

**SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION**

1. LICENSEE/LOCATION INSPECTED:  Reid Hospital and Health Care Services 1100 Reid Parkway Richmond, IN 47374  REPORT NUMBER(S) 2017001	2. NRC/REGIONAL OFFICE  Region III U. S. Nuclear Regulatory Commission 2443 Warrenville Road, Suite 210 Lisle, IL 60532-4352	
3. DOCKET NUMBER(S)  030-01614	4. LICENSE NUMBER(S)  13-03284-02	5. DATE(S) OF INSPECTION  March 2-23, 2017

**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.


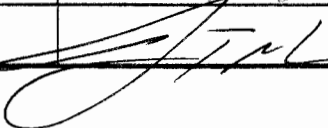
Non-cited violation(s) were discussed involving the following requirement(s):

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- 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	Edward F. Harvey		3/23/17
BRANCH CHIEF	Aaron T. McCraw		4/6/17

**Docket File Information**

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3. DOCKET NUMBER(S)  030-01614	4. LICENSE NUMBER(S)  13-03284-02	5. DATE(S) OF INSPECTION  March 22-23, 2017
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6. INSPECTION PROCEDURES USED  87131 & 87132	7. INSPECTION FOCUS AREAS  All
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**SUPPLEMENTAL INSPECTION INFORMATION**

1. PROGRAM CODE(S)  02230	2. PRIORITY  2	3. LICENSEE CONTACT  Xiaofei Song, PhD, RSO	4. TELEPHONE NUMBER  (765) 983-3166
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Main Office Inspection                      Next Inspection Date: March 22, 2019  
 Field Office Inspection    1200 Reid Parkway, Richmond, IN  
 Temporary Job Site Inspection \_\_\_\_\_

**PROGRAM SCOPE**

This was a routine, unannounced inspection of a large community hospital authorized to use byproduct material for medical procedures under 10 CFR 35.100, 200, 300, 400, and 600. The licensee performed approximately 25-30 diagnostic procedures each week and approximately 5 therapeutic I-131 administrations per month within its main nuclear medicine department. The licensee also staffed a separate cardiology department at which approximately 5-10 stress tests were completed each day. In addition, the licensee also performed approximately 10 full HDR brachytherapy treatments per year (mostly gynecological). Although authorized, the licensee had not performed any seed implants under 10 CFR 35.400 since the last two inspections. The licensee retained the services of a medical physics consultant to perform quarterly audits of the nuclear medicine department.

The inspector observed nuclear medicine staff demonstrate package receipt and surveying procedures, daily dose calibrator constancy checks, daily surveys, and waste disposal procedures. In addition, the inspector observed the administration of doses for a cardiac stress test, a HIDA scan, and a PET scan. The inspector noted that the NMTs wore the appropriate personal protective equipment, assayed the doses, and verified patient identity prior to administering the doses. The inspector also observed the nuclear medicine staff also demonstrate adequate knowledge of radiation protection principles and emergency procedures during a minor spill that occurred during an administration. In the radiation oncology department, the inspector observed the AMP perform daily QA procedures that are performed prior to patient treatment.

The inspector reviewed a selection of licensee records, including written directives, treatment plans, HDR calibration reports, quarterly audits, source inventories, survey meter calibration records, package receipt logs, dosimetry, and RSC meeting minutes with no issues noted.

No violations were identified during this inspection.