



Materials Inspection Record

1. Licensee Name: Bronson Battle Creek Hospital		2. Docket Number(s): 030-13899		3. License Number(s) 21-01354-04	
4. Report Number(s): 2022001			5. Date(s) of Inspection: January 12, 2022		
6. Inspector(s): Geoffrey Warren		7. Program Code(s): 02230	8. Priority: 2	9. Inspection Guidance Used: 87131, 87132	
10. Licensee Contact Name(s): Robert Sieffert, M.S.		11. Licensee E-mail Address: siefferr@bronsonhg.org		12. Licensee Telephone Number(s): 269-245-8146	
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 type="checkbox"/> Field Office <input type="checkbox"/> Temporary Job Site <input type="checkbox"/> Remote		01/12/2024 <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. The licensee was a 180-bed medical facility located in Battle Creek, Michigan, with authorization to perform diagnostic and therapeutic nuclear medicine procedures as well as brachytherapy and HDR procedures.

The nuclear medicine department was staffed with three full-time technologists. The nuclear medicine staff typically administered 250 diagnostic doses monthly and routine iodine-131 therapy doses (limited to whole-body scans) with the iodine in capsule form. The diagnostic procedures included a wide variety of imaging procedures; lung imaging was limited to perfusion studies at the time of the inspection. The department received daily unit doses and bulk technetium-99m from a licensed nuclear pharmacy. All waste was either held for decay-in-storage (DIS) or returned to the radiopharmacy. A separate licensee provides mobile PET diagnostic services at the hospital.

The radiation oncology department was staffed with two physician authorized users, three medical physicists, and three therapists who performed therapy procedures using a high dose rate (HDR) remote afterloader. The radiation therapy staff treated 8-10 HDR patients annually, with 3-5 fractions per patient, limited to GYN cylinder procedures. Radiation therapy staff had also performed four permanent implant brachytherapy procedures since the last inspection, and performed iodine-131 and radium-223 radiopharmaceutical therapy procedures.

Performance Observations: During the inspection, the licensee's staff demonstrated survey meter and well counter QC, dose calibrator constancy checks, HDR daily checks, package receipt and return surveys, dose preparation and administration, and daily and weekly contamination surveys; and described waste handling and disposal, kit preparation, a variety of diagnostic and therapeutic administration procedures, HDR source exchange, and other procedures. The inspector reviewed written directives for radiopharmaceutical therapies, HDR treatments, and brachytherapy procedures, and identified no concerns. Interviews with licensee personnel indicated adequate knowledge of radiation safety concepts and procedures. Review of radiation dosimetry records indicated no exposures of concern. Review of Radiation Safety Committee minutes indicated good attendance and discussion of appropriate topics. The inspector performed independent and confirmatory radiation measurements that were consistent with licensee survey records and postings.

No violations were identified as a result of this inspection.