

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED: <i>ASPIRUS IRON RIVER HOSPITAL & CLINICS</i> <i>1400 WEST ICE LAKE RD</i> <i>IRON RIVER, MI 49935</i>		2. NRC/REGIONAL OFFICE Region III U. S. Nuclear Regulatory Commission 2443 Warrenville Road, Suite 210 Lisle, IL 60532-4352		
REPORT NUMBER(S) 1501 <i>16-01</i>		3. DOCKET NUMBER(S) <i>030-13903</i>	4. LICENSE NUMBER(S) <i>21-18586-01</i>	5. DATE(S) OF INSPECTION <i>8/31/16</i>

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	E.L. Kulzer	<i>E.L. Kulzer</i>	<i>8/31/16</i>
BRANCH CHIEF	<i>David T. McCann</i>	<i>[Signature]</i>	<i>9/13/16</i>

Docket File Information
SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED: Aspirus Iron River Hospital & Clinics 1400 West Ice Lake Rd Iron River, MI 49935 REPORT NUMBER(S) 2016001	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) 030-13903	4. LICENSE NUMBER(S) 21-18586-01	5. DATE(S) OF INSPECTION 08/31/2016
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6. INSPECTION PROCEDURES USED IP 87130	7. INSPECTION FOCUS AREAS 03.01 through 03.07
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SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM CODE(S) 02121	2. PRIORITY 5	3. LICENSEE CONTACT Sharon Dedo, RSO	4. TELEPHONE NUMBER (906) 265-6121
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Main Office Inspection Next Inspection Date: 8/31/2021

Field Office Inspection _____

Temporary Job Site Inspection _____

PROGRAM SCOPE

This was a routine unannounced inspection of a small community hospital that employs one nuclear medicine technologist, who is the radiation safety officer, and performs studies Mondays, Tuesdays, Thursdays, and Fridays. The licensee was authorized to use licensed material permitted by 10CFR 35.100 and 35.200. The Nuclear Medicine Department performed approximately 40 diagnostic procedures monthly, which included a full spectrum of studies. The licenses received unit doses from a licensed radiopharmacy. The hospital retained the services of a consulting physicist who audits the radiation safety program on a quarterly basis.

PERFORMANCE OBSERVATIONS

This inspection consisted of interviews with selected licensee personnel; a review of selected records; a tour of the nuclear medicine department; and independent measurements. The inspector did not observe the administration of a cardiac stress testing procedure because the RSO was not working on Wednesday. The licensee's hot lab was located within the imaging suite, which was properly secured from unauthorized access during the inspection. The inspector reviewed dosimetry records and noted the following whole body (WB) and extremity doses were 157 mrem and 690 mrem for 2015 respectively; 149 mrem WB and 630 mrem extremity for 2014; 149 mrem WB and 570 mrem for 2013; 226 mrem WB and 630 mrem for 2012. The inspection included reviews of dose calibrator QA checks, security of byproduct material, use of personnel monitoring, package receipts and surveys.

No violations of regulatory requirements were identified