

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

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| <p>1. LICENSEE/LOCATION INSPECTED:</p> <p>Henry County Memorial Hospital 1000 North 16th Street New Castle, IN 47362</p> <p>REPORT NUMBER(S) 14-01</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> | |
| <p>3. DOCKET NUMBER(S)</p> <p>030-13716</p> | <p>4. LICENSE NUMBER(S)</p> <p>13-17958-01</p> | <p>5. DATE(S) OF INSPECTION</p> <p>January 31, 2014</p> |

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 | Claire E. Wellinghoff | <i>Claire Wellinghoff</i> | 1/31/14 |
| BRANCH CHIEF | Aaron T. McCraw | <i>Aaron T. McCraw</i> | 2/13/14 |

Docket File Information
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| 6. INSPECTION PROCEDURES USED 87131 | 7. INSPECTION FOCUS AREAS 3.01-3.07 |
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SUPPLEMENTAL INSPECTION INFORMATION

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| 1. PROGRAM CODE(S) 02120 | 2. PRIORITY 3 | 3. LICENSEE CONTACT William D. Shidal, M.D., RSO | 4. TELEPHONE NUMBER (765) 521-1445 |
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Main Office Inspection Next Inspection Date: 01/31/2014

Field Office Inspection

Temporary Job Site Inspection

PROGRAM SCOPE

This was a routine inspection of a hospital authorized to use licensed material permitted by Section 35.100, 35.200, 35.300, and 35.500. The hospital employed two full-time nuclear medicine technologists who performed a full spectrum of diagnostic studies, but primarily performed diagnostic cardiology tests. The technologists conducted approximately 25-30 studies per week using unit doses ordered from a local radiopharmacy. The licensee performed therapeutic administrations using I-131, and the most recent therapy was performed in July 2013. The licensee had two sources permitted by 35.500 and were decayed down, in storage, and were no longer in use. The licensee intended to dispose of the sources in the future. Additionally, the licensee employed an outside medical physics consultant who conducted quarterly audits of the licensee's radiation safety program.

Performance Observations

During the time of the inspection, the inspector observed one patient administration. The inspector observed the technologist: (1) demonstrate the daily dose calibrator constancy check; (2) demonstrate package receipt procedures; (3) assay the dose; (4) utilize a syringe shield; (5) carry the dose in a shielded container to the injection area; (6) wear ring and whole body badges; (7) dispose of radioactive waste; (8) prepare a package to be returned to the radiopharmacy; (9) demonstrate spill response procedures; and (10) an inventory cross-check. The inspector reviewed the licensee's therapy program including written directives, patient release criteria, patient instructions, and the written directive audit program. Other selected records were reviewed, which included: (1) dosimetry reports; (2) weekly wipe test results; (3) quarterly audit reports; (4) leak test results of sealed sources; (5) annual radiation safety training certificates; (6) hazmat training certificates; (7) daily survey results; (8) monthly leak test results of xenon traps; (9) and radioactive waste disposal logs.

No violations of NRC requirements were identified during this inspection.