



Materials Inspection Record

1. Licensee Name: Covenant Medical Center, Inc.		2. Docket Number(s): 030-02012		3. License Number(s) 21-01492-02	
4. Report Number(s): 2021-001			5. Date(s) of Inspection: October 28-29, 2021		
6. Inspector(s): Ryan Craffey		7. Program Code(s): 02230	8. Priority: 2	9. Inspection Guidance Used: IP 87131 and 87132	
10. Licensee Contact Name(s): Daniel Dryden - RSO Tracy King - Consultant		11. Licensee E-mail Address: daniel.dryden@chs-mi.com tking@mpcphysics.com		12. Licensee Telephone Number(s): 989-583-5250 N/A	
13. Inspection Type:		14. Locations Inspected:		15. Next Inspection Date (MM/DD/YYYY):	
<input type="checkbox"/> Initial <input checked="" type="checkbox"/> Routine <input checked="" type="checkbox"/> Announced <input type="checkbox"/> Non-Routine <input type="checkbox"/> Unannounced		<input checked="" type="checkbox"/> Main Office <input checked="" type="checkbox"/> Field Office <input type="checkbox"/> Temporary Job Site <input type="checkbox"/> Remote		10/28/2023 <input checked="" type="checkbox"/> Normal <input type="checkbox"/> Extended <input type="checkbox"/> Reduced <input type="checkbox"/> No change	

16. Scope and Observations:

This was an announced routine inspection of a community hospital authorized to use byproduct material for diagnostic and therapeutic medical purposes at its main campus in Saginaw, Michigan, and at two additional satellite facilities in Saginaw. At the main campus, the licensee performed diagnostic administrations daily at one of three nuclear medicine departments: the main department and a cardiovascular department at 700 Cooper, as well as an affiliated cardiology practice at 900 Cooper. The licensee also performed therapeutic administrations of I-131 NaI capsules and Y-90 microspheres at the main campus. It had not performed any manual brachytherapy procedures since the last inspection, but was planning to begin doing so again in the near future using Cs-131 GammaTiles for brain cancer treatments. At the satellite facility on Mackinaw Road, the licensee performed occasional HDR treatments for gynecological and skin cancers, and occasional diagnostic administrations for sentinel node studies at a nuclear medicine department that was staffed only during these procedures. The licensee recently closed out and requested removal of the satellite facility on Berl Drive. The licensee maintained an RSC that met quarterly, and retained the services of a medical physics consultant.

The inspector toured the licensee's main campus and satellite facility on Mackinaw Road. All areas were adequately posted, and all licensed material was adequately secured. Readings from independent surveys in restricted and unrestricted areas of these facilities were within regulatory limits. The inspector observed several diagnostic administrations of Tc-99m at each nuclear medicine department, demonstrations of area surveys and response to minor contamination identified by one of these surveys, receipt of packages containing licensed material, and demonstrations of HDR daily spot checks. The inspector interviewed several nuclear medicine technologists, two medical physicists and members of licensee management. All were knowledgeable of radiation protection principles, licensee procedures, and regulatory requirements, and utilized appropriate ALARA practices, personnel dosimetry, and calibrated radiation detection instrumentation throughout.

The inspector also reviewed a selection of records, including RSC meeting minutes, quarterly consultant audits, personnel dosimetry results, routine nuclear medicine records, HDR source exchange, full calibration, and annual training documentation, as well as a selection of written directives, planning and verification documentation and release calculations (when necessary) for I-131 NaI capsule, Y-90 microsphere, and HDR treatments.

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