



## Materials Inspection Report

<b>1. Licensee/Location Inspected:</b>  VHS Sinai-Grace Hospital, Inc. 6071 West Outer Drive Detroit, MI 48235  Report Number(s) 2024-001	<b>2. NRC/Regional Office</b>  Region III U. S. Nuclear Regulatory Commission 2056 Westings Avenue, Suite 400 Naperville, IL 60563-2657
---	--

<b>3. Docket Number(s)</b> 030-01992	<b>4. License Number(s)</b> 21-00299-04	<b>5. Date(s) of Inspection</b> 12/20/24, exit 01/06/25
---	--	--

**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	Ryan Craffey	 <small>Digitally signed by RYAN CRAFFEY Date: 2025.01.27 10:03:30 -06'00'</small>
BRANCH CHIEF	Rhex Edwards	 <small>Digitally signed by RHEX EDWARDS Date: 2025.01.28 15:24:11 -06'00'</small>



## Materials Inspection Record

<b>1. Licensee Name:</b> VHS Sinai-Grace Hospital, Inc.		<b>2. Docket Number(s):</b> 030-01992		<b>3. License Number(s)</b> 21-00299-04	
<b>4. Report Number(s):</b> 2024-001			<b>5. Date(s) of Inspection:</b> December 20, 2024; exit January 6, 2025		
<b>6. Inspector(s):</b> Ryan Craffey		<b>7. Program Code(s):</b> 02240	<b>8. Priority:</b> 2	<b>9. Inspection Guidance Used:</b> IP 87130, IP 87132	
<b>10. Licensee Contact Name(s):</b> Joel Rogers - RSO Andrew Gardner - Director of Imaging Services		<b>11. Licensee E-mail Address:</b> jrogers@landauermp.com agardner4@dmc.org		<b>12. Licensee Telephone Number(s):</b> 313-573-0490 313-966-6811	
<b>13. Inspection Type:</b> <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Announced <input type="checkbox"/> Non-Routine <input checked="" type="checkbox"/> Unannounced	<b>14. Locations Inspected:</b> <input type="checkbox"/> Hybrid <input checked="" type="checkbox"/> Main Office <input type="checkbox"/> Temporary Job Site <input type="checkbox"/> Remote	<b>15. Next Inspection Date (MM/DD/YYYY):</b> 12/20/2026		<input checked="" type="checkbox"/> Normal <input type="checkbox"/> Extended <input type="checkbox"/> Reduced <input type="checkbox"/> No change	
<b>16. Location(s) Inspected List:</b>  6071 West Outer Drive, Detroit, MI					
<b>17. Scope and Observations:</b> <p>VHS (d/b/a DMC) Sinai-Grace Hospital is a 260-bed community academic hospital in Detroit, Michigan, authorized to use byproduct material for diagnostic and therapeutic medical purposes, and to possess source material in the form of DU shielding. At the time of the inspection, the licensee had two full-time NMTs, who performed diagnostic administrations of radiopharmaceuticals daily, and occasional therapeutic administrations of I-131 capsules. The licensee had treated one patient with three doses of Y-90 microspheres since the last inspection. The licensee still possessed a small quantity of DU shielding in secure storage, pending disposal. The licensee retained the services of a medical physics consultant to serve as RSO and to audit the program quarterly.</p> <p>The inspector toured the hospital in Detroit. All areas were adequately posted and all licensed material was adequately secured. The inspector performed independent surveys of the area and found no evidence of residual contamination or exposures to members of the public in excess of regulatory limits. The inspector observed the preparation and administration of radiopharmaceuticals for a bone scan, as well as radiation detection instrument checks, receipt of packages containing byproduct material, and area surveys. All instrumentation functioned as intended and had been calibrated/evaluated as required. The NMTs were knowledgeable of radiation protection principles and regulatory requirements, wore personnel dosimetry as assigned, and implemented available ALARA measures, which were adequate for the hazards present.</p> <p>The inspector also reviewed the licensee's procedures and equipment for Y-90 microsphere administrations, as well as documentation of all microsphere treatments and I-131 therapies performed since the last inspection. The licensee's procedures and documentation provided high confidence that these treatments had been performed in accordance with written directives. The inspector also reviewed a selection of additional records, including RSO audits, instrument calibration/evaluation documentation, sealed source inventories, leak tests, and transfer documentation, approved radiopharmaceutical dosing instructions and administration records, and personnel dosimetry reports, which indicated that occupational exposures from activities conducted under this license were well below regulatory limits.</p>					


### Materials Inspection Record (Continued)

The licensee was cited in 2021 for permitting an individual to function as a temporary RSO without notifying the NRC within 30 days of doing so. The inspector evaluated the licensee's corrective actions, and confirmed that the contract RSO appointed as corrective action continued to serve in the role, and was aware of applicable notification requirements. The licensee's management continued to monitor the status of the RSO position and knew to notify the RSC of any changes in status to applicable consulting contract, including notification at least 90 days prior to the end of any such contract. The inspector concluded that the licensee's corrective actions were effective at addressing the potential for recurrence of a similar issue. Therefore, this violation is closed.

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

Signature and Date - Branch Chief



 Digitally signed by RHEX EDWARDS  
Date: 2025.01.28 15:23:41 -06'00'