

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED:

Union Hospital, Inc.
1606 North Seventh Street
Terre Haute, Indiana 47804-2780

2. NRC/REGIONAL OFFICE

Region III
U. S. Nuclear Regulatory Commission
2443 Warrenville Road, Suite 210
Lisle, IL 60532-4352

REPORT NUMBER(S) 2016-001

3. DOCKET NUMBER(S)

030-11072

4. LICENSE NUMBER(S)

13-16457-01

5. DATE(S) OF INSPECTION

April 27, 2016

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:

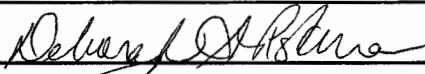
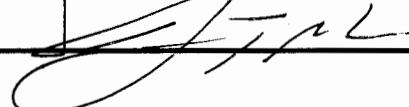
- 1. Based on the inspection findings, no violations were identified.
- 2. Previous violation(s) closed.
- 3. The violation(s), specifically described to you by the inspector as non-cited violations, are not being cited because they were self-identified, non-repetitive, and corrective action was or is 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	Deborah A. Piskura, Senior Health Physicist		4/27/16
BRANCH CHIEF	Aaron T. McCraw, Chief, MIB		5/6/16

Docket File Information

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED: Union Hospital, Inc. 1606 North Seventh Street Terre Haute, Indiana 47804-2780 REPORT NUMBER(S) 2016-001	2. NRC/REGIONAL OFFICE Region III U. S. Nuclear Regulatory Commission 2443 Warrenville Road, Suite 210 Lisle, IL 60532-4352
--	---

3. DOCKET NUMBER(S) 030-11072	4. LICENSE NUMBER(S) 13-16457-01	5. DATE(S) OF INSPECTION April 27, 2016
--------------------------------------	---	--

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

SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM CODE(S) 02120	2. PRIORITY 3	3. LICENSEE CONTACT Dan Taylor, M.S., RSO	4. TELEPHONE NUMBER (812) 238-7275
---------------------------------	----------------------	--	---

Main Office Inspection Next Inspection Date: 04/27/2019

Field Office Inspection 1532 N. 7th St, & 1711 N. 6 1/2 St, Terre Haute

Temporary Job Site Inspection _____

PROGRAM SCOPE

This was a routine inspection of a large medical institution (350+ beds) authorized to use licensed material permitted by Sections 35.100, 35.200 (including PET), 35.300, 35.400, and 35.500. The licensee operated two areas of use for its nuclear medicine activities. Collectively, the nuclear medicine department was staffed with four full-time technologists who performed approximately 300-375 diagnostic procedures monthly. The licensee received unit doses and bulk Tc-99m for kit preparation; the licensee administered a full spectrum of diagnostic studies. The department also administered numerous I-131 dosages (capsules only) for whole body follow up studies, hyperthyroid, and CA treatments. The department also administered 2-3 Ra-223 Xofigo treatments annually. All radiopharmaceutical therapy patients were released in accordance with Section 35.75.

The radiation oncology department was staffed with two medical physicists, two dosimetrists, and six authorized physician users. The licensee used Cs-137 and Ir-192 to administer approximately 10-12 temporary implants per year; these treatments were limited to gynecological and lung cancers. The licensee administered 1-2 I-125 permanent prostate implants annually; this treatment modality had significantly decreased over the years.

This inspection consisted of interviews with licensee personnel, a review of select records, tours of the nuclear medicine and radiation oncology departments, and independent measurements. The inspector observed licensee personnel perform dose calibrator QA tests, surveys, source inventories, security of byproduct material and use of personnel monitoring. The inspector observed the licensee staff administer an I-131 patient treatment for thyroid cancer. The inspector reviewed the patient's written directive, interviewed the attending physician, and observed licensee staff prepare and assay the dosage, provide the patient instructions and perform patient surveys. The inspector reviewed the licensee's calculations for compliance with patient release requirements in Section 35.75. The inspector also reviewed three temporary implant cases and three written directives and pre- and post-treatment plans for permanent prostate implant cases. No violations of NRC requirements were identified during this inspection.