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
Acquisition Bell Hospital, LLC d/b/a Bell Hospital 901 Lakeshore Drive Ishpeming, Michigan 49849 REPORT NUMBER(S) 2015-001	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
030-13856	21-02037-03	October 6, 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	Dennis P. O'Dowd	Dennis P. O'Dowd	10/06/15
BRANCH CHIEF	Aaron T. McCraw		11/4/15

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
87131	03.01-03.07

SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM CODE(S)	2. PRIORITY	3. LICENSEE CONTACT	4. TELEPHONE NUMBER
02120	3	Todd K. Bostwick, M.D.	(906) 486-4431

☑ Main Office Inspection Next Inspection Date: 10/6/2018

☐ Field Office Inspection

☐ Temporary Job Site Inspection

PROGRAM SCOPE

This was a routine inspection of a 25-bed hospital that performed four diagnostic nuclear medicine procedures per day. One full-time nuclear medicine technologist performed all patient procedures Mondays through Fridays. The licensee obtained a molybdenum/technetium generator every two weeks for diagnostic administrations. The licensee performed primarily cardiac, lung, bone, and gall bladder scans. The licensee did not use Xe-133. The licensee's use of licensed material requiring a written directive has decreased over the past two years, due to the retirement of one of the hospital's endocrinologists. The licensee performed approximately only two therapeutic administrations of I-131 in 2015, three in 2014, and seven in 2013.

PERFORMANCE OBSERVATIONS

This inspection consisted of interviews with select licensee personnel; tour of the nuclear medicine department, independent measurements, and a review of select records. Interviews with available staff, as well as direct observation of two diagnostic administrations of technitium-99m, revealed an adequate level of understanding of emergency and material handling procedures and techniques. The licensee successfully described or demonstrated generator receipt and survey procedures, dose calibrator constancy checks, daily surveys, dose preparation, molybdenum breakthrough testing, and waste handling and disposal procedures. The inspector confirmed that these activities were successfully completed by reviewing selected records since the previous inspection.

The inspector reviewed the written directives and supporting documentation for all of the administrations that required a written directive since the previous inspection. The administrations were completed in accordance with regulatory requirements and the licensee's procedures. The licensee's technologist was familiar with the definition of a medical event. An outside consultant performed quarterly program audits that were adequate to oversee the program. Licensed material was adequately secured and not readily accessible to members of the general public. The licensee possessed a radiation survey meter that was calibrated and operational. Personal whole body and extremity dosimetry badges were observed being worn by the staff during the inspection, and records did not indicate doses in excess of 10 CFR Part 20 limits. Dosimetry records indicated maximum whole body and extremity readings for 2014 of 94 millirem (mrem) and 150 mrem, respectively. Records reviewed for YTD did not indicate whole body and extremity exposures approaching 10 CFR Part 20 limits.

No violations were identified during this inspection.