

**SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION**

1. LICENSEE/LOCATION INSPECTED:  Covenant Medical Center, Inc.  1447 N Harrison Saginaw, MI 48602  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)  030-02012	4. LICENSE NUMBER(S)  21-01492-02	5. DATE(S) OF INSPECTION  November 27, 2018 to December 27, 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:

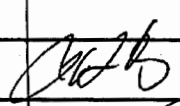
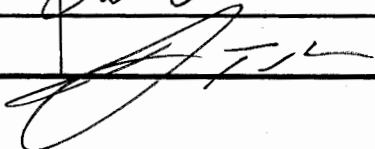
- 1. Based on the inspection findings, no violations were identified.
- 2. Previous violation(s) closed.
- 3. The violation(s), specifically described to you by the inspector as non-cited violations, are not being cited because they were self-identified, non-repetitive, and corrective action was or is 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	Luis Nieves Folch		12/27/18
BRANCH CHIEF	Aaron T. McCraw		12/28/18

**Docket File Information**  
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6. INSPECTION PROCEDURES USED 87131, 87132	7. INSPECTION FOCUS AREAS 03.01-03.08
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**SUPPLEMENTAL INSPECTION INFORMATION**

1. PROGRAM CODE(S) 02240	2. PRIORITY 2	3. LICENSEE CONTACT Daniel Dryden	4. TELEPHONE NUMBER (989) 583-5260
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Main Office Inspection      Next Inspection Date: November 27, 2020

Field Office Inspection    700 Cooper Ave., 900 Cooper Ave. and

Temporary Job Site Inspection    5400 Mackinaw, Saginaw, MI

**PROGRAM SCOPE**

This was an unannounced, routine inspection of a community hospital authorized to use byproduct material under 10 CFR 35.100, 200, 300, 400 and 600 at four locations specified on the license in Saginaw, Michigan. The licensee had not conducted any medical procedure under 35.400 authorizations since the last inspection. The licensee retained the services of a medical physics consultant and maintained a Radiation Safety Committee which met quarterly.

At the 700 Cooper Ave. location, the licensee performed studies authorized by 10 CFR 25.100, 200, and 300. At the time of the inspection, the nuclear medicine department was staffed with 4 full-time nuclear medicine technologists (NMTs) from Mondays to Fridays who performed, on average, 16 diagnostic procedures per day and 30 administration of I-131 annually. At this location the licensee had two hot labs - one for heart studies and the other for other diagnostic procedures.

At the 900 Cooper Ave. location, the licensee only performed cardiac studies authorized by 10 CFR 25.100 and 200. At the time of the inspection, the nuclear medicine department was staff with two full-time NMTs from Mondays to Thursdays. The licensee performed, on average, seven diagnostic procedures per day.

At the 5400 Mackinaw Rd. location, the licensee performed diagnostic and therapeutic procedures authorized under 10 CFR 35.100, 200, 300, and 600. At the time of the inspection, the nuclear medicine department was not performing administrations as they only operate on Tuesdays and Wednesdays. The licensee performed two to three HDR treatments per month, mostly gynecological and skin treatments.

(Continued on Part 2)

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(Continued)

Performance Observations

The inspector toured the nuclear medicine departments to evaluate the licensee's measures for materials security, hazard communication, and exposure control. The inspector observed the preparation and administration one cardiac stress study and a bone scan using Tc-99m. The inspector conducted independent and confirmatory surveys and found no residual contamination or exposures to members of public in excess of regulatory limits. The staff demonstrated the implementation of various licensee policies and procedures, including those for manual brachytherapy planning and treatment, receipt of packages containing radioactive material, waste handling, area surveys, and spill response. Through these observations, demonstrations, and other discussions, the inspector determined that the licensee's staff was knowledgeable of radiation protection principles.

The inspector had the authorized medical physicist and therapist demonstrate the HDR unit's security of licensed material, daily spot check, emergency equipment and procedures, safety procedures and instructions, door interlock system, and radiation monitoring equipment. The inspector reviewed ten HDR written directives and treatment plans, with no issues noted.

The inspector also reviewed a selection of licensee records, including written directives, written directives and patient release calculations for I-131 capsule administrations, routine nuclear medicine records, training, dosimetry, quarterly consultant audits, and Radiation Safety Committee meeting minutes.

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