

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED: St. Vincent Hospital & Health Care Center 2001 West 86th Street Indianapolis, IN 46240-0970 REPORT NUMBER(S)		2. NRC/REGIONAL OFFICE Region III U. S. Nuclear Regulatory Commission 2443 Warrenville Road, Suite 210 Lisle, IL 60532-4352	
3. DOCKET NUMBER(S) 030-01579	4. LICENSE NUMBER(S) 13-00133-02	5. DATE(S) OF INSPECTION 7/23/2012	

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, 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 in accordance with NRC Enforcement Policy. This form is a NOTICE OF VIOLATION, which may be subject to posting in accordance with 10 CFR 19.11.
(Violations and Corrective Actions)

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	Ken Lambert/Michael G. Herr, CHP	<i>Ken Lambert/Michael G. Herr</i>	8/9/12
BRANCH CHIEF	Tamara Bloomer	<i>Tamara Bloomer</i>	8/9/12

Docket File Information
SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED: St. Vincent Hospital & Health Care Center 2001 West 86th Street Indianapolis, IN 46240-0970 REPORT NUMBER(S)	2. NRC/REGIONAL OFFICE Region III U. S. Nuclear Regulatory Commission 2443 Warrenville Road, Suite 210 Lisle, IL 60532-4352
--	---

3. DOCKET NUMBER(S) 030-01579	4. LICENSE NUMBER(S) 13-00133-02	5. DATE(S) OF INSPECTION 7/23/2012
--------------------------------------	---	---

6. INSPECTION PROCEDURES USED 87131	7. INSPECTION FOCUS AREAS 03.01-03.07
--	--

SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM CODE(S) 02240	2. PRIORITY 2	3. LICENSEE CONTACT Edward Wroblewski, MA, RSO	4. TELEPHONE NUMBER (317) 338-5010
---------------------------------	----------------------	---	---

Main Office Inspection Next Inspection Date: No Change

Field Office Inspection

Temporary Job Site Inspection

PROGRAM SCOPE

The facility has and NRC license to use material on their license as authorized by 10 CFR 335.100, 35.200, 35.300, 35.400 and 35.600 using Ir-192.

Performance Observations

The inspection was a performed as a follow up to an escalated enforcement action when an individual who was not an authorized user or acting under the supervision of an authorized user administered licensed materials into a patient. The violation was considered willful due to the unauthorized individual administering the dose being informed by a nuclear medicine technologist that he was not an authorized user.

The inspectors reviewed the implementation of the licensee's corrective actions described in an e-mail, dated February 8, 2012. The corrective actions included: 1) notifying the St. Vincent's Radiation Safety Committee and Associates with an e-mail of the incident; 2) issuing an Authorized User Responsibility Letter to each Authorized User (AU). The letter listed what materials that they were authorized and the associated responsibilities of being a user; 3) posting in the hot labs a list of AU's and what materials they are authorized; and 4) issuing prospective AU's letters that inform these individual they are not to authorized to use the materials until they are approved as AUs, and another follow up letter to inform them when they are approved as an AU's by the NRC. All the letters are required to be signed and dated by the AU's to acknowledge their understanding of the letters content.

The inspectors reviewed a sampling of both the AU Responsibility Letters and application for AU approval letters, and found the letters to be properly processed. The inspectors visited the Indianapolis facility hot lab and noted that the list of AU's and the materials that they were authorized to use was posted. A technologist was also interviewed and was found to provide the proper response according to the licensees procedures when posed with a scenario similar to the incident that lead to the escalated enforcement. This violation is considered closed.