

**SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION**

1. LICENSEE/LOCATION INSPECTED:  Porter Regional Hospital 85 East U.S. Highway 6 Valparaiso, IN 46383  REPORT NUMBER(S) 13-01		2. NRC/REGIONAL OFFICE  Region III U. S. Nuclear Regulatory Commission 2443 Warrenville Road, Suite 210 Lisle, IL 60532-4352	
3. DOCKET NUMBER(S)  030-12150	4. LICENSE NUMBER(S)  13-17073-01	5. DATE(S) OF INSPECTION  February 25, 2013	

**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	Andrew M. Bramnik	<i>Andrew M. Bramnik</i>	2/25/13
BRANCH CHIEF	Tamara E. Bloomer	<i>Tamara E. Bloomer</i>	3/6/13

**Docket File Information**  
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6. INSPECTION PROCEDURES USED  87132	7. INSPECTION FOCUS AREAS  03.01 - 03.07		

**SUPPLEMENTAL INSPECTION INFORMATION**

1. PROGRAM CODE(S) 02240	2. PRIORITY 2	3. LICENSEE CONTACT Diana Painton, Nuc Med Supervisor	4. TELEPHONE NUMBER (219) 983-8300
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Main Office Inspection      Next Inspection Date: 02/25/2015

Field Office Inspection

Temporary Job Site Inspection

**PROGRAM SCOPE**

This was a routine inspection of a 225 bed hospital that was authorized to use byproduct materials in 10 CFR Sections 35.100, 35.200, 35.300, 35.400, and 35.1000 in yttrium-90 SIR-Spheres. The nuclear medicine area was staffed with fives full time technologists, who administered between 12 and 15 diagnostic administrations daily in addition to approximately 30 administrations of sodium iodine I-131 per year. The nuclear medicine staff received both unit and bulk doses from an area pharmacy with no generators. The radiation oncology staff performed less than ten prostate permanent seed implant procedures per year and had disposed of their previous cesium-137 brachytherapy source inventory. This was the first inspection at the licensee's new hospital that had been constructed in 2011 and 2012.

**PERFORMANCE OBSERVATIONS**

The inspector observed one diagnostic administration of byproduct material during the inspection. This observation, combined with interviews of available staff, revealed an adequate level of understanding of emergency and material handling procedures and techniques. Within each functional area, the licensee successfully demonstrated routine equipment QA/QC checks, package receipt, area surveys, and waste handling and disposal procedures. A contract physicist performed quarterly audits to help oversee the nuclear medicine programs. The inspector confirmed that these activities were successfully and routinely completed by reviewing selected records. The inspector also reviewed selected records for I-131, manual brachytherapy, and Y-90 administrations requiring a written directive since the previous inspection. The licensee maintained adequate records and procedures to demonstrate that each administration was in accordance with the written directive; however, the licensee informed the inspector that they utilized several documents collectively as the written directive. During the exit meeting, the licensee's management committed to use a one page written directive to minimize confusion and make their process more efficient.

Licensed material was adequately secured and not readily accessible to members of the general public. The licensee possessed a survey meter that was calibrated, operational, and performed comparably to an NRC survey meter during side-by-side measurements. The inspector also performed independent and confirmatory radiation measurements in each functional area that were consistent with licensee survey records and postings. Personal whole body and extremity dosimetry badges were observed being worn by the staff during the inspection, and records did not indicate doses in excess of 10 CFR Part 20 limits. Dosimetry records indicated that the highest annual whole body and extremity dose since the previous inspection were 435 millirem (mrem) and 1286 mrem, respectively.

*RJP*