

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED: The Community Hospital 901 MacArthur Blvd. Munster, IN 46321 REPORT NUMBER(S) 2019001	2. NRC/REGIONAL OFFICE Region III U. S. Nuclear Regulatory Commission 2443 Warrenville Rd, Suite 210 Lisle, IL 60532
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3. DOCKET NUMBER(S) 030-09964	4. LICENSE NUMBER(S) 13-15882-01	5. DATE(S) OF INSPECTION April 26, 2019
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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	Zahid Sulaiman, Health Physicist	<i>Zahid Sulaiman</i>	4/26/19
BRANCH CHIEF	Aaron T. McCraw, Chief, MIB	<i>ATM</i>	5/17/19

Docket File Information

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6. INSPECTION PROCEDURES USED 87130, 87131, & 87132	7. INSPECTION FOCUS AREAS 03.01 - 03.07
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SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM CODE(S) 02240	2. PRIORITY 2	3. LICENSEE CONTACT Santosh Kar, AMP, RSO	4. TELEPHONE NUMBER (219) 836-4479
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- Main Office Inspection Next Inspection Date: 04/26/2021
- Field Office Inspection 10020 Donald S. Powers Dr. Munster, IN
- Temporary Job Site Inspection _____

PROGRAM SCOPE

This was a routine, unannounced inspection of a 458-bed hospital authorized to use licensed material permitted by 10 CFR 35.100 and 35.200, 35.300, 35.400, 35.600 (iridium-192 in a high dose rate remote afterloader (HDR) unit), and 35.1000 (yttrium-90 (Y-90)) microspheres. The licensee conducted licensed activities at four locations. Collectively, the nuclear medicine departments were staffed with 8 full-time and 2 part-time nuclear medicine technologists (NMTs). The NMTs performed approximately 600 diagnostic procedures monthly, and 8-10 iodine-131 (I-131 in capsules form) hyperthyroid and thyroid ablations annually. The diagnostic procedures included a variety of imaging and uptake procedures using technetium-99m (Tc-99m), primarily cardiac stress test, bone scan, HIDA, gastric emptying, lung scan using DTPA, and thyroid and hyperthyroid scans. The Community diagnostic center uses Flourine-18 (FDG) for PET/CT scans.

The radiation oncology department was staffed with three authorized medical physicists (AMPs), three dosimetrists, six therapists, and three oncologists. The licensee performed approximately 15 HDR gynecological cancer treatments, and 4 iodine-125 prostate permanent seeds implants, 2 radium-223 (Ra-223) Xofigo cases, 1-2 Zevalin treatments, and 20 Y-90 microspheres procedures annually. The licensee maintained an inventory of cesium-137 tube sources in secured storage; these sources had not be used for several years.

Performance Observations:

This inspection consisted of interviews with licensee personnel, a review of selected records, a tour of the nuclear medicine departments, radiation oncology, diagnostic center, and independent measurements. The inspector observed preparation and administration of Tc-99m to two patients. The inspector: (1) observed the NMT conduct a physical inventory of sealed sources, and all sources were accounted for; (2) had the NMT demonstrate the dose calibrator constancy check, package receiving and check-in procedures, end of the day daily and weekly area surveys, and proper handling of radioactive waste and disposal procedures. The inspector had the AMP demonstrate the HDR unit's: (1) security, (2) daily spot checks, (3) emergency equipment and procedures, (4) safety procedures and instructions, (5) door interlock system, and (6) radiation monitoring equipment checks. The inspector also reviewed selected HDR, I-131, Ra-223, Y-90 written directives and treatment plans. The inspector reviewed the following selected records: radiation safety committee minutes, quarterly program audits, DOT Hazmat training, linearity and accuracy of the dose calibrator, instrument calibration, package receipts, waste disposal records, and sealed source leak tests and inventory.
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(Continued)

The inspector reviewed dosimetry records for 2017 through December 31, 2018, indicating the maximum annual dose to be 1,006 mrem - DDE, and 4,973 mrem - SDE. The inspector conducted independent and confirmatory radiation surveys and found no residual contamination or exposures to members of the public in excess of regulatory limits.

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