NRC FORM 591M PART 1
(07-2012)
10 CFR 2.201

U.S. NUCLEAR REGULATORY COMMISSION

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED:	2. NRC/REGIONAL OFFICE
Metropolitan Hospital dba Metro Health 5900 Byron Center Ave SW Wyoming, MI 49519 REPORT NUMBER(S) 2013001	Region III U. S. Nuclear Regulatory Commission 2443 Warrenville Road, Suite 210 Lisle, IL 60532-4352

3. DOCKET NUMBER(S)	4. LICENSE NUMBER(S)	5. DATE(S) OF INSPECTION
030-02134	21-12829-01	9/19/13

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:

[X] 1. Based on the inspection findings, no violations were identified.

[ ] 2. Previous violation(s) closed.

[ ] 3. The violations(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	Ken Lambert	9/19/13
BRANCH CHIEF	Aaron McCraw		10/2/13

NRC FORM 591M PART 3
(07-2012)
10 CFR 2.201

U.S. NUCLEAR REGULATORY COMMISSION

Docket File Information

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3. DOCKET NUMBER(S)	4. LICENSE NUMBER(S)	5. DATE(S) OF INSPECTION
030-02134	21-12829-01	September 19, 2013

6. INSPECTION PROCEDURES USED	7. INSPECTION FOCUS AREAS
87131	03.01-03.08

SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM CODE(S)	2. PRIORITY	3. LICENSEE CONTACT	4. TELEPHONE NUMBER
2120	3	Jeffrey McClure, M.D., RSO	(616) 252-7200

☑ Main Office Inspection Next Inspection Date: September 19, 2016

☐ Field Office Inspection

☐ Temporary Job Site Inspection

PROGRAM SCOPE

The licensee was a 200 bed community hospital authorized to use byproduct materials under 10 CFR 35.100, 35.200, 35.300, and 35.500. ~~The~~ The license authorized two locations of use, one at the main facility in Wyoming, Michigan and the second at Greenville, Michigan. The Wyoming facility was divided into two areas within the main hospital. One area performs studies related to inpatient and outpatient procedures and the second is dedicated to cardiac imaging. The Greenville, Michigan facility, was authorized for 35.100 and 35.200 byproduct materials, and performs studies on Tuesday and Wednesday. The nuclear medicine department at the main hospital employed 2 full time and one on call technologists and performed 6-8 studies per day mainly using technicium-99m (Tc-99m) for bone, HIDA, and gastric emptying studies. The licensee performs 1-2 lung studies per week using xenon-133 (Xe-133). The licensee performs approximately 6 treatments per year using iodine-131 (I-131) for hyperthyroid or thyroid ablations. The nuclear medicine department receives 150 millicurie (mCi) bulk Tc-99m on weekdays and 250 mCi on Saturday and Sunday for after hours and emergency studies. The cardiac area employs 3 full time and one on call technologists and performs 5-8 stress tests daily. The Greenville location performs approximately 4 stress tests per day on Tuesday and Wednesday employing one of the technologists from the cardiac area. The licensee has a radiation safety committee that meets quarterly. The licensee has contracted with a health physics consultant who performs quarterly audits and attends the radiation safety committee meetings.

OBSERVATIONS AND FINDINGS

The Greenville location should be inspected at the next inspection, as no activities were being performed at this location on the day of the inspection. The inspector confirmed that the hot lab was secured at the Greenville location. Licensee staff at the nuclear medicine and cardiac stress test departments discussed/demonstrated dose calibrator constancy and well counter daily checks, package receipt, daily and weekly surveys, waste disposal, and Xe-133 and I-131 administrations. The inspector observed a package receipt survey, and several injections of TC-99m. The inspector reviewed RSC meeting minutes, consultant quarterly audits, I-131 written directives, package receipt surveys, daily and weekly survey results, and waste disposal records. The maximum exposures were 226 millirem (mrem) DDE and 270 mrem SDE for 2011 from January to 6/30/13, 377 mrem DDE and 860 mrem SDE for 2012, and 354 mrem DDE and 590 mrem SDE for 2011.

No violations of regulatory requirements were identified.