

**SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION**

1. LICENSEE/LOCATION INSPECTED:  McKenzie Memorial Hospital 120 Delaware Street Sandusky, MI 48471  REPORT NUMBER(S) 2018001		2. NRC/REGIONAL OFFICE  Region III U. S. Nuclear Regulatory Commission 2443 Warrenville Road, Suite 210 Lisle, IL 60532-4352	
3. DOCKET NUMBER(S)  030-29915	4. LICENSE NUMBER(S)  21-24938-01	5. DATE(S) OF INSPECTION  March 30, 2018	

**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:

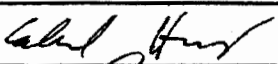
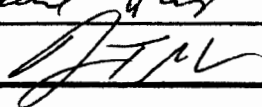
- 1. Based on the inspection findings, no violations were identified.
- 2. Previous violation(s) closed.
- 3. The violation(s), specifically described to you by the inspector as non-cited violations, are not being cited because they were self-identified, non-repetitive, and corrective action was or is 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	Edward F. Harvey		3/30/18
BRANCH CHIEF	Aaron T. McCraw		04/10/2018

**Docket File Information**

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6. INSPECTION PROCEDURES USED  87130	7. INSPECTION FOCUS AREAS  All
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**SUPPLEMENTAL INSPECTION INFORMATION**

1. PROGRAM CODE(S)  02121	2. PRIORITY  5	3. LICENSEE CONTACT  John Ference, MD - RSO	4. TELEPHONE NUMBER  (810) 648-3770
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Main Office Inspection      Next Inspection Date: March 30, 2023

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

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

**PROGRAM SCOPE**

This was an unannounced, routine inspection of a regional hospital authorized to use byproduct material for diagnostic medical procedures permitted by 10 CFR 35.100 and 35.200 at its facility in Sandusky, Michigan. The licensee employed one nuclear medicine technologist (NMT) who administered technetium(Tc)-99m for diagnostic imaging studies to approximately 20 patients per month. Administrations were performed Monday through Friday, as needed. The licensee retained the services of a physics consultant to perform equipment calibrations and quarterly audits of the nuclear medicine program.

The inspector was unable to observe any administrations of licensed material as there were no procedures scheduled for the day of the inspection. The inspector observed the NMT demonstrate package receipt procedures, dose calibrator quality control, and area survey procedures. The NMT also demonstrated adequate knowledge of radiation protection principles and emergency procedures through interviews with the inspector.

The inspector reviewed a selection of licensee records, including quarterly audits, source inventories, survey meter calibration records, package receipt logs, and dosimetry with no issues noted. In addition, the inspector performed independent surveys, which revealed no readings that would indicate residual contamination or exposures to members of the public in excess of regulatory limits.

The inspector verified that corrective actions were implemented for a violation identified during the last inspection concerning the licensee's failure to secure the hot lab containing licensed material when no licensee personnel were in the area. The inspector observed that an automatic door closer and a numeric keypad had been installed on the hot lab door to ensure that the door closed and locked at all times. This violation was closed.

No new violations of NRC requirements were identified during this inspection.