NRC FORM 591M PART (06-2010)	ī 1			U.S NUCLEAR R	EGULATORY COMMISSION		
10 CFR 2.201							
SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION							
1. LICENSEE/LOCATION	N INSPECTED:		2. NRC/REGIONAL O	PFFICE			
VHS Harper-Hutz	el Hospital, Inc.		U.S. Nuclear Regulatory Commission, Region III				
3990 John R. Stre Detroit, MI 48201			2443 Warrenville Road, Suite 210 Lisle, Illinois 60532				
REPORT NUMBER(S):							
3. DOCKET NUMBER(S) 030-02045		4. LICENSEE NUMBER(S) 5. DATE(S) OF INSPE 21-04127-02 August 17, 18					
LICENSEE:							
Regulatory Commission	(NRC) rules and regulation	es conducted under your lice ons and the conditions of your and observations by the in	our license. The inspecti	ediation safety and to compliant ion consisted of selective exam findings are as follows:	ce with the Nuclear ninations of procedures and		
1. Based on the inspection findings, no violations were identified.							
2. Previous v	2. Previous violation(s) closed.						
self-identi	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						
		s) were discussed involv		uirement(s):			
		,					
4. During this	inspection certain of	your activities, as descr	ibed below and/or at	tached, were in violation of	NRC		
requireme with 10 CF	ints and are being cite FR 19.11	d. This form is a NOTIC	E OF VIOLATION, W	which may be subject to pos	sting in accordance		
	•						
		Statement of	Compatible Autions				
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	Lester Tripp		25	Wan for	09/13/2011		
Branch Chief	Tamara E. Bloor	mer	- Lou	Van for	9/14/11		

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NRC FORM 591 M PART 3 (06-2010) 10 CFR 2.201 U.S. NUCLEAR REGULATORY COMMISSION

Docket File Information SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE			2. NRC/REGIONAL OFFICE				
VHS Harper-Hutzel Hospital, Inc. 3990 John R. Street Detroit, MI 48201			U.S. Nuclear Regulatory Commission, Region III 2443 Warrenville Road, Suite 210 Lisle, Illinois 60532				
REPORT NUMBER(S) 11-01							
3. DOCKET NUMBER(S) 030-02045		4. LICENSEE NUMBER(S) 21-04127-02		5. DATE(S) OF INSPECTION August 17, 18, 2011			
6. INSPECTION PROCEDURES 7. INSPECTION		7. INSPECTION F	OCUS AREAS				
87132		All					
SUPPLEMENTAL INSPECTION INFORMATION							
1.PROGRAM	2. PRIORITY	3. LICENSEE CO	NTACT	4. TELEPHONE NUMBER			
2240	2	Richard N. Joyrich		313-745-8585			
Main Office Inspection Next Inspection Date: 08/2013							
Field Office Inspection							
Temporary Job Site Inspection							
remporary	Job Site inspection						

PROGRAM SCOPE

The licensee is a 400 bed hospital and is authorized to use licensed material specified by 10 CFR 35.100, 35.200, 35.300, 35.500, and 35.1000. The licensee performs a variety of nuclear medicine studies with the majority being whole body scans, pulmonary perfusion studies, MUGA's and pulmonary aerosol studies. VHS Harper-Hutzel Hospital, Inc. also performs treatments that require written directives. Thyroid ablation and treatment of hyperthyroid conditions accounts for 2% of all procedures performed in the nuclear medicine department.

The technologists perform daily constancy testing. The consultant physicist visits the department quarterly, and performs quarterly linearity testing (using the shielding method) and annual accuracy testing. All records are signed by the consultant and reviewed and signed by the radiation safety officer. In addition, the consultant performs quarterly reviews including sealed source inventory, leak testing, and survey meter evaluations.

Performance Observations

The inspector noted that the licensee uses release criteria that take into account activity and/or dose rate that are found in NUREG 1559, Volume 9, Rev 2 Table U.1 Col. 1(<33 mCi), and/or dose rate at 1 meter (< 7 merem/hr) NUREG 1559. Volume 9, Rev 2 Table U.1 Col 2. The inspector confirmed that patients are surveyed prior to release and that patient (and sometimes family members) are given instruction to keep exposures ALARA. The instructions include guidance on bathroom habits, sleeping arrangements, the need to avoid children and pregnant women, and stopping breast feeding if pertinent. The largest dose usually administered is approximately 150 mCi.

Security of radioactive material is adequate. Confirmatory measurements performed by the inspector were consistent with the licensee's survey results and generally were 0.01 to 0.02 mR/hr at the time of the survey. Within the scope of this inspection, no violations of NRC requirements were observed.

TRANSMISSION VERIFICATION REPORT

: 09/14/2011 20:44 : USNRC REGION3 DNMS TIME NAME

FAX : 6305151259 TEL : SER.# : 000A7J925770

DATE,TIME FAX NO./NAME DURATION PAGE(S) RESULT MODE

09/14 20:43 13137458447 00:01:05 03 OK STANDARD



Please call

UNITED STATES NUCLEAR REGULATORY COMMISSION REGION III 2443 Warrenville Road, Suite 210

Lisle, Illinois 60532-4352

TELEFAX TRANSMITTAL

DATE:	9/15/11	NUMBER OF PAGES: (including this page)	.3				
SEND TO:	Richard N. Joyri	ich, M.D., Radiation	Safety Officer				
LOCATION:	VHS Harper - Hut.	zel Hospital, Inc.					
FAX NUMBER: 313 - 745 - 8447 VERIFY BY CALLING SENDER							
FROM: (SENDER) Geoffrey Warren, Health Physicist							
TELEPHONE NUMBER: 630 - 829 - 9742 FAX NUMBER: 630 - 515 - 1259							
If you do not receive the complete fax transmittal, please contact the sender as soon as possible at the telephone number provided above.							
MESSAGE Attached	are the is	inspection reports	we discussed.				

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questions.

you