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
Reid Hospital and Health Care Services 1100 Reid Parkway Richmond, IN 47374 REPORT NUMBER(S) 15-001	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
030-01614	13-03284-02	March 19, 2015

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 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	Deborah A. Piskura, Health Physicist	Deborah A Piskura	3/19/15
BRANCH CHIEF	Aaron T. McCraw, Chief, MIB		3/26/15

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

U.S. NUCLEAR REGULATORY COMMISSION

Docket File Information

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6. INSPECTION PROCEDURES USED	7. INSPECTION FOCUS AREAS
87130, 87131 & 87132	03.01- 03.07

SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM CODE(S)	2. PRIORITY	3. LICENSEE CONTACT	4. TELEPHONE NUMBER
02230	2	Joseph Hunt M.D., RSO	(765) 653-5121

☑ Main Office Inspection Next Inspection Date: 03/19/2017

☑ Field Office Inspection 1200 Reid Parkway, Richmond, IN

☐ Temporary Job Site Inspection

PROGRAM SCOPE

This was a routine inspection of a large community hospital authorized to use byproduct material in Sections 35.100, 35.200, 35.300, 35.400, and Ir-192 in an HDR unit. The nuclear medicine department was staffed with six technologists who performed studies daily. The department administered approximately 300 patient studies per month which included a full spectrum of studies. The licensee received its material in unit dose form and in bulk for kit preparation from a licensed radiopharmacy. Diagnostic materials were administered in 3 separate areas within the hospital (NM, PET, and Cardiac). The department maintained an active I-131 (capsules only) therapy program, administering numerous dosages annually. The hospital retained the services of a consultant who performed quarterly audits of the radiation safety program (last 12/15/2014, with no findings).

The radiation oncology department was staffed with 10 therapists, 1 AMP, and 2 authorized physician users. The licensee administered approximately 10-15 patient treatments annually utilizing its HDR. These treatments were limited to breast and GYN cancer cases. All HDR patient treatments were administered by the attending radiation oncologist and the AMP; the therapist operated the controls to the HDR unit. Service, maintenance, and source exchanges were performed by the HDR device manufacturer. Although authorized for 35.400 materials, the licensee had not performed any LDR permanent implants since the previous inspection.

This inspection consisted of interviews with select licensee personnel; a review of select records; tours of the nuclear medicine and radiation oncology departments; and independent measurements. The inspector observed the licensee staff administer numerous diagnostic dosages. The inspector reviewed written directives and treatment plans and interviewed the attending physicians and AMPs. The inspection included observations of package surveys, use of personnel monitoring and contamination controls, security of RAM, dose calibrator QA checks, and HDR safety/QA checks.

No violations of NRC requirements were identified during this inspection.