



Materials Inspection Report

1. Licensee/Location Inspected: The Community Hospital 901 MacArthur Blvd. Munster, IN 46321 Report Number(s) 2022001	2. NRC/Regional Office Region III U. S. Nuclear Regulatory Commission 2443 Warrenville Road, Suite 210 Lisle, IL 60532-4352
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3. Docket Number(s) 030-09964	4. License Number(s) 13-15882-01	5. Date(s) of Inspection March 21, 2022
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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. During this inspection, certain of your activities, as described below and/or attached, were in violation of NRC requirements, and were assessed at Severity Level IV, in accordance with the NRC Enforcement Policy.
 - A. 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, corrective action was or is being taken, and the remaining criteria in the NRC Enforcement Policy were satisfied.
 (Non-cited violation(s) was/were discussed involving the following requirement(s))

 - B. The following violation(s) is/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 AND DATE
LICENSEE'S REPRESENTATIVE		
NRC INSPECTOR	Jason Draper, Health Physicist	Jason D. Draper <small>Digitally signed by Jason D. Draper Date: 2022.04.11 10:17:33 -05'00'</small>
BRANCH CHIEF		Michael A. Kunowski <small>Digitally signed by Michael A. Kunowski Date: 2022.04.13 14:21:24 -05'00'</small>



Materials Inspection Record

1. Licensee Name: The Community Hospital		2. Docket Number(s): 030-09964		3. License Number(s) 13-15882-01	
4. Report Number(s): 2022001			5. Date(s) of Inspection: March 21, 2022		
6. Inspector(s): Jason Draper		7. Program Code(s): 02230	8. Priority: 2	9. Inspection Guidance Used: IPs 87132 and 87131	
10. Licensee Contact Name(s): Santosh Kar, M.S., RSO		11. Licensee E-mail Address: Santosh.K.Kar@comhs.org		12. Licensee Telephone Number(s): (219) 836-4479	
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		03/21/2024 <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 of a large community hospital authorized to use licensed material permitted by 10 CFR 35.100, 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 activities at four locations. Collectively, the nuclear medicine departments were staffed with ten nuclear medicine technologists (NMTs) who performed approximately 15 diagnostic procedures daily including primarily cardiac stress tests as well as bone scans, HIDA's, gastric emptying studies, lung scans, and thyroid scans. The NMTs also administered approximately 3-5 iodine-131 capsules per year for hypertyroid treatment and thyroid ablations. At the licensee's Donald S. Powers Drive location, the licensee used fluorine-18 FDG for approximately 5-7 PET/CT scans daily.

In the radiation oncology department, the licensee performed approximately 15-20 HDR treatments, 10 iodine-125 prostate seed implants, 3-4 radium-223 Xofigo treatments, and 10-15 Y-90 SIR-Spheres treatments per year. The licensee also maintained in secured storage an inventory of cesium-137 tube sources that had not been used in many years.

The inspector toured the licensee's facilities at 901 MacArthur Blvd, 801 MacArthur Blvd, and 10020 Donald S. Powers Dr in Munster to evaluate the licensee's measures for materials security, hazard communication, and exposure control. The inspector conducted independent surveys of unrestricted areas, and found no residual contamination that could result in exposures to members of the public in excess of regulatory limits. In the licensee's nuclear medicine departments, the inspector observed the administration of a Tc-99m stress dosage, a Tc-99m thyroid scan dosage, and a F-18 PET scan dosage. The inspector also observed a variety of activities including dosage preparation and waste handling. The licensee's staff demonstrated the implementation of procedures for instrument checks and calibrations, area surveys, and package check-in procedures. In the radiation oncology department, the inspector observed the preparation and administration of a Y-90 microspheres treatment, but was unable to observe licensee demonstrations associated with the HDR as the treatment room was being used for non-HDR treatment.

In addition to observations and demonstrations, the inspector reviewed a selection of records including written directives, treatment plans, records of HDR daily spot checks, equipment calibrations and checks, area and contamination surveys, dosimetry, and periodic radiation safety program reviews.

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