

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED: Holland Community Hospital 602 Michigan Avenue Holland, MI 49423-4999 REPORT NUMBER(S) 2022001	2. NRC/REGIONAL OFFICE Region III U. S. Nuclear Regulatory Commission 2443 Warrenville Road, Suite 210 Lisle, IL 60532-4352
--	---

3. DOCKET NUMBER(S) 030-13801	4. LICENSE NUMBER(S) 21-18502-01	5. DATE(S) OF INSPECTION July 8, 2022
--------------------------------------	---	--

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	Zahid M. Sulaiman <small>Digitally signed by Zahid M. Sulaiman Date: 2022.07.29 13:46:19 -05'00'</small>	
BRANCH CHIEF	Michael Kunowski, Chief, MIB	Michael A. Kunowski <small>Digitally signed by Michael A. Kunowski Date: 2022.08.02 06:20:06 -05'00'</small>	



Materials Inspection Record

1. Licensee Name: Holland Community Hospital		2. Docket Number(s): 030-13801		3. License Number(s) 21-18502-01	
4. Report Number(s): 2022001			5. Date(s) of Inspection: July 8, 2022		
6. Inspector(s): Zahid Sulaiman, Health Physicist		7. Program Code(s): 02240	8. Priority: 2	9. Inspection Guidance Used: 87131 & 87132	
10. Licensee Contact Name(s): Edward J. Mass, RSO Steve Sorenson, Dir of Diagnostic Service		11. Licensee E-mail Address: Edmaas@charter.net Stevs@hollandhospital.org		12. Licensee Telephone Number(s): Work: (616) 363-7272 Cell: (616) 283-1068 Work: (616) 355-3811	
13. Inspection Type: <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Announced <input type="checkbox"/> Non-Routine <input checked="" type="checkbox"/> Unannounced		14. Locations Inspected: <input checked="" type="checkbox"/> Main Office <input checked="" type="checkbox"/> Field Office <input type="checkbox"/> Temporary Job Site <input type="checkbox"/> Remote		15. Next Inspection Date (MM/DD/YYYY): 07/08/2024 <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 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 one part-time and two full-time nuclear medicine technologists (NMTs) and a PRN (a nurse who assists with nuclear medicine). The NMTs typically administered approximately 200 diagnostic doses using technetium-99m (Tc-99m) monthly and three iodine-131 (I-131) hyperthyroid and thyroid ablation doses annually. The diagnostic procedures included a variety of imaging and uptake procedures.

The Breast Center at South Washington Avenue, Holland, Michigan was staffed with three authorized users and five mammography technologists who performed approximately seven I-125 seed localization implants monthly. The licensee will submit an amendment request to add an oncologist as authorized user who had performed several I-125 seed localization implants under the supervision of an AU since August 5, 2021.

PERFORMANCE OBSERVATIONS

The inspection consisted of interviews with select licensee personnel, a review of selected records, and a tour of the hospital, nuclear medicine department, and breast center 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. At the breast center, the inspector had the technologist discuss the seed implantation and removal procedures, seed inventory log, and seed storage and disposal records. Through these observations, demonstrations and other discussions, the inspector found that the licensee personnel was knowledgeable of radiation protection principles, licensee procedures, and regulatory requirements.

The inspector reviewed the following selected records: radiation safety committee minutes, quarterly program audits, written directives, 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 2020 and through May 31, 2022 indicating the maximum annual dose to be 83 mrem - DDE; and 1,390 mrem - SDE. The inspector performed independent surveys and confirmatory radiation measurements which indicated results consistent with licensee survey records and postings.

Materials Inspection Record (Continued)

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