

## SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED:  Aspirus Ironwood Hospital N10561 Grand View Lane Ironwood, MI 49938  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)  030-35898	4. LICENSE NUMBER(S)  21-32342-01	5. DATE(S) OF INSPECTION  August 15, 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	Ryan Craffey	<i>Ryan Craffey</i>	8/15/17
BRANCH CHIEF	Aaron McCraw	<i>AJ McCraw</i>	08/30/2017

**Docket File Information**

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6. INSPECTION PROCEDURES USED  87130	7. INSPECTION FOCUS AREAS  All		

**SUPPLEMENTAL INSPECTION INFORMATION**

1. PROGRAM CODE(S)  02121	2. PRIORITY  5	3. LICENSEE CONTACT  Donna M. Cataldo, MD - RSO	4. TELEPHONE NUMBER  (906) 932-2525
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<input checked="" type="checkbox"/> Main Office Inspection	Next Inspection Date: 08/15/2022
<input type="checkbox"/> Field Office Inspection	
<input type="checkbox"/> Temporary Job Site Inspection	

**PROGRAM SCOPE**

This was an unannounced routine inspection of a 25-bed community hospital authorized to use byproduct material for diagnostic medical purposes at its facility in Ironwood, Michigan. At the time of the inspection, two part-time nuclear medicine technologists performed 1-6 diagnostic administrations per day (about half of which were cardiac stress tests) using unit doses from a radiopharmacy in Wisconsin. The department was open from 6:00 am to 2:30 pm, Monday through Friday. A medical physicist from another Aspirus hospital in Wisconsin audited the licensee's radiation protection program quarterly.

**PERFORMANCE OBSERVATIONS**

The inspector toured the hospital in Ironwood to evaluate the licensee's measures for materials security, hazard communication and exposure control. The inspector conducted independent surveys of the facility, and found no exposures in excess of regulatory limits to members of the public, nor any evidence of residual contamination in unrestricted areas. The inspector observed the administration of two cardiac stress tests, and noted the satisfactory use of ALARA practices and personnel dosimetry. The licensee's staff demonstrated the implementation of procedures for package receipt, survey meter use, and radioactive waste handling. The inspector also discussed with the staff the circumstances of an administration error which had occurred in March 2017. The pharmacy sent (and the technologist administered) a dose of sodium pertechnetate that was erroneously prepared and labeled for a stress test (which normally requires sestamibi). The activity of Tc-99m was the same, however, and based on estimates of organ and whole-body dose to the patient, the licensee's physicist determined that a medical event had not occurred. The inspector reviewed and had no concerns regarding the physicist's assessment or the licensee's actions to address the potential for recurrence.

The inspector also reviewed a selection of records, including physicist audits, annual worker instruction, hazmat training documentation, personnel dosimetry reports, as well as package receipt, dose administration, area survey, and decay-in-storage waste handling documentation.

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