



**UNITED STATES
NUCLEAR REGULATORY COMMISSION**

REGION III
2443 WARRENVILLE ROAD, SUITE 210
LISLE, ILLINOIS 60532-4352

October 10, 2008

E. Lynn McGuire, Director
National Health Physics Program (115HP/NLR)
Department of Veterans Affairs
Veterans Health Administration
2200 Fort Roots Drive
Little Rock, AR 72114

SUBJECT: NRC INSPECTION REPORT 030-34325/08-02(DNMS) (FORM 591M PART 1)
MEDICAL CENTER, DURHAM, NORTH CAROLINA

Dear Mr. McGuire:

This refers to the inspection conducted on September 15, 2008, at the Department of Veterans Affairs Medical Center, Durham, North Carolina. The inspection was limited to a review of activities authorized under Permit No. 32-01134-01. The inspector conducted an exit briefing with the staff at the Medical Center at the completion of the inspection.

Within the program areas reviewed during this inspection, the inspector did not identify any violations of NRC requirements. Therefore, you are not required to respond to this letter.

In accordance with 10 CFR 2.390 of the NRC's "Rules of Practice," a copy of this letter and its enclosure will be available electronically in the NRC Public Document Room or from the Publicly Available Records (PARS) component of NRC's document system (ADAMS). The NRC's document system is accessible from the NRC Web site at <http://www.nrc.gov/reading-rm/adams.html>.

We will gladly discuss any questions you have concerning this inspection.

Sincerely,

A handwritten signature in cursive script, appearing to read "Patricia J. Pelke".

Patricia J. Pelke, Chief
Materials Licensing Branch

Docket No. 030-34325
License No. 03-23853-01VA
Permit No. 32-01134-01

Enclosure:
Inspection Report 030-34325/08-02(DNMS) (Form 591M Part 1)

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED:
VA Medical Center
508 Fulton Street
Durham, NC 27705

REPORT Nos 2008-002

2. NRC/REGIONAL OFFICE

**U.S. Nuclear Regulatory Commission
Region I, 475 Allendale Road
King of Prussia, Pennsylvania 19406-1415**

3. DOCKET NUMBER(S)
030-34325

4. LICENSE NUMBER(S)
03-23853-01VA

5. DATE(S) OF INSPECTION
September 15, 2008

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.

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	Willie J. Lee		09/23/2008

Initial	Announced	<input checked="" type="checkbox"/> Unannounced	<input checked="" type="checkbox"/> Routine	Special
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NRC FORM 591M PART 3
(10-2003) 10 CFR 2.201

U.S. NUCLEAR REGULATORY COMMISSION

Docket File Information
**SAFETY INSPECTION REPORT
AND COMPLIANCE INSPECTION**

1. LICENSEE VA Medical Center 508 Fulton Street Durham, NC 27705 REPORT NOS 2008-002	2. NRC/REGIONAL OFFICE U.S. Nuclear Regulatory Commission Region I, 475 Allendale Road King of Prussia, Pennsylvania 19406-1415
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3. DOCKET NUMBER(S) 030-34325	4. LICENSE NUMBER(S) 03-23853-01VA	5. DATE(S) OF INSPECTION September 15, 2008
6. INSPECTION PROCEDURES USED 87122, 87134	7. INSPECTION FOCUS AREAS 02.01 through 02.07	8. INSPECTOR Willie J. Lee

SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM CODE(S) 2110/3610	2. PRIORITY 2	3. LICENSEE CONTACT Walter (Buddy) Furr, RSO	4. TELEPHONE NUMBER 919-416-5851
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Main Office Inspection Next Inspection Date: TBD

Field Office _____

Temporary Job Site Inspection _____

PROGRAM SCOPE

This was a routine, unannounced inspection of a medical broad scope permittee with byproduct material authorization for medical diagnosis, therapy, and research. All activities are performed within the main hospital complex, with the exception of a Building 16 research laboratory. The majority of their medical activity involves 10 CFR 35.200 imaging studies. Cardiovascular imaging comprises approximately 50% of their workload, which is approximately 8 patients per day. Unit doses are received from an authorized radiopharmacy, Cardinal Health-Raleigh (NC), during days of operation. The licensee also receives bulk technetium-99m for radiopharmaceutical preparation during nights and weekends. Shipments are received once per day. They do not use a generator. A dose calibrator is used along with reference sources possessed under 10 CFR 35.65. Procedures permitted by 35.300 include the use of iodine-131 (I-131) in capsule form for treatment of hyperthyroidism and thyroid cancer. Hyperthyroidism treatments are conducted an average of 2-3 times month. Treatment of thyroid cancer is performed on an outpatient and inpatient basis once per month. The licensee indicated that they are aware of IN 2003-22: "Heightened Awareness for Patients Containing Detectable Amounts of Radiation from Medical Administrations", and provide patients with instructions and hospital contact information. The licensee does use iodine-125 brachytherapy sources permitted by 35.400 approximately four times per month. Written directives are completed for use of I-131 sodium iodide greater than 30 microcuries and other therapy procedures. Samples of written directives were selected and reviewed during the inspection and were determined to be complete.

The licensee uses microcurie quantities of hydrogen-3, sulfur-35, and carbon-14 for biomedical research in three research labs. They are not conducting studies involving humans or animals. The Blood Bank also has a self-shielded irradiator containing cesium-137. The licensee stated that this device has been placed on the Department of Energy orphan source list for disposal within the next 18 months.

(continue on next page)

SUNSI Review
Completed By: / RA / Willie J. Lee

<input checked="" type="checkbox"/> Non-Public	<input checked="" type="checkbox"/> Non-Sensitive	<input type="checkbox"/> Sensitive
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Initial	Announced	<input checked="" type="checkbox"/>	Unannounced	<input checked="" type="checkbox"/>	Routine	Special
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NRC FORM 591M PART 3 (continuation)
(10-2003) 10 CFR 2.201

U.S. NUCLEAR REGULATORY COMMISSION

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**SAFETY INSPECTION REPORT
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SUPPLEMENTAL INSPECTION INFORMATION

PAGE 1, CONTINUED FROM PART 3

A twelve member Radiation Safety Committee meets quarterly to oversee the licensee's Radiation Protection Program. There is a fulltime Radiation Safety Officer (RSO), who is usually onsite daily. He is assisted by a radiation safety technician. The RSO performs an annual audit of the program. There are four technologists utilizing three imaging cameras and two treadmills in the nuclear medicine department. There are five authorized users in nuclear medicine, one in radiation oncology and three in the research department. PET imaging is performed by a contractor (Alliance Imaging) under a separate byproduct material license.

The following individuals were contacted during the inspection:

- Ralph Gigliotti, Medical Center Director
- John Shelburne, MD, Chief of Staff
- Walter (Buddy) Furr, Radiation Safety Officer
- Jim Stansfield, Supervisor, Nuclear Medicine
- David Howell, MD, Blood Bank Director
- A. Oleson, MD, Radiation Oncology
- G. A. Taylor, MD, PhD, Research
- Gary Williams, VA National Health Physics Program

Within the scope of this inspection, no violations or concerns were identified.