

**SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION**

1. LICENSEE/LOCATION INSPECTED:  Ionia County Memorial Hospital 479 Lafayette Street Ionia, Michigan 48846  REPORT NUMBER(S) 2012001		2. NRC/REGIONAL OFFICE  Region III U. S. Nuclear Regulatory Commission 2443 Warrenville Road, Suite 210 Lisle, IL 60532-4352	
3. DOCKET NUMBER(S)  030-36163	4. LICENSE NUMBER(S)  21-32431-01	5. DATE(S) OF INSPECTION  November 7, 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:

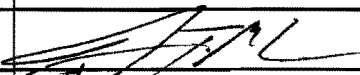
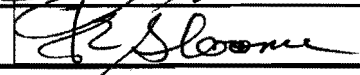
- 1. Based on the inspection findings, no violations were identified.
- 2. Previous violation(s) closed.
- 3. The violation(s), specifically described to you by the inspector as non-cited violations, are not being cited because they were self-identified, non-repetitive, and corrective action was or is 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	Aaron T. McCraw		11/14/12
BRANCH CHIEF	Tamara E. Bloomer		11/13/12

**Docket File Information**  
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6. INSPECTION PROCEDURES USED  IP 87131	7. INSPECTION FOCUS AREAS  03.01-03.08
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**SUPPLEMENTAL INSPECTION INFORMATION**

1. PROGRAM CODE(S)  02120	2. PRIORITY  3	3. LICENSEE CONTACT  Blain Pierce, Radiology Supervisor	4. TELEPHONE NUMBER  (616) 523-1557
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Main Office Inspection      Next Inspection Date: 11/07/2015  
 Field Office Inspection  
 Temporary Job Site Inspection

**PROGRAM SCOPE**

This was a routine inspection of a small hospital in Ionia, Michigan. The licensee was authorized to use radioactive materials under 10 CFR 35.100, 35.200, and 35.300 (limited to 33 mCi of iodine-131) for diagnostic studies and therapeutic procedures. The licensee had not performed any administration under 35.300 since the previous inspection. The licensee performed 1-2 diagnostic studies per day. The licensee received unit doses from a local pharmacy. The licensee employed one full-time, experienced nuclear medicine technologists and had access to part-time technologists to cover his vacations, as needed. The nuclear medicine department was open Monday through Friday during standard business hours. An outside consultant performed quarterly program audits and calibrated the licensee's equipment and instruments, as required.

**PERFORMANCE OBSERVATIONS**

The inspector interviewed the nuclear medicine technologist and determined that he was knowledgeable in emergency and material handling procedures and techniques. The inspector discussed patient identification, package surveys and wipes, and spill cleanup procedures with the technologist. The technologist demonstrated equipment checks, area surveys, package receipt, and waste disposal procedures. The inspector observed that licensed material was adequately secured during the review and was not readily accessible to members of the general public. The inspector observed personnel dosimetry being worn by the staff during the inspection, and records did not indicate doses in excess of 10 CFR Part 20 limits.

No violations were identified during this inspection.