

03

**SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION**

1. LICENSEE/LOCATION INSPECTED: <i>North Kansas City Hospital North Kansas City, MO</i>		2. NRC/REGIONAL OFFICE <b>U.S. Nuclear Regulatory Commission Region III 2443 Warrenville Road Suite 210 Lisle, Illinois 60532-4351</b>	
REPORT <i>2008-001</i>		3. DOCKET NUMBER(S) <i>030-13966</i>	4. LICENSEE NUMBER(S) <i>24-18628-01</i>
		5. DATE(S) OF INSPECTION <i>April 28, 2008</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	Deborah A. Piskura	<i>Deborah A. Piskura</i>	4/28/08

**SAFETY INSPECTION REPORT  
AND COMPLIANCE INSPECTION**

1. LICENSEE North Kansas City Hospital REPORT NUMBER(S) 2008-001		2. NRC/REGIONAL OFFICE <b>Region III</b> 2443 Warrenville Road, Suite 210 Lisle, IL 60532	
3. DOCKET NUMBER(S) 030-13966	4. LICENSE NUMBER(S) 24-18628-01	5. DATE(S) OF INSPECTION April 28, 2008	
6. INSPECTION PROCEDURES USED 87130, 87131, 87132		7. INSPECTION FOCUS AREAS 03.01 – 03.08	

**SUPPLEMENTAL INSPECTION INFORMATION**

1. PROGRAM CODE(S) 02240	2. PRIORITY 2	3. LICENSEE CONTACT Kenneth W. Arnett, M.D.	4. TELEPHONE NUMBER 816-691-2000
-----------------------------	------------------	--	-------------------------------------

Main Office Inspection      Next Inspection Date: April 2010

Field Office    HDR suite 2790 Clay Edwards Drive, N KC, MO

Temporary Job Site Inspection

**PROGRAM SCOPE**

This licensee was a 450-bed hospital, authorized to use licensed material permitted by Sections 35.100, 35.200, 35.300, 35.400, 35.1000 Sr-90 IVB devices and Ir-192 in an HDR. The nuclear medicine department was staffed with seven full-time technologists who performed approximately 500-600+ diagnostic nuclear medicine procedures per month. Nuclear medicine activities were performed in two separate areas within the main hospital (diagnostic studies within the radiology department, and cardiac studies in the cardiac department). In addition, the hospital was authorized to perform cardiac imaging at a separate cardiac clinic within the hospital. The licensee received unit doses from a licensed radiopharmacy. The hospital performed a full spectrum of nuclear diagnostic imaging studies. Typically, in a year the hospital administered 20 iodine-131 thyroid carcinoma therapies and 20-25 hyperthyroidism treatments. The hospital obtained its I-131 in capsule form only. The department administered 1-2 Sr-89 and Sm-153 dosages annually for treatment of metastatic bone disease. Occasionally the department administered Bexxar and Zevalin treatments (1-2 cases annually). The licensee retained the services of a consulting physicist to audit the radiation safety program on a quarterly basis.

The radiation therapy activities were performed by two contract medical physicists and two in-house dosimetrists, and three authorized users. Brachytherapy activities included Pd-103 permanent implants (20-25 cases annually) and Cs-137/Ir-192 temporary gynecological implants (1-2 cases annually). Although the licensee was approved for 35.1000 material, the hospital transferred its IVB unit to the manufacturer for disposal. In October 2007, the hospital acquired its HDR unit. The licensee administered one course of mammosite treatment in March-April, 2008.

This inspection consisted of interviews with licensee personnel, a review of selected records, tours of the nuclear medicine and radiation oncology departments, and independent measurements. The inspector observed licensee nuclear medicine personnel prepare, assay and administer several unit doses for various imaging procedures. The inspection included observations of dose calibrator QA checks, package receipts and surveys, and area surveys. Certain safety features of the HDR unit/room could not be observed during the inspection because the AMP was not present.