

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

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| <p>1. LICENSEE/LOCATION INSPECTED:</p> <p>Franciscan St. Francis Health 8111 South Emerson Avenue Indianapolis, IN 46237</p> <p>REPORT NUMBER(S) 14-001</p> | <p>2. NRC/REGIONAL OFFICE</p> <p>Region III U. S. Nuclear Regulatory Commission 2443 Warrenville Road, Suite 210 Lisle, IL 60532-4352</p> | |
| <p>3. DOCKET NUMBER(S)</p> <p>030-09398</p> | <p>4. LICENSE NUMBER(S)</p> <p>13-02128-03</p> | <p>5. DATE(S) OF INSPECTION</p> <p>October 23, 2014</p> |

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:

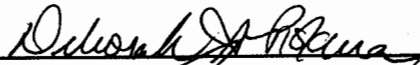
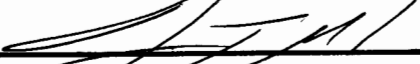
- 1. Based on the inspection findings, no violations were identified.
- 2. Previous violation(s) closed.
- 3. The violation(s), specifically described to you by the inspector as non-cited violations, are not being cited because they were self-identified, non-repetitive, and corrective action was or is 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 | Deborah A. Piskura, Health Physicist |  | 10/23/14 |
| BRANCH CHIEF | Aaron T. McCraw, Chief, MIB |  | 10/29/14 |

Docket File Information
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| 6. INSPECTION PROCEDURES USED 87130, 87131, & 87132 | 7. INSPECTION FOCUS AREAS 03.01- 03.07 |
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SUPPLEMENTAL INSPECTION INFORMATION

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|---------------------------------|----------------------|---|---|
| 1. PROGRAM CODE(S) 02240 | 2. PRIORITY 2 | 3. LICENSEE CONTACT Berry Stewart, M.S., RSO | 4. TELEPHONE NUMBER (317) 865-5649 |
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Main Office Inspection Next Inspection Date: 10/23/2016

Field Office Inspection 5255 E. Stop 11 Road, Indpls, IN

Temporary Job Site Inspection _____

PROGRAM SCOPE

This was a routine inspection of a medical institution (450+ beds) authorized to use licensed material permitted by Sections 35.100, 35.200, 35.300, 35.400 limited to Sr-90 in an eye applicator, 35.500, Y-90 microspheres in the SIRspheres system, and Ir-192 in an HDR unit. The licensee operated four areas of use for its nuclear medicine activities. Collectively, the nuclear medicine department was staffed with five full-time technologists, 2 PRNs, and one part-time technologist who performed approximately 250-300 diagnostic procedures monthly. The licensee received unit doses and bulk Tc-99m for kit preparation; the department administered a full spectrum of diagnostic studies. The department administered numerous I-131 dosages (capsules only) for whole body follow up studies, hyperthyroid, and CA treatments. The department also administered 5-6 Ra-223 Xofigo and 5-7 Y-90 microsphere treatments annually. All patients were released in accordance with Section 35.75. The hospital retained a consultant who audited the radiation safety program on a quarterly basis.

The radiation oncology department was staffed with five radiation therapists, two AMPs, one dosimetrist, and three authorized physician users. The licensee used its HDR unit to administer approximately 40-50 patient treatments per year; these treatments were limited to gynecological and lung cancers. All HDR patient treatments were administered by the attending radiation oncologist and the authorized medical physicist; the radiation therapist operated the controls to the HDR unit.

This inspection consisted of interviews with licensee personnel, a review of select records, tours of the nuclear medicine and radiation oncology departments, and independent measurements. The inspector observed licensee nuclear medicine personnel prepare, assay and administer one unit dose for a PET imaging procedure. The inspection included observations of dose calibrator and HDR QA and safety checks, security of byproduct material, use of personnel monitoring, package receipt surveys, and inventories of sources in storage.

No violations of NRC requirements were identified during this inspection.