

**SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION**

1. LICENSEE/LOCATION INSPECTED: <i>Covenant Medical Center</i> <i>1447 N. Harrison</i> <i>Saginaw, MI 48602</i>		2. NRC/REGIONAL OFFICE Region III U. S. Nuclear Regulatory Commission 2443 Warrenville Road, Suite 210 Lisle, IL 60532-4352	
REPORT NUMBER(S) <i>2014/001</i>			
3. DOCKET NUMBER(S) <i>030 - 02012</i>	4. LICENSE NUMBER(S) <i>21-01492-02</i>	5. DATE(S) OF INSPECTION <i>7/17/14</i>	

**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):

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- 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	<i>Ken Lambert</i>	<i>7/17/14</i>
BRANCH CHIEF	Aaron McCraw	<i>AJML</i>	<i>8/6/14</i>

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(Continued)

**PERFORMANCE OBSERVATIONS**

At the 5400 Mackinaw Road facility, licensed material was observed adequately secured within the hot lab during the inspection and was not readily accessible to members of the general public. Interviews conducted with the technologists revealed an adequate level of understanding of radiation safety practices and emergency procedures. The inspector reviewed dose calibrator daily checks, quarterly linearity and annual accuracy checks, package receipt surveys, daily and weekly surveys, waste handling and disposal records, and radiation safety committee meeting minutes. Licensee staff demonstrated daily dose calibrator checks, well counter, daily and weekly surveys, and package receipt surveys. The inspector observed an injection of Tc-99m and the administration of a I-123 capsule. The inspector performed independent and confirmatory radiation measurements in the hot lab, imaging and unrestricted areas, which indicated results consistent with licensee survey records and postings.

At the 700 Cooper Road facility, licensed material was observed adequately secured within the hot lab during the inspection and was not readily accessible to members of the general public. Interviews conducted with the technologists revealed an adequate level of understanding of radiation safety practices and emergency procedures. The inspector reviewed dose calibrator daily checks, quarterly linearity and annual accuracy checks, package receipt surveys, daily and weekly surveys, waste handling and disposal records, radiation safety committee meeting minutes, and annual and hazardous material training. Licensee staff demonstrated daily dose calibrator checks, well counter, daily and weekly surveys, and package receipt surveys. The inspector performed independent and confirmatory radiation measurements in the hot lab, imaging and unrestricted areas, which indicated results consistent with licensee survey records and postings.

The licensee exchanged badges on a quarterly basis and used a NVLAP approved vendor. Dosimetry records for the locations inspected were reviewed, which indicated that the maximum exposures were 182 millirem (mrem) deep-dose equivalent (DDE) and 770 mrem shallow-dose equivalent (SDE) for 2014 through May 31; 460 mrem DDE and 1390 mrem SDE for 2013; and 434 mrem DDE and 1470 mrem SDE for 2012.

**Docket File Information**  
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6. INSPECTION PROCEDURES USED  87131, 87132	7. INSPECTION FOCUS AREAS  03.01-03.09
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**SUPPLEMENTAL INSPECTION INFORMATION**

1. PROGRAM CODE(S) 2240	2. PRIORITY 2	3. LICENSEE CONTACT Chirdeep Bhutani, M.D., RSO	4. TELEPHONE NUMBER (989) 583-7000
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Main Office Inspection                      Next Inspection Date: July 17, 2016

Field Office Inspection    5400 Mackinaw Road, Saginaw, MI

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

**PROGRAM SCOPE**

This was a routine unannounced inspection of a medical institution licensed to use byproduct materials for diagnostic and therapeutic medical procedure under 10 CFR 35.100, 200, 300, 400, and 1000 at five locations as specified on the license. The licensee had not conducted any medical procedure under 35.400 or 35.1000 authorizations since the last inspection. The licensee contracted with a health physics consultant to perform quarterly audits of the radiation safety program.

At 5400 Mackinaw Road the licensee performed studies authorized by 10 CFR 35.100, 200, and 300. The facility employed one full time technologist and performed 7-8 patient studies per day including bone scans, heart scans, sentinel node and I-123 thyroid uptake. The licensee also performed 2-3 I-131 hyperthyroid treatments with an occasional ablation treatment. The facility received all unit doses from a local nuclear pharmacy and iodine was received in capsule form.

At 700 Cooper Avenue the licensee performed studies authorized by 10 CFR 25.100, 200, and 300. The facility employed 5 full time technologist including the chief technologist and the technologist who rotates through the Mackinaw facility. The facility performed 8-9 technitium-99m cardiac studies per day. The facility also performed 10-12 studies per day including bone scans, HIDA, gastric emptying and lung scans. The facility performed 7-8 In-111 blood tagging procedures per week. The facility also performed 11-12 hyperthyroid and 2-3 thyroid ablations per year using I-131 in capsule form. The facility received a 30 millicurie bulk dose in the morning and a 270 millicurie bulk dose in the afternoon for emergency and add on studies.

Performance observations continued on Part 2.