



## Materials Inspection Report

## 1. Licensee/Location Inspected:

Parkview Health

11050 Parkview Cir.  
Fort Wayne, IN 46845

Report Number(s) 2025001

## 2. NRC/Regional Office

Region III

U. S. Nuclear Regulatory Commission  
2056 Westings Avenue, Suite 400  
Naperville, IL 60563-2657

## 3. Docket Number(s)

030-01593

## 4. License Number(s)

13-01284-02

## 5. Date(s) of Inspection

June 24-25, 2025

## 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	Zahid Sulaiman, Health Physicist	ZAHID SULAIMAN <small>Digitally signed by ZAHID SULAIMAN Date: 2025.07.07 16:18:00 -05'00'</small>
BRANCH CHIEF	Rhex A. Edwards, Chief, MIB	 <small>Digitally signed by RHEX EDWARDS Date: 2025.07.11 09:58:36 -05'00'</small>



## Materials Inspection Record

1. Licensee Name: Parkview Health		2. Docket Number(s): 030-01593		3. License Number(s) 13-01284-02	
4. Report Number(s): 2025001			5. Date(s) of Inspection: June 24-25, 2025		
6. Inspector(s): Zahid Sulaiman, Health Physicist		7. Program Code(s): 04822		8. Priority: 2	9. Inspection Guidance Used: 87130, 87132
10. Licensee Contact Name(s): Sharron Updike, RSO Stasha Burkholder, Dir of Rad Courtney Clark, Mgr of Rad		11. Licensee E-mail Address: supdike@mpcphysics.com nistjatsha.burkholder@parkview.com courtney.clark2@parkview.com		12. Licensee Telephone Number(s): 517-795-8786 260-373-4727 260-266-4759	
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 type="checkbox"/> Hybrid <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): 06/24/2027 <input checked="" type="checkbox"/> Normal <input type="checkbox"/> Extended <input type="checkbox"/> Reduced <input type="checkbox"/> No change	
16. Location(s) Inspected List: Main Hospital: 11109 Parkview Plaza Dr, Ft Wayne, IN Cancer Center: 11050 Parkview Circle, Ft Wayne, IN OSC: 11141 Parkview Plaza, Ft Wayne, IN PET Clinic: 3707 New Vision Dr, Ft Wayne, IN Heart Institute: 11108 Parkview Cir, Ft Wayne, IN Parkview Wabash: 10 John Kissinger Dr, Wabash, IN					
17. Scope and Observations: This was an unannounced, routine inspection of a large medical institution authorized under its NRC license to use unsealed byproduct material for diagnostic and therapeutic procedures in accordance with 10 CFR 35.100, 200, 300, 400, 600 (Iridium-192 HDR remote afterloader), and 1000 (Yttrium-90, SIR-Sphere microspheres). The licensee had a main hospital and 12 authorized field offices across northeastern Indiana. The nuclear medicine department at the main hospital was staffed with six full-time nuclear medicine technologists (NMTs) who rotate between nuclear medicine department, OSC, and Parkview Randallia. The NMTs performed around 350-400 diagnostic imaging procedures monthly. In addition, the NMTs performed approximately 10-12 iodine-131 (hyperthyroid and thyroid ablation) therapy procedures per month, 8-9 lutetium-177 (Pluvicto) therapy procedures per month, 2-3 radium-223 (Xofigo) therapy procedures per year, and 12-15 Y-90 microspheres brachytherapy procedures per year. The licensee has not performed any manual brachytherapy implants since 2017. The licensee disposed all 32 cesium-137 brachytherapy sources through an authorized vendor on 2/14/2024, and the inspector verified that no Cs-137 remained in the storage vault located in the basement of the main hospital. The licensee retained a medical physicist consultant who also serves as the RSO and performs quarterly audits of radiation safety program across all licensee's facilities.  The PET Clinic was staffed with five full-time NMTs who performed approximately 18 diagnostic procedures daily using F-18 FDGs and Ga-68.  The Heart Institute was staffed with five full-time NMTs who performed approximately 15-16 cardiac stress test daily.  The Cancer center was staffed with four oncologists, three authorized medical physicists (AMPs), and three dosimetrists who performed approximately 23 HDR procedures per quarter primarily GYN treatments (cylinder, tandem and ovoid, and some Syed).  At the Parkview Wabash Hospital, the nuclear medicine department was staffed with one full-time NMT who					

### Materials Inspection Record (Continued)

performed approximately 10-12 diagnostic procedures weekly, mostly hearts, bones, HIDA, Gastric emptying and occasional thyroid uptake and scan. The NMT works on Monday-Wednesday and Fridays from 7:00 AM - 4:30 PM.

#### PERFORMANCE OBSERVATIONS

This inspection consisted of a tour of eight authorized locations, interviews with select licensee personnel, a review of select records; observation of materials security and handling, and independent measurements. The inspector observed three diagnostic administrations of licensed materials including dose preparation and disposal. The inspector verified the location of sealed sources against the licensee's most recent inventory, and all sources were accounted for. The inspector had the NMT demonstrate the dose calibrator constancy check, package receipt procedures, daily area surveys and weekly wipes test, proper handling of radioactive waste and disposal procedures, and spill response with no issue noted. The inspector had the NMT describe and demonstrate the Y-90 dose preparation, pre- and post-vial dose measurement, and dose calculation to the treatment sites. The inspector reviewed selected written directives and treatment plans for various radiation therapy procedures.

At the cancer center, the AMP demonstrate the HDR unit's: (1) security, (2) daily spot checks, (3) emergency equipment and procedures, (4) safety procedures and instructions, (5) door interlock system, (6) radiation monitoring equipment checks, and (7) full calibration measurements.

Through these demonstrations, observations, and discussions, the inspector found that the licensee personnel were knowledgeable of radiation protection principles, licensee procedures, and regulatory requirements.

The inspector reviewed selected HDR, I-131, Y-90, Ra-223, and Lu-177 therapies written directives and treatment plans. The inspector also reviewed the following records: quarterly program audits, radiation safety committee minutes, written directives, package receipts, waste disposal records, DOT Hazmat training, linearity and accuracy of the dose calibrator, instrument calibration, spill report, sealed source leak tests and inventory, daily area surveys, weekly wipe tests, and dosimetry records. The inspectors performed independent and confirmatory radiation measurements which indicated results consistent with licensee survey records and postings.

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

Signature and Date - Branch Chief



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Date: 2025.07.11 09:58:11 -05'00'