

### SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

<b>1. LICENSEE/LOCATION INSPECTED:</b>  Community Hospital of Anderson and Madison Cty 1515 North Madison Avenue Anderson, IN 46012  <b>REPORT NUMBER(S)</b> 2017001	<b>2. NRC/REGIONAL OFFICE</b>  Region III U. S. Nuclear Regulatory Commission 2443 Warrenville Road, Suite 210 Lisle, IL 60532-4352
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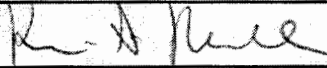

<b>3. DOCKET NUMBER(S)</b>  030-01643	<b>4. LICENSE NUMBER(S)</b>  13-10205-01	<b>5. DATE(S) OF INSPECTION</b>  May 12, 2017
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**LICENSEE:**  
The inspection was an examination of the activities conducted under your license as they relate to radiation 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	Kevin G. Null		05/19/2017
BRANCH CHIEF	Aaron McCraw	 for ATM	5/23/17

**Docket File Information**

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6. INSPECTION PROCEDURES USED  87131	7. INSPECTION FOCUS AREAS  03.01 - 03.07
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**SUPPLEMENTAL INSPECTION INFORMATION**

1. PROGRAM CODE(S)  2120	2. PRIORITY  3	3. LICENSEE CONTACT  Joseph Rastetter, RSO	4. TELEPHONE NUMBER  (765) 298-5174
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Main Office Inspection                      Next Inspection Date:                      May 2020

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

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

**PROGRAM SCOPE**

This was a routine, unannounced inspection of a licensee that was authorized for material described in 10 CFR Parts 35.100, 35.200, 35.300 and 31.11. The licensee was staffed by a certified chief nuclear medicine technologist (NMT), and 2 full-time and 1 part-time staff certified nuclear medicine technologists. The nuclear medicine department ordered unit doses from Cardinal Health radiopharmacy, Indianapolis, and performed an average of 15 diagnostic studies per day. Seventy percent of diagnostic studies were cardiac procedures, and the remaining were primarily bone, gall bladder, and lung imaging procedures. The licensee administered 24 iodine-131 treatments in 2015 which required a written directive, 12 in 2016, and 2 in 2017, as of the date of this inspection.

**Performance Observations:**

The inspector observed an NMT prepare and inject a 10 millicurie dose for a cardiac study. The inspector noted that the NMT was wearing whole body and extremity dosimetry, gloves, and a laboratory coat. The NMT measured the dosage in a calibrated dose calibrator, used a syringe shield, and properly disposed of the syringe. The inspector also observed an NMT perform and record a dose calibrator daily constancy test, and conduct surveys in the hot lab. Another NMT also described how physical inventory of sealed sources is conducted, and how smears are taken and analyzed for removable contamination. The inspector reviewed records of incoming package surveys, interviewed the RSO about the licensee's procedures for issuing written directives, and reviewed a random selection of signed and dated written directives for iodine-131 treatments, along with associated patient release documentation. The inspector noted that an independent, licensed company provided mobile PET services. The company arranged for unit doses to be delivered directly to their van, and removed their own radioactive waste. The inspector reviewed 10 CFR Part 20 annual radiation protection program audits for CY 2016 and 2017 which were performed by the RSO, and personal dosimetry (whole body max CY 2016 was 293 mrem, and extremity max was 440 mrem). The inspector conducted independent surveys in the hot lab and imaging rooms with a Canberra Model MRAD213 survey meter, calibrated on 2/17/17. No radiation levels above background (0.02 mR/h - 0.05 mR/hr) were identified. The inspector also noted that the licensee addressed a violation issued in 2015 for failure to conduct annual HAZMAT training. Training was last completed on 12/6/16.

No violations of NRC regulations were identified.

GW  
5/23/17