

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

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| 1. LICENSEE/LOCATION INSPECTED: Johnson County Memorial Hospital 1125 Jefferson St. Franklin, Indiana 46131 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) 030-08553 | 4. LICENSE NUMBER(S) 13-14817-01 | 5. DATE(S) OF INSPECTION April 20, 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:

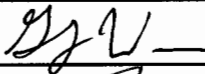

- 1. Based on the inspection findings, no violations were identified.
- 2. Previous violation(s) closed.
- 3. The violation(s), specifically described to you by the inspector as non-cited violations, are not being cited because they were self-identified, non-repetitive, and corrective action was or is 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):

- 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 | Geoffrey M. Warren |  | 4/20/17 |
| BRANCH CHIEF | Aaron T. McCraw |  | 5/3/17 |

Docket File Information

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| 6. INSPECTION PROCEDURES USED 87131 | 7. INSPECTION FOCUS AREAS 03.01 - 03.09 |
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SUPPLEMENTAL INSPECTION INFORMATION

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|---------------------------------|----------------------|---|---|
| 1. PROGRAM CODE(S) 02120 | 2. PRIORITY 3 | 3. LICENSEE CONTACT Andrea Browne, Ph.D., Contract RSO | 4. TELEPHONE NUMBER (317) 736-3478 |
|---------------------------------|----------------------|---|---|

Main Office Inspection Next Inspection Date: 4/20/2020

Field Office Inspection 1155 West Jefferson, Franklin IN

Temporary Job Site Inspection _____

PROGRAM SCOPE

This was a routine, unannounced inspection of a hospital located in Franklin, Indiana. The hospital had authorization to perform diagnostic and therapeutic nuclear medicine procedures under 10 CFR 35.100, 200, and 300. Licensed activities were conducted only at the locations indicated on the license. The nuclear medicine department was staffed with two full-time nuclear medicine technologists who worked as needed at both addresses. The licensee operated a main nuclear medicine service and cardiac lab at 1125 West Jefferson and a cardiology clinic at 1155 West Jefferson; each address had its own hot lab area. The technologists typically administered 120 doses total at the two areas. All doses were received as unit doses from a licensed nuclear pharmacy. The main nuclear medicine service included a variety of diagnostic administrations, primarily hepatobiliary, bone, and xenon-133 lung procedures. Licensee staff had performed one procedure requiring a written directive, an iodine-131 hyperthyroid treatment in capsule form, since the last inspection. All waste was either held for decay-in-storage (DIS) or returned to the nuclear pharmacy.

Performance Observations: The inspector observed three diagnostic administrations of licensed material including dose preparation and disposal, dose calibrator constancy, and camera QC. Licensee personnel demonstrated additional checks in nuclear medicine, package receipt and return surveys and wipes, and daily and weekly contamination surveys, and described a variety of diagnostic procedures, iodine-131 hyperthyroid procedures, and other procedures. The inspector noted no concerns with these activities. The inspector reviewed the written directive for the one radiopharmaceutical therapy performed since the last inspection and identified no concerns. Interviews with licensee personnel indicated adequate knowledge of radiation safety concepts and procedures. Review of dosimetry records indicated no exposures of concern. The inspector performed independent and confirmatory radiation measurements which indicated results consistent with licensee survey records and postings.

The cardiology clinic and the cardiology room at the main hospital had been added to the license since the previous inspection. The facilities were consistent with the maps provided to the NRC.

No violations of NRC requirements were identified during this inspection.