NRC FORM 591M PART 1 U.S. NUCLEAR REGULATORY COMMISSION								
10 CFR 2.201 SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION								
1. LICENSEE/LOCATIO	N INSPECTED:	2. NRC/REGIONAL OFFICE						
Indiana University Health Tipton Hospital, Inc. 1000 S. Main Street Tipton, IN 46072-1049			Region III U. S. Nuclear Regulatory Commission 2443 Warrenville Road, Suite 210 Lisle, IL 60532-4352					
REPORT NUMBER(S) 2015-001								
3. DOCKET NUMBER(S) 4.		4. LICENSE NUMBER	S) 5. DATE(S) OF INSPECTION					
030-09577		13-01719-02	July 21, 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: I. 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):								
 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) 								
		atement of Corre	active 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	Dennis P. O'Dowd		Denis P. C	O'Douel	7/21/15			
BRANCH CHIEF	Aaron T. McCraw		Am	1/	צן רו צ			
NRC FORM 591M PART	1 (07-2012)							

NRC FORM 591M PART 3 (07-2012)		ookot Eilo Infa		CLEAR REGULATORY COMMISSION				
07-2012) 10 CFR 2.201 Docket File Information SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION								
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Indiana University Health 1000 S. Main Street Tipton, IN 46072-1049	Tipton Hospital, Inc.		Region III U. S. Nuclear Regulatory Commission 2443 Warrenville Road, Suite 210 Lisle, IL 60532-4352					
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030-09577		13-01719-02		July 21, 2015				
6. INSPECTION PROCEDURES USED		7. INSPECTION FOCUS AREAS						
87130		03.01-03.07						
SUPPLEMENTAL INSPECTION INFORMATION								
1. PROGRAM CODE(S)	2. PRIORITY	3. LICENSEE CONTAC		4. TELEPHONE NUMBER				
02120	5	Robert T. Anger	, Jr., M.S., RSO	(785) 675-8500				
✓ Main Office Inspection Next Inspection Date: 07/21/2020 ☐ Field Office Inspection								
		PROGRAM S	COPE					
This was a routine inspection of a small community hospital with authorization for materials permitted in sections 35.100 and 35.200. The nuclear medicine department was staffed with two technologists (only one of whom is full-time in nuclear medicine), who performed approximately 40 diagnostic nuclear medicine procedures each month. The licensee performed a full spectrum of diagnostic imaging studies, primarily cardiac scans, as well as bone, HIDA, and gastric emptying, and lung studies using xenon-133. The licensee obtained unit doses from a local radiopharmacy. and does not use molybdenum/technetium generators. The licensee was not authorized to administer therapeutic doses.								
Performance Observations								
This inspection consisted of interviews with select licensee personnel; a review of select records; tour of the nuclear medicine department; and independent measurements. In interviews conducted with available staff, the licensee demonstrated an adequate level of understanding of emergency and material handling procedures and techniques. Dose calibrator constancy checks, package receipt, daily and weekly surveys, and waste handling and disposal procedures were successfully demonstrated. An outside consultant performed quarterly program audits that appear to be adequate to maintain program compliance. Licensed material was observed as adequately secured during the review and was not readily accessible to members of the general public. Survey meters were found to be calibrated and operational, and performed well (within 10 percent) in side-by-side comparison with an NRC instrument.								
Independent measurements taken did not indicate readings in excess of 10 CFR Part 20 limits in restricted or unrestricted areas. Personal dosimetry was observed being worn by the staff during the inspection. Dosimetry records indicated maximum whole body for 2014 of 132 millirem (mrem). Personal dosimetry records reviewed for year-to-date 2015 did not indicate whole body and extremity exposures approaching 10 CFR Part 20 limits.								
No violations were identified during this inspection.								