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SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED: Midwest Division – RMC, LLC d/b/a Research Medical Center Nuclear Medicine/Radiation Oncology Kansas City, MO 64132 REPORT NUMBER(S)		2. NRC/REGIONAL OFFICE U.S. Nuclear Regulatory Commission Region III 2443 Warrenville Road Suite 210 Lisle, Illinois 60532-4351	
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3. DOCKET NUMBER(S) 030-13959	4. LICENSEE NUMBER(S) 24-18625-01	5. DATE(S) OF INSPECTION October 27, 2009
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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:

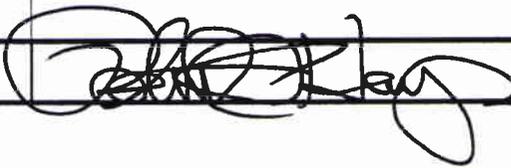
- 1. Based on the inspection findings, no violations were identified.
- 2. Previous violation(s) closed.
- 3. The violation(s), specifically described to you by the inspector as non-cited violations, are not being cited because they were self-identified, non-repetitive, and corrective action was or is 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	Robert P. Hays		10/27/09

**SAFETY INSPECTION REPORT
AND COMPLIANCE INSPECTION**

1. LICENSEE Midwest Division – RMC, LLC		2. NRC/REGIONAL OFFICE Region III 2443 Warrenville Road, Suite 210 Lisle, IL 60532	
REPORT NUMBER(S) 2009-001			
3. DOCKET NUMBER(S) 03013959	4. LICENSE NUMBER(S) 24-18625-01	5. DATE(S) OF INSPECTION October 27, 2009	
6. INSPECTION PROCEDURES USED 87132 (12/06/05)		7. INSPECTION FOCUS AREAS 03.01-03.07	

SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM CODE(S) 02240	2. PRIORITY 2	3. LICENSEE CONTACT Steve Slack, RSO	4. TELEPHONE NUMBER 816-276-4449
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Main Office Inspection Next Inspection Date: **October 2011**

Field Office _____

Temporary Job Site Inspection _____

PROGRAM SCOPE

The licensee was a medical facility located in Kansas City, Missouri, with authorization by the license to use byproduct materials for diagnostic and therapeutic medical procedures under 10 CFR 35.100, 35.200, 35.300, 35.400, 35.600 (HDR) and 35.1000 (microspheres) at 2316 E. Meyer Blvd., Kansas City, MO.

The licensee's large Nuclear Medicine Department routinely conducts a daily average of 35-40 patient studies for routine diagnostic, imaging, and therapeutic procedures with a staff of 4 nuclear medicine technologists and nuclear medicine technology students in training. The licensee receives all licensed material as unit doses from a local nuclear pharmacy as needed. The staff administered I-131 to thyroid carcinoma therapy patients who are thoroughly informed and evaluated for release prior to each administration. The nuclear medicine staff prepared microspheres for liver cancer therapy and patient cases averaged 1-2 per month. Samarium-153 is occasionally administered as needed to cancer patients.

The radiation therapy staff conducted low dose brachytherapy procedures which includes occasional Cs-137 implants and permanent seed implants using I-125 or Pd-103. The radiation therapy department also possesses a Varian HDR remote afterloader unit and used and stored in a dedicated HDR treatment room. A source exchange is conducted quarterly by Varian service engineers.

The inspector performed independent and confirmatory radiation measurements which indicated results consistent with licensee survey records and postings.

Performance Observations

During the inspection, the licensee's available staff demonstrated/discussed: (1) survey instruments and required surveys; (2) package receipt and check-in procedures; (3) radiopharmaceutical therapy dosage prep; (4) wipe test counting; (5) dosimetry; (6) I-131 procedures and written directives; (7) Microsphere prep procedures (8) waste handling; (9) sealed source inventories and leak tests; (10) security and storage of licensed material; (11) HDR, seed implant, and low-dose brachytherapy written directives and treatment plans; (12) electrometer and survey instrument calibrations; (13) HDR calibrations and output checks; (14) HDR daily checks performed prior to each administered treatment; (15) HDR emergency tools and procedures; (16) acceptance testing; (17) annual refresher training/emergency drills; (18) radiation safety program audit results; and (19) corrective actions taken for two SL IV violations, identified during the previous inspection, pertaining to the licensee's failure to dispose of Tc-99m waste in a labeled container and possession of two Gd-153 sources not listed on the license and the violations should now be considered closed.