NRC FORM 591M
(04-2022)

U.S. NUCLEAR REGULATORY COMMISSION

Materials Inspection Report

1. Licensee/Location Inspected:	2. NRC/Regional Office
Unity Healthcare, LLC 3801 Amelia Ave., Suite A Lafayette, Indiana 47905 Report Number(s) 2022001	Region III U. S. Nuclear Regulatory Commission 2443 Warrenville Road, Suite 210 Lisle, IL 60532-4352

3. Docket Number(s)	4. License Number(s)	5. Date(s) of Inspection
03035552	13-32273-01	12/08/2022

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. 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	John Fiederlein, M.D., RSO	
NRC INSPECTOR	Elizabeth Tindle-Engelmann	Elizabeth D. Tindle-Engelmann Digitally signed by Elizabeth D. Tindle-Engelmann Date: 2022.12.09 07:23:57 -06'00'
BRANCH CHIEF	Rhex Edwards	Digitally signed by Rhex A. Edwards Date: 2022.12.21 13:15:09 -06'00'

Add Continuation Page

NRC FORM 592M
(10-04-2022)

U.S. NUCLEAR REGULATORY COMMISSION

Materials Inspection Record

1. Licensee Name:	2. Docket Number(s):	3. License Number(s)
Unity Healthcare, LLC	03035552	13-32273-01

4. Report Number(s):	5. Date(s) of Inspection:
2022001	12/08/2022

6. Inspector(s):	7. Program Code(s):	8. Priority:	9. Inspection Guidance Used:
Elizabeth Tindle-Engelmann	02200	3	87130

10. Licensee Contact Name(s):	11. Licensee E-mail Address:	12. Licensee Telephone Number(s):
John Fiederlein, M.D., RSO Abigail Neblett	jfiederlein@unityhc.com aneblett@unityhc.com	765-447-7447 ext 13038

13. Inspection Type:	14. Locations Inspected:	15. Next Inspection Date (MM/DD/YYYY):
☐ Initial	☐ Hybrid	
☑ Routine ☑ Announced	☑ Main Office ☐ Field Office	12/08/2025 ☑ Normal ☐ Extended
☐ Non-Routine ☐ Unannounced	☐ Temporary Job Site ☐ Remote	☐ Reduced ☐ No change

16. Location(s) Inspected List:

3801 Amelia Ave., Lafayette, Indiana 47905

17. Scope and Observations:

The licensee was a medical facility with authorization for diagnostic and therapeutic uses of byproduct material pursuant to 10 CFR 35.100-300. The licensee's radiation safety officer (RSO) was an authorized user who was onsite monthly and available by phone as needed. The licensee utilized an external consultant to perform program reviews and equipment calibrations. The licensee had one full-time nuclear medicine technologist. The licensee's staff administered approximately 3 SPECT doses per day, 2 PET doses per day, and less than 5 doses of unsealed byproduct material requiring a written directive per year. The department received unit doses of primarily technetium-99m and fluorine-18 from a licensed radiopharmacy; other radionuclides were used less frequently. The PET department was staffed with one full-time nuclear medicine technologist.

The inspector observed dose calibrator quality control, dose preparation and administration, and waste handling. The licensee's staff demonstrated ambient radiation level surveys, decay in storage procedures, package receipt, package return, and spill response. Interviews with licensee personnel indicated adequate knowledge of radiation safety and security concepts and procedures. The inspector reviewed the following records: area surveys, dose calibrator calibrations, dosimetry, package receipt, package return, program reviews, sealed source leak tests, select policies and procedures, training, waste logs, and written directives.

The inspector performed independent and confirmatory radiation measurements using a RadEye G (serial number: 30652, calibration expiration: 07/14/2023). Results were consistent with the licensee's survey records and postings.

No violations were identified as a result of this inspection.

Signature and Date - Branch Chief

Digitally signed by Rhex A. Edwards
Date: 2022.12.21 13:14:44 -06'00'