

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED: Indiana University Health Bloomington Hospital P.O. BOX 1149 Radiology Department Bloomington, IN 47402 REPORT NUMBER(S) 2019001		2. NRC/REGIONAL OFFICE Region III U. S. Nuclear Regulatory Commission 2443 Warrenville Road, Suite 210 Lisle, IL 60532-4352	
3. DOCKET NUMBER(S) 030-01644	4. LICENSE NUMBER(S) 13-10408-02	5. DATE(S) OF INSPECTION March 21, 2019	

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:

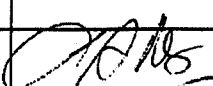
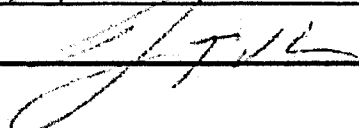
- 1. Based on the inspection findings, no violations were identified.
- 2. Previous violation(s) closed.
- 3. The violation(s), specifically described to you by the inspector as non-cited violations, are not being cited because they were self-identified, non-repetitive, and corrective action was or is 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		4/12/19
BRANCH CHIEF	Aaron T. McCraw		4/12/19

Docket File Information
SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED: Indiana University Health Bloomington Hospital P.O. BOX 1149 Radiology Department Bloomington, IN 47402 REPORT NUMBER(S) 2019001		2. NRC/REGIONAL OFFICE Region III U. S. Nuclear Regulatory Commission 2443 Warrenville Road, Suite 210 Lisle, IL 60532-4352	
3. DOCKET NUMBER(S) 030-01644	4. LICENSE NUMBER(S) 13-10408-02	5. DATE(S) OF INSPECTION March 21, 2019	
6. INSPECTION PROCEDURES USED 87131, 87132		7. INSPECTION FOCUS AREAS 03.01-03.08	

SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM CODE(S) 02120	2. PRIORITY 3	3. LICENSEE CONTACT Patrick J. Byrne, CHP, RSO	4. TELEPHONE NUMBER (812) 353-9446
---------------------------------	----------------------	---	---

Main Office Inspection Next Inspection Date: March 21, 2022

Field Office Inspection 500 Landmark Ave., Bloomington, IN

Temporary Job Site Inspection _____

PROGRAM SCOPE

This was a routine, unannounced inspection, of a regional hospital in Bloomington, Indiana authorized to use byproduct material under 10 CFR 35.100, 200, 300, and 400. At the time of the inspection, the licensee staffed the main nuclear department with three nuclear medicine technologists (NMT) in two hot labs. The licensee performed a comprehensive spectrum of diagnostic and therapeutic administrations of radiopharmaceuticals at the main location. The licensee performed 40 diagnostic procedure per week and 12 I-131 administrations in the last two years. The licensee has not performed any seed implants since the last inspection. At the 500 Landmark Ave. location, the licensee staffed one NMT who performed a spectrum of diagnostic and therapeutic administrations except for hearts studies and PET scans. The licensee performed 10 diagnostic procedures per week and 27 I-131 administrations last year.

PERFORMANCE OBSERVATIONS

The inspector toured both nuclear medicine laboratories and observed the nuclear medicine technologist demonstrate package receipt surveys and instrument quality control checks. The inspector observed the preparation and administration of two cardiac rest studies. The inspector performed independent surveys of the hot lab and other areas of the nuclear medicine department and found no contamination or exposures to members of the public distinguishable from background. The NMTs demonstrated adequate knowledge of radiation safety principles and practices through interviews. The inspector reviewed quarterly audit reports, spill reports, and documentation of package receipt, area surveys, instrument quality control, waste disposal, written directives, dose calibrator linearity, and employee training. The inspector also reviewed monthly dosimetry reports, which indicated annual whole-body and extremity doses below regulatory limits.

During the last inspection, one violation was identified at the 500 Landmark Ave. location under a previous license for failure to follow licensee procedures for safe use of unseal by product material by storing food in the hot lab. The licensee completed corrective actions, as described. The inspector did not observe any food in the hot lab; interviewed the NMT; and determined that the violation had not recurred. This violation is closed.

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