

(88)

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED: Ozarks Medical Center 1100 Kentucky Avenue West Plains, Missouri 65775		2. NRC/REGIONAL OFFICE U.S. Nuclear Regulatory Commission Region III 2443 Warrenville Road, Suite 210 Lisle, Illinois 60532-4351	
REPORT NUMBER(S) 2008-001			

3. DOCKET NUMBER(S) 030-14280	4. LICENSEE NUMBER(S) 24-18733-01	5. DATE(S) OF INSPECTION April 9, 2008
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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	Geoffrey M. Warren		4/9/08

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6. INSPECTION PROCEDURES USED 87131		7. INSPECTION FOCUS AREAS 03.01 – 03.08	

SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM CODE(S) 02120	2. PRIORITY 3	3. LICENSEE CONTACT Jacob J. Parker, M.D., RSO	4. TELEPHONE NUMBER 417-256-9111
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<input checked="" type="checkbox"/> Main Office Inspection	Next Inspection Date: April 2011
<input type="checkbox"/> Field Office	
<input type="checkbox"/> Temporary Job Site Inspection	

PROGRAM SCOPE

The licensee was a 114-bed hospital located in West Plains, Missouri, which served south-central Missouri and northern Arkansas. Licensee performed activities as authorized under Sections 35.100, 35.200, and 35.300, as well as iodine-125 (I-125) seeds under 35.400. The new nuclear medicine area was as described in materials submitted to the NRC. The nuclear medicine department was staffed with three full-time technologists. The staff typically administered 200 diagnostic doses monthly in the nuclear medicine area. Doses were primarily technetium-99m (Tc-99m) for cardiac, bone, and other studies. Doses were received as unit doses from a licensed radiopharmacy or prepared as kits from a moly/tech generator. The nuclear medicine staff had performed two therapies using samarium-153 since the previous inspection; no other therapies had been performed. All waste was disposed through decay in storage or returned to the radiopharmacy.

While authorized to perform activities using I-125 seeds under 35.400, the licensee had not yet begun using such seeds. However, the licensee had recently added a physician authorized user who was qualified to perform implant procedures to the license, and expected to begin soon. The physician planned to take a review course before performing any such procedures.

Performance Observations

The inspector observed two diagnostic administrations of licensed material, including dose preparation and disposal, and identified no issues with the activities. Licensee staff demonstrated package receipt and return surveys, wipe counter and survey meter QC, dose calibrator constancy, and daily contamination surveys, and demonstrated weekly wipe surveys. The inspector found no concerns with these activities. The inspector reviewed written directives for Sm-153 therapies and found no issues. Interviews with licensee staff indicated adequate knowledge of radiation safety procedures. Radiation surveys indicated radiation levels consistent with licensee records and postings.