



**Docket File Information**

**SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION**

1. LICENSEE/LOCATION INSPECTED:  Aspirus Keweenaw Hospital 205 Osceola Street Laurium, MI 49913  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
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3. DOCKET NUMBER(S)  030-18138	4. LICENSE NUMBER(S)  21-20242-01	5. DATE(S) OF INSPECTION  June 16, 2016
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6. INSPECTION PROCEDURES USED  87130	7. INSPECTION FOCUS AREAS  All
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**SUPPLEMENTAL INSPECTION INFORMATION**

1. PROGRAM CODE(S)  02121	2. PRIORITY  5	3. LICENSEE CONTACT  Greg Fisher, CNMT - RSO	4. TELEPHONE NUMBER  (906) 337-6568
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Main Office Inspection                      Next Inspection Date: 06/16/2021

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

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

**PROGRAM SCOPE**

This was an unannounced routine inspection of a community hospital authorized to use byproduct material for diagnostic medical purposes at its facility in Laurium, Michigan, and at an affiliated hospital in Ontonagon, Michigan. At the time of the inspection, two nuclear medicine technologists (one of which was the RSO) performed around 30 cardiac stress tests and 15 general diagnostic administrations per month. The licensee performed these administrations weekdays at the hospital in Laurium, expect for two Tuesdays per month, when one technologist traveled to Ontonagon to perform one or two administrations there in the morning. The licensee retained the services of a consulting physicist to review the content and implementation of the radiation safety program quarterly.

**PERFORMANCE OBSERVATIONS**

The inspector toured the hospital in Laurium, Michigan to evaluate the licensee's measures for materials security, hazard communication and exposure control. The inspector did not visit the Ontonagon facility, as no administrations were scheduled there that week. The inspector conducted independent and confirmatory surveys of the Laurium facility, and found no residual contamination or exposures to members of the public in excess of regulatory limits. The inspector observed the administration of one cardiac stress test while on-site, and verified the licensee's inventory of sealed sources. The licensee's staff demonstrated and discussed the implementation of procedures for dose calibrator quality control, package receipt, decay-in-storage waste handling, and area surveys. Through these observations and discussions, the inspector found the licensee's staff to be knowledgeable of radiation protection principles and regulatory requirements.

The inspector reviewed a selection of the licensee's records for package receipts, area surveys, waste handling, dose administration, survey meter calibrations, worker instruction including hazmat training and testing, dosimetry, and consulting physicist audits. The licensee had recently developed and implemented a protocol for breast lymphoscintigraphy injections; the inspector also reviewed this protocol and found that it appeared to incorporate satisfactory radiation safety practices.

No violations of NRC requirements were identified as a result of this inspection.