

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED: Oakland Physicians Medical Center, LLC d/b/a Pontiac General Hospital 461 W. Huron St Pontiac, MI 48341 REPORT NUMBER(S) 2017001		2. NRC/REGIONAL OFFICE Region III U. S. Nuclear Regulatory Commission 2443 Warrenville Rd, Suite 210 Lisle, IL 60532	
3. DOCKET NUMBER(S) 030-02060	4. LICENSE NUMBER(S) 21-06217-02	5. DATE(S) OF INSPECTION May 26, 2017 with in-office review through June 2, 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	Zahid Sulaiman, Health Physicist	<i>Zahid Sulaiman</i>	6/9/17
BRANCH CHIEF	Aaron T. McCraw, Chief, MIB	<i>[Signature]</i>	6/12/17

Docket File Information
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6. INSPECTION PROCEDURES USED 87130	7. INSPECTION FOCUS AREAS 03.01-03.07
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SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM CODE(S) 02121	2. PRIORITY 5	3. LICENSEE CONTACT Liza Bivens, Radiology Manager	4. TELEPHONE NUMBER (248) 857-6767
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Main Office Inspection Next Inspection Date: 05/26/2022

Field Office Inspection _____

Temporary Job Site Inspection _____

PROGRAM SCOPE

This was a routine inspection of a community hospital that was authorized to use licensed materials under 10 CFR 35.100 and 35.200. The nuclear medicine department was staffed with two part-time nuclear medicine technologists (NMT) who performed approximately 200 diagnostic procedures monthly; primarily cardiac stress tests, HIDA, bone scans, and other diagnostic procedures. The nuclear medicine department work hours were from 0700 - 1200, Monday through Friday. The licensee was out of the Chapter 11 Bankruptcy and now doing business as Pontiac General Hospital.

Performance Observations

The inspection consisted of interviews with select licensee personnel; review of select records; a tour of the nuclear medicine department; and independent measurements. At the time of inspection, no licensed activities were conducted. The inspector: (1) observed the NMT conduct a physical inventory of sealed sources, and all sources were accounted for; (2) had the NMT demonstrate the dose calibrator constancy check, package receipt and check-in procedures, the end of the day daily area surveys and weekly wipe test, and proper handling of radioactive waste and disposal procedures. The inspector reviewed the following records: quarterly program audits conducted by an outside consultant, package receipts, waste disposal records, daily area surveys and weekly wipes test results, linearity and accuracy of the dose calibrator, sealed source inventory and leak tests, and DOT Hazmat training. The inspector also reviewed the dosimetry records for 2014 through 2016, indicating the maximum annual dose to be 69 mrem - DDE, and 130 mrem - SDE. The inspector performed independent radiation measurements in each functional area that were consistent with licensee survey records and within regulatory limits.

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