NRĆ FORM 591M	PART 1			U.S. NL	ICLEAR REGULATORY	COMMISSION
(07-2012) 10 CFR 2:201  SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION						
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3. DOCKET NUMBER	(S)		4. LICENSE NUME	BER(S)	5. DATE(S) OF INSPECTION	
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Regulatory Commis procedures and rep	ssion (NRC) rules an resentative records,	d regulations and the interviews with person	e conditions of you onnel, and observ	ense as they relate to radiation saf ur license. The inspection consist vations by the inspector. The insp	ted of selective examination	ons of
		lings, no violations w	ere identified.			
	s violation(s) closed.					
non-rep	ations(s), specifically etitive, and corrective on, were satisfied.	e action was or is bei	ng taken, and the	non-cited violations, are not being e remaining criteria in the NRC En	g cited because they were forcement Policy, to exerc	e self-identified, cise
	Non-cited viola	ition(s) were discusse	ed involving the fo	ollowing requirement(s):		
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cited in a with 10 (	nis inspection, certai accordance with NR0 CFR 19.11. ns and Corrective Ac	C Enforcement Policy	s described belov . This form is a N	v and/or attached, were in violatio IOTICE OF VIOLATION, which m	n of NRC requirements ar ay be subject to posting ir	nd are being n accordance
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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	marice will be acrilled	PRINTED NAME	a no fariner writte	SIGNATURE	su, unless specifically req	DATE
LICENSEE'S REPRESENTATIVE						
NRC INSPECTOR	Robert G.	Gattone,	tr.	Robert y. Hattone.	h.	11/29/18
BRANCH CHIEF	Name T.	N:Cron		Robert G. Stattone,	<b>U</b>	12/14/18
NRC FORM 591M PART						( 1

## NRC FORM 591M PART 3 U.S. NUCLEAR REGULATORY COMMISSION (07-2012) 10 CFR 2.201 **Docket File Information** SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION 1. LICENSEE/LOCATION INSPECTED: 2. NRC/REGIONAL OFFICE St. Mary Medical Center - Hobart Region III 1500 S Lake Park Ave., Hobart, IN and U. S. Nuclear Regulatory Commission 300 W 61st. Ave., Hobart, IN 2443 Warrenville Road, Suite 210 Lisle, IL 60532-4352 REPORT NUMBER(S) 2018001 4. LICENSE NUMBER(S) 3. DOCKET NUMBER(S) 5. DATE(S) OF INSPECTION 13-03459-03 11/29/18 030-31379 6. INSPECTION PROCEDURES USED 7. INSPECTION FOCUS AREAS 87132 02.01, 02.02, 02.04, 02.05, 02.06, 02.07, 02.09 SUPPLEMENTAL INSPECTION INFORMATION 2. PRIORITY 3. LICENSEE CONTACT 1. PROGRAM CODE(S) 4. TELEPHONE NUMBER 02240 2 Santosh K. Kar, M.S., RSO (815) 370-6538 ✓ Main Office Inspection 11/29/2020 Next Inspection Date: 300 W 61st. Ave., Hobart, IN Field Office Inspection Temporary Job Site Inspection PROGRAM SCOPE This was an unannounced, routine inspection. At the time of the inspection, seven full-time nuclear medicine technologists performed approximately 10 to 12 diagnostic administrations per day, and approximately two therapeutic administrations of I-131 capsules per month. The licensee retained the services of a medical physics consultant to review the content and implementation of the program quarterly, and maintained a Radiation Safety Committee, which also met quarterly. Performance Observations The inspector: (1) observed that licensed material was secured as required; (2) observed a nuclear medicine technologist (NMT) properly administer iodine-123 to a patient for a thyroid uptake test and a thyroid scan; (3) observed an NMT wearing whole body and extremity dosimeter badges while handling licensed material; (4) noted that there were no Y-90 SIR-Spheres administrations during the inspection; (5) noted that the licensee used technetium-99m macroaggregated albumin to conduct a liver to lung shunting test prior to administering Y-90 SIR-Spheres; (6) reviewed applicable records and interviewed applicable staff regarding Y-90 SIR-Spheres administrations; (7) noted that the licensee conducted ambient exposure rate surveys of patients post Y-90 SIR-Spheres administration; (8) noted that the licensee conducted proper ambient exposure rate surveys of applicable materials to determine the amount of Y-90 SIR-Spheres that was administered to the patient; (9) noted that there was no 10 CFR 35.300 use during the inspection but the inspector reviewed applicable records of 35.300 use; (10) followed up on the licensee's contact with the NRC Region III Office on August 18, 2016, concerning a potential medical event at the hospital involving a patient getting 35 mCi Tc-99m MDP instead of the intended non-nuclear bone densitometry test and the inspector noted that the patient actually received 25.5 mCi Tc-99m MDP and the inspector used the proper Tc-99m-MDP package insert to determine that there was no

medical event because the patient did not receive 5 rem to the whole body nor 50 rem to an organ or tissue; (11) noted that the licensee conducted a root cause analysis for preventing the aforementioned 25.5 mCi Tc-99m MDP incident, and implemented actions to prevent similar occurrences; and (12) reviewed dosimeter badge records for 2015-2018 to date,

and the annual highest whole body and extremities doses were 321 millirem, and 2690 mrem, respectively.

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