

**SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION**

1. LICENSEE/LOCATION INSPECTED: <i>St. Elizabeth Regional Health 2400 South St. Lafayette, IN</i>		2. NRC/REGIONAL OFFICE U.S. Nuclear Regulatory Commission Region III 2443 Warrenville Road Suite 210 Lisle, Illinois 60532-4351	
3. DOCKET NUMBER(S) <i>030-01642</i>		4. LICENSEE NUMBER(S) <i>13-09788-01</i>	
		5. DATE(S) OF INSPECTION <i>5/16/08</i>	

**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, NUREG-1600, to exercise discretion, were satisfied.

Non-Cited Violation(s) was/were discussed involving the following requirement(s) and Corrective Action(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. This form is a NOTICE OF VIOLATION, which may be subject to posting in accordance with 10 CFR 19.11.  
(Violations and Corrective Actions)



Licensee's Statement of Corrective Actions for Item 4, above.

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		<i>Ken Lambert</i>		<i>Ken Lambert</i>		<i>5/16/08</i>	

**SAFETY INSPECTION REPORT  
AND COMPLIANCE INSPECTION**

1. LICENSEE St. Elizabeth Regional Health REPORT NUMBER(S) 08-01		2. NRC/REGIONAL OFFICE Region III 2443 Warrenville Road, Suite 210 Lisle, IL 60532	
3. DOCKET NUMBER(S) 030-01642	4. LICENSE NUMBER(S) 13-09788-01	5. DATE(S) OF INSPECTION ay 16, 2008	
6. INSPECTION PROCEDURES USED 087131, 087132		7. INSPECTION FOCUS AREAS 03.01 – 03.07	

**SUPPLEMENTAL INSPECTION INFORMATION**

1. PROGRAM CODE(S) 2120	2. PRIORITY 3	3. LICENSEE CONTACT Paul E. Gandy, M.D., RSO	4. TELEPHONE NUMBER 765-297-7700
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<input checked="" type="checkbox"/>	Main Office Inspection	Next Inspection Date: <u>May 2011</u>
<input checked="" type="checkbox"/>	Field Office	<u>St. Elizabeth Medical Center, 1501 Hartford St, Lafayette, IN</u>
<input type="checkbox"/>	Temporary Job Site Inspection	

**PROGRAM SCOPE**

This licensee is authorized to possess and use licensed materials at two locations: Lafayette Home Hospital and St. Elizabeth Medical Center. The licensee is authorized to possess byproduct material for 35.100, 200, 300, 400 and 500 uses. Nuclear medicine procedures are performed by 4 fulltime technologists who rotate through both locations of use. Nuclear Medicine procedures are primarily cardiac studies, and bone and lung scans. The facilities perform approximately 20 studies per day. The licensee receives unit doses and bulk Tc-99m. Approximately 12 Iodine-131 scans per year are performed at Lafayette Home Hospital only. The hospital does not currently perform I-131 ablations. I-131 is obtained from a nuclear pharmacy as unit doses. The licensee performed two I-125 seed prostrate implants since the last inspection. Unused seeds were returned to the manufacturer. The licensee has not used licensed material authorized under 35.500 since the last inspection.

**Performance Observations**

Interviews conducted with available staff revealed an adequate level of understanding of emergency and material handling procedures and techniques. Dose calibrator constancy checks, area surveys, package check-in procedures and injection techniques were successfully demonstrated or observed. The inspector reviewed the patient chart for the I-125 seed implants and noted the licensee used a written directive as required and properly received the I-125 seed package and properly prepared the package for returning the unused seeds to the manufacturer.

The hot-lab room was observed locked upon arrival at each location of use. Licensed material was not readily accessible to members of the general public. The inspector conducted a partial inventory of sealed sources and verified possession by the licensee.

Proper personal dosimetry was observed worn by available staff during the inspection. Personal dosimetry records reviewed for 2006 indicated maximum doses of 329 mrem whole body and 1630 mrem extremity. Personal dosimetry records reviewed for 2007 indicated maximum doses of 420 mrem whole body and 2480 mrem extremity. Dosimetry records for 2008, to date indicated 111 mrem whole body and 3180 extremity.

No violations were identified.