

## INSPECTION RECORD

Region III Inspection Report No. 030-13959 License No. 24-18625-01  
Docket No. 030-13959

**Licensee (Name and Address):**

Midwest Division - RMC, LLC  
d/b/a Research Medical Center  
2316 East Meyer Blvd.  
Kansas City, Missouri 64132

**Location (Authorized Site) Being Inspected:** 2316 East Meyer Blvd.

**Licensee Contact:** Dr. Steven Slack - RSO **Telephone No.** 816-276-4449

**Priority:** 2 **Program Code:** 2240

**Date of Last Inspection:** 4/26-27/2005 **Date of This Inspection:** 4/26-27/2007

**Type of Inspection:**      ☐ Initial      ☐ Announced      ☒ Unannounced  
                                 ☒ Routine      ☐ Special  
                                 ☒ Normal      ☐ Reduced

**Next Inspection Date:** 4/2009


**Justification for reducing the routine inspection interval:**  
NA

**Summary of Findings and Actions:**

- ☐ No violations cited, clear U.S. Nuclear Regulatory Commission (NRC) Form 591 or regional letter issued
- ☐ Non-cited violations (NCVs)
- ☐ Violation(s), Form 591 issued
- ☒ Violation(s), regional letter issued
- ☐ Followup on previous violations

Inspector(s) Michael LaFranzo, Materials Inspector

Date 5/3/07

  
\_\_\_\_\_  
(Signature(s))

Approved Robert Gattone, Acting Chief, MIB

Date 5/14/2007

\_\_\_\_\_  
(Signature)

## **PART I-LICENSE, INSPECTION, INCIDENT/EVENT, AND ENFORCEMENT HISTORY**

### **1. AMENDMENTS AND PROGRAM CHANGES:**

<u>AMENDMENT #</u>	<u>DATE</u>	<u>SUBJECT</u>
41	2/2/2007	Authorized user addition
40	10/10/2006	RAM Possession limits
39	9/28/2006	Medical Physicist addition/RAM Possession limits
38	8/01/2006	Authorized User addition
37	6/12/2006	Authorized User addition
36	12/27/2005	Change in Authorized Users/RAM Possession limits
35	10/10/2005	Authorized User addition
34	8/15/2005	Removal of License Condition

### **2. INSPECTION AND ENFORCEMENT HISTORY:**

No violations were identified during the last inspection. No Confirmatory Action letters or Orders were issued to the licensee since the last inspection (2005).

### **3. INCIDENT/EVENT HISTORY:**

None

## **PART II - INSPECTION DOCUMENTATION**

### **1. ORGANIZATION AND SCOPE OF PROGRAM:**

The Radiation Safety Officer reports to the Gamma Knife Coordinator whom reports to the Chief Operating Officer. The licensee performed the following activities:

- Approximately 2-3 Low Dose Rate Cs-137 Temporary Implant brachytherapy administrations per month;
- Approximately 2-3 I-125 Temporary Implants per week;
- Approximately 10-20 High Dose Rate Afterloader treatments per week;
- Approximately 10 I-131 therapy administrations per quarter; and
- Approximately 15 I-131 whole body scans per quarter;

The licensee returned the Novoste system as noted in License Condition 6.H. and 9.H. prior to the last inspection and do not expect to use such a system in the future.

The inspector did not review the diagnostic portion of the program as it was reviewed during the last inspection in 2005.

The nuclear medicine department consists of six nuclear medicine technicians and four authorized users.

The Radiation Oncology department consists of nine authorized users and six medical physicists.

### **2. SCOPE OF INSPECTION:**

Inspection Procedure(s) Used: 87131 and 87132

Focus Areas Evaluated: Sections 3.1-3.7 of each inspection procedure. Within these areas, the inspection consisted of selected examination of procedures and representative records, observations of activities, and interviews with personnel.

### **3. INDEPENDENT AND CONFIRMATORY MEASUREMENTS:**

The inspector performed radiological surveys of restricted and unrestricted areas in and around the nuclear medicine department and the radiation oncology department. The inspector identified that the licensee had disposed of Tc-99m waste into a non-radioactive waste container. The licensee placed the waste into a radioactive waste container immediately and committed to retraining nuclear medicine staff on the appropriate locations to dispose of radioactive material. The violation is described in Section 4.

The inspector made comparison measurements between NRC and licensee radiation measurement instruments and found that they were within +/- 20%.

**4. VIOLATIONS, NCVs, AND OTHER SAFETY ISSUES:**

- A. Condition 16 of License Number 24-18625-01 requires, in part, that the licensee conduct its program in accordance with statements, representations, and procedures contained in an application dated August 29, 2000.

Item 10.4 titled "Safe Use of Radiopharmaceuticals" of the application dated August 29, 2000 states, in part, that the licensee will implement the model safe rules published in Appendix I to the Regulatory Guide 10.8, Revision 2.

Model Rule 9 of Appendix I to the Regulatory Guide 10.8, Revision 2 requires that the licensee shall dispose of radioactive waste only in designated, labeled, and properly shielded receptacle.

Contrary to the above, on April 26, 2007, the licensee had disposed of technetium-99m waste in a receptacle that was not designated, labeled and properly shielded for radioactive waste disposal. Specifically, the licensee disposed of technetium-99m waste in a normal trash container near the area where patients are administered licensed material in the nuclear medicine department.

The licensee committed to retraining nuclear medicine staff members to ensure radioactive waste is disposed of appropriately.

- B. Condition 6.K of License Number 24-18625-01 states, in part, that the licensee may possess two Gadolinium-153 sealed sources not to exceed 450 millicuries each.

Contrary to the above, from approximately March 2007 to April 26, 2007, the licensee possessed four Gadolinium-153 sealed sources that did not exceed 450 millicuries each.

For corrective actions, the licensee committed to either dispose of the licensed material within 30 days of the telephonic exit meeting (conducted on 5/21/07) or to request an amendment to the license.

**5. PERSONNEL CONTACTED:**

- \* Jackie DeSauza - COO
- \* Michael Scott - Director Radiology/Nuclear Medicine
- \* Jim Gnefkow - Director Safety/Security
- \* Janet Rowe - Coordinator / Gamma Knife
- \* Amber Boes - Director Oncology / Gamma Knife
- \* Aric Stallman - Supervisor of Nuclear Medicine
- \* Suzanne Schultz - Chief Physicist
- # Dr. Steven Slack - Radiation Safety Officer

Use the following identification symbols:

- # Individual(s) present at entrance meeting
- \* Individual(s) present at exit meeting
- & Individual(s) present during telephonic exit

-END-