

**SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION**

<p>1. LICENSEE/LOCATION INSPECTED:</p> <p>VHS Children's Hospital of Michigan 3901 Beaubien Boulevard Detroit, Michigan 48201</p> <p>REPORT NUMBER(S) 16-001</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>030-13166</p>	<p>4. LICENSE NUMBER(S)</p> <p>21-03298-05</p>	<p>5. DATE(S) OF INSPECTION</p> <p>January 14, 2016</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:

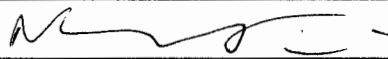

- 1. Based on the inspection findings, no violations were identified.
- 2. Previous violation(s) closed.
- 3. The violation(s), specifically described to you by the inspector as non-cited violations, are not being cited because they were self-identified, non-repetitive, and corrective action was or is 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	Navid Tehrani		1/14/16
BRANCH CHIEF	Aaron McCraw	 for ATM	1/25/16

**Docket File Information**

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6. INSPECTION PROCEDURES USED  87131	7. INSPECTION FOCUS AREAS  03.01-03.07
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**SUPPLEMENTAL INSPECTION INFORMATION**

1. PROGRAM CODE(S)  02120	2. PRIORITY  3	3. LICENSEE CONTACT  Kimberly Krosnowski, Imaging Dir.	4. TELEPHONE NUMBER  (313) 745-0257
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Main Office Inspection      Next Inspection Date: \_\_\_\_\_

Field Office Inspection \_\_\_\_\_

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

**PROGRAM SCOPE**

This was an unannounced routine inspection of a 228 bed hospital that was authorized to use byproduct materials in 10 CFR Sections 35.100, 35.200, and 35.300. The licensee was also authorized to use byproduct materials for research and development activities. The licensee's nuclear medicine area was staffed with one technologist who administered three to four diagnostic administrations daily in addition to ten to twelve administrations of sodium iodine I -131 per year. The nuclear medicine staff received both unit and bulk doses from area pharmacies with no generators. The licensee's PET area was staffed with three technologists who administered approximately five to ten administrations daily. The PET area was located next to the hospital's production facilities that are operated under a separate NRC license. The licensee maintained two research laboratories using tritium and chromium-51 for immunology studies and clinical tests.

The inspector observed one diagnostic administration of byproduct material and one PET procedure during the inspection. These observation, combined with interviews of available staff, revealed an adequate level of understanding of emergency and material handling procedures and techniques. Within each functional area, the licensee successfully demonstrated routine equipment QA/QC checks, package receipt, area surveys, and waste handling and disposal procedures. A contract physicist performed quarterly audits to help oversee the nuclear medicine, PET, and research laboratory programs. The inspector confirmed that these activities were successfully and routinely completed by reviewing selected records. The inspector also reviewed selected records for I -131 administrations requiring a written directive since the previous inspection. The licensee maintained adequate records and procedures to demonstrate that each administration was in accordance with the written directive.

Licensed material was adequately secured and not readily accessible to members of the general public. The licensee possessed radiation survey meters that were 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.

No violations of NRC requirements were identified during this inspection.