

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED: Holland Community Hospital 602 Michigan Avenue Holland, MI 49423-4999 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) 030-13801	4. LICENSE NUMBER(S) 21-18502-01	5. DATE(S) OF INSPECTION July 25, 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:

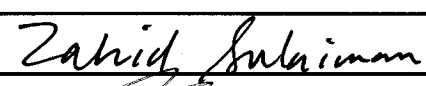
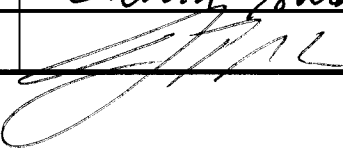
- 1. Based on the inspection findings, no violations were identified.
- 2. Previous violation(s) closed.
- 3. The violation(s), specifically described to you by the inspector as non-cited violations, are not being cited because they were self-identified, non-repetitive, and corrective action was or is 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		7/25/19
BRANCH CHIEF	Aaron T. McCraw, Chief, MIB		8/23/19

Docket File Information

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6. INSPECTION PROCEDURES USED 87131	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 Edward J. Mass, RSO	4. TELEPHONE NUMBER (616) 392-5141
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Main Office Inspection Next Inspection Date: 07/25/2021

Field Office Inspection 844 South Washington Ave, Holland, MI

Temporary Job Site Inspection _____

PROGRAM SCOPE

This was an unannounced, routine inspection of a 127-bed hospital authorized to use byproduct materials under 10 CFR Sections 35.100, 35.200, 35.300, and 35.1000 (temporary iodine-125 (I-125) seed implants to localize non-palpable lesions) at its facility in Holland, Michigan. The nuclear medicine department was staffed with three full-time nuclear medicine technologists (NMTs) and two PRNs. The NMTs typically administered approximately 200 diagnostic doses monthly and three iodine-131 (I-131) therapy doses annually. The diagnostic procedures using technetium-99m (Tc-99m) included a variety of imaging and uptake procedures. The South Washington Avenue location was staffed with three authorized users and five mammography technologists who performed approximately seven I-125 seed localization implants monthly.

PERFORMANCE OBSERVATIONS

The inspection consisted of interviews with select licensee personnel, a review of selected records, and a tour of the nuclear medicine department and I-125 seed implant facility. The inspector observed the preparation and administration of Tc-99m for diagnostic procedures on 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 package receipt surveys and wipes, dose calibrator constancy check, daily area surveys and weekly wipe tests, and proper handling of radioactive waste and disposal procedures. The inspector reviewed written directives for I-131 therapies and I-125 seed localization implants. Interviews with licensee personnel indicated adequate knowledge of radiation safety concepts and procedures.

The inspector reviewed the following selected records: RSC minutes, quarterly program audits, package receipts, waste disposal records, DOT Hazmat training, linearity and accuracy of the dose calibrator, instrument calibration, sealed source leak tests, daily area surveys, and weekly wipe tests. The inspector reviewed the dosimetry records for 2018 and through June 4, 2019 indicating the maximum annual dose to be 144 mrem - DDE; and 1,513 mrem - SDE. The inspector performed independent surveys and confirmatory radiation measurements which indicated results consistent with licensee survey records and postings.

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