's NMTs (Mike Muceski, Chris Mully, Terry Harrigan) demonstrated/discussed: (1) survey meter use and calibrations; (2) package check-in procedures; (3) dosage prep; (4) wipe test counting; (5) waste handling; (6) sealed source inventories and leak tests; (7) routine security of licensed material; (8) dose calibrator tests; (9) quarterly radiation safety meetings and program audits; (10) any contamination events (none since the previous inspection); and (11) dosimetry (< 10% of regulatory limits) for CY 2009: 354mr-DDE; 660mr-finger; and 2010 YTD 2010: 143mr-DDE; 500mr-finger. <i>RP</i></p> | | | |