

**SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION**

<p>1 LICENSEE/LOCATION INSPECTED</p> <p>Franciscan St. Anthony Health-Crown Point 1201 South Main Street Crown Point, Indiana 46307</p> <p>REPORT NUMBER(S) 13-01</p>	<p>2 NRC/REGIONAL OFFICE</p> <p>Region III U. S. Nuclear Regulatory Commission 2443 Warrenville Road, Suite 210 Lisle, IL 60532-4352</p>
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<p>3 DOCKET NUMBER(S)</p> <p>030-10047</p>	<p>4 LICENSE NUMBER(S)</p> <p>13-15933-01</p>	<p>5 DATE(S) OF INSPECTION</p> <p>August 12, 2013</p>
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**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):

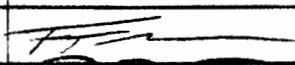
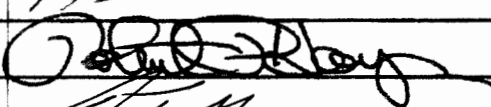
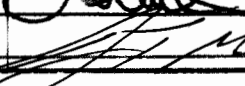
4. During this inspection, certain of your activities, as described below and/or attached, were in violation of NRC requirements and are being cited in accordance with NRC Enforcement Policy. This form is a NOTICE OF VIOLATION, which may be subject to posting in accordance with 10 CFR 19.11.  
(Violations and Corrective Actions)

1. Title 10 CFR 71.5(a) requires that a licensee who transports licensed material outside of the site of usage, as specified in the NRC license, or where transport is on public highways, or who delivers licensed material to a carrier for transport, comply with the applicable requirements of the regulations appropriate to the mode of transport of the Department of Transportation (DOT) in 49 CFR Parts 107, 171-180, and 390-397.

Title 49 CFR 172.704(a) specifies the elements of hazmat employee training as: (1) general awareness/familiarization training, (2) function-specific training, and (3) safety training. (Continued on Part 2)

**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	Frank Godlewski, M.S., RSO		8/23/13
NRC INSPECTOR	Robert P. Hays		8/23/13
BRANCH CHIEF	Aaron T. McCraw		9/7/13

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(Continued)

Title 49 CFR 172.704(c) requires, in part, that a hazmat employee receive initial training, and recurrent training at least once every three years.

Contrary to the above, the licensee did not provide training for its hazmat employees which satisfied the requirements in Subpart H to 49 CFR Part 172, in that during the period between August 11, 2010, and August 12, 2013, a period greater than three years, the licensee did not provide at least once during the prior three years, recurrent training for its hazmat employees as required and the licensee otherwise meets the definition of a hazmat employer in 49 CFR 171.8.

This is a Severity Level IV Violation (Section 6.3.d.4).

The licensee's nuclear medicine staff and Radiation Safety Officer were not aware of the training requirement. The licensee's proposed corrective actions will be to schedule a hazmat training session for the nuclear medicine staff with a consultant within the next 30 days.

2. Title 10 CFR 20.1101(c) requires the licensee to annually review the content and implementation of the radiation protection program.

Contrary to the above, as of August 12, 2013, the licensee has not reviewed the content and implementation of the radiation protection program for the period of January 2012 through August 2013.

This is a Severity Level IV Violation (Section 6.3.d.3).

The licensee's Radiation Safety Officer was not aware of the requirement. The licensee intends to complete the review within the next 30 days and future annual reviews each year by following the guidance in NUREG-1556, Volume 9, Rev. 2, Appendix L, Model Medical Licensee Audit.

**Docket File Information**

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6. INSPECTION PROCEDURES USED  87131, 87132	7. INSPECTION FOCUS AREAS  03.01-03.07
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**SUPPLEMENTAL INSPECTION INFORMATION**

1. PROGRAM CODE(S)  02120	2. PRIORITY  3	3. LICENSEE CONTACT  Frank Godlewski, RSO	4. TELEPHONE NUMBER  (219) 738-2100
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Main Office Inspection                      Next Inspection Date: 08/12/2016  
 Field Office Inspection \_\_\_\_\_  
 Temporary Job Site Inspection \_\_\_\_\_

**PROGRAM SCOPE**

The licensee was a medical institution with authorization by the license to use byproduct materials for diagnostic and therapeutic medical procedures permitted by 10 CFR 35.100, 35.200, 35.300, and 35.400. The licensee's Nuclear Medicine Department routinely conducts a monthly average of 200 patient studies with a staff of 2 full-time and one part-time nuclear medicine technologists. The majority of diagnostic studies are bones, gall bladders, and lung studies. Xe-133 is used for ventilation studies also. Iodine-131 administrations requiring a written directive averaged none to three cases per month including high dose post-thyroidectomy ablations. Low-dose brachytherapy procedures performed by the licensee included the use of cesium-137 sources for female implants and iodine-125 seed implants for males. Cesium-137 implants averaged one case annually, and iodine-125 seed implants using pre-loaded needles averaged 3-4 cases annually. The licensee has a Sr-90 eye applicator that is periodically calibrated but has not been used for a patient treatment since the previous inspection.

**Performance Observations**

During the inspection, the licensee's staff and RSO demonstrated/discussed: (1) survey instruments and required surveys; (2) package receipt and check-in procedures; (3) wipe test counting; (4) unit dose, kit preparation, and safe handling procedures; (5) cesium-137 implant procedures, inventory verification, and leak tests; (6) nursing staff training for implant patients; (7) waste handling; (8) other sealed source inventories and leak tests; (9) security and storage of licensed material; (10) radiation safety committee meetings; (11) written directives; (12) patient release calculations; (13) iodine-131 seed implant procedures; (14) HAZMAT refresher Training. (15) radiation safety program audit results; (16) one minor contamination event documented; (17) dosimetry; [CY 2012: 422mr-DDE; 1600mr-SDE],

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Main Office Inspection      Next Inspection Date: 08/12/2016

Field Office Inspection \_\_\_\_\_

Temporary Job Site Inspection \_\_\_\_\_

**PROGRAM SCOPE**

[CY 2013 thru June 2013, 203mr-DDE; 630mr-SDE]; and (18) corrective actions for one SL IV violation identified during the previous inspection for personal food items being stored in a refrigerator inside the hot lab and is considered closed. Two SL IV violations were identified during the current inspection pertaining to the licensee's failure to provide HAZMAT refresher training during the past three years and a failure of the licensee to annually review the content and implementation of the radiation protection program.

The inspector performed independent and confirmatory radiation measurements, which indicated results consistent with licensee survey records and postings.