

April 11, 2011

Mr. Gary Williams, Director
National Health Physics Program (115 HP/NLR)
Department of Veterans Affairs
Veterans Health Administration
2200 Fort Roots Drive
North Little Rock, AR 72114

SUBJECT: NRC INSPECTION REPORT 030-34325/11-25(DNMS) – W.G. HEFNER VA
MEDICAL CENTER, SALISBURY, NORTH CAROLINA

Dear Mr. Williams:

On March 17, 2011, a U. S. Nuclear Regulatory Commission (NRC) inspector conducted a routine inspection at the W.G. Hefner VA Medical Center located in Salisbury, North Carolina. The inspection results were discussed with Mr. Paul Russo, Medical Center Director, Patient Care Services, and selected members of his staff at the exit meeting on March 17, 2011. The enclosed report presents the results of this inspection.

This inspection was an examination of activities conducted under your license as they relate to radiation safety and to compliance with the Commission's rules and regulations and with the conditions of your license. Within these areas, the inspection consisted of selective examinations of procedures and representative records, interviews with personnel, independent measurements, and observation of activities in progress. Within the scope of this inspection, no violations of NRC requirements were identified.

In accordance with Title 10 of the Code of Federal Regulations (CFR) 2.390 of the NRC's "Rules of Practice," a copy of this letter and its enclosure will be available electronically for public inspection in the NRC Public Document Room or from the NRC's Agencywide Documents Access and Management System (ADAMS), accessible from the NRC Web site at <http://www.nrc.gov/reading-rm/adams.html>.

G. Williams

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Should you have any questions concerning this inspection, please contact Kevin Null of my staff at (630) 829-9854.

Sincerely,

/RA/

Patricia J. Pelke, Chief
Materials Licensing Branch
Division of Nuclear Materials Safety

Docket No. 030-34325
License No. 03-23853-01VA
Permit No. 32-15483-01

Enclosure:
Inspection Report No. 030-34325/11-25(DNMS)

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OFFICIAL RECORD

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

1. AMENDMENTS AND PROGRAM CHANGES:

NA – The W. G. Hefner VA Medical Center, Salisbury, North Carolina is a permittee of the Department of Veterans Affairs (DVA) Master Materials License (MML).

2. INSPECTION AND ENFORCEMENT HISTORY:

The last inspection by NRC was on August 13, 2002, with no violations identified.

The last inspection by the National Health Physics Program (NHPP) was on December 1, 2010, with no violations identified.

3. INCIDENT/EVENT HISTORY:

No events have been reported since the last inspection.

PART II - INSPECTION DOCUMENTATION

1. ORGANIZATION AND SCOPE OF PROGRAM:

Paul Russo, Medical Center Director
Miguel Lopez, M.D., Chief of Staff
Ed Bourne, Radiation Safety Officer (RSO)

The W.G. Hefner VA Medical Center, Salisbury, North Carolina (permittee), was authorized by the VA Master Material License No. 03-25853-01VA to possess a limited scope medical permit (Permit No. 32-15843-01), and currently conducts 10 CFR 35.100 and 35.200 activities. The Director of the NHPP accompanied the NRC inspector during this inspection.

The RSO is a full time employee of the medical center. He performs program audits and responds to any spills and events involving licensed materials. The permittee has an active Radiation Safety Committee (RSC), which meets on a quarterly basis. The RSO provides reports of licensed activities to the RSC for review. No major spills, contamination events, losses of licensed material, or medical events have occurred since the last inspection. The RSO reports through the Chief of Nuclear Medicine to the Chief of Staff.

The nuclear medicine department performs approximately 6-12 diagnostic studies per day using unit dosages supplied by Cardinal Health, located in Charlotte, North Carolina. Activities are conducted by three full-time nuclear medicine technologists and three authorized user physicians. There are two cameras, one uptake probe and two treadmills. The most common radionuclide in use is technetium-99m in dosages up to approximately 54 millicuries for cardiac rest/stress studies. The majority of procedures performed in the nuclear medicine department are cardiac studies using Myoview. At the time of the inspection, the permittee was not conducting positron emission tomography (PET) studies. The permittee possesses and uses a dose calibrator for measuring unit doses received from Cardinal Health.

The permittee contracts with an outside consultant (Robert Dixon, Ph.D.) to perform periodic audits of its radiation safety program and survey meter calibrations.

2. SCOPE OF INSPECTION:

Record Review: The inspector reviewed records of dose calibrator quality assurance tests, training, surveys, survey instrument functionality, and performed independent radiation surveys. The inspector also reviewed the supervision of contractors, as well as the permittee's process for handling internal safety concerns raised by medical center staff.

Inspection Procedure(s) Used: 87130

Focus Areas Evaluated: Manual Chapter 2800, Sections 05.01b.1 (a) through (h).

Through a review of records and discussions with permittee staff, the inspector determined that the permittee had limited contracted services to those discussed in Section 1 (periodic audits of the radiation safety program and survey meter calibrations). The inspector noted that the permittee includes the process for addressing safety concerns as part of their routine training program for medical center staff. The inspector also determined that the permittee's dose calibrator was calibrated in accordance with NRC regulations. The inspector noted that on the day of the inspection, the permittee's primary survey instrument was not functioning as desired due to low batteries. Permittee representatives indicated that the instrument was performing satisfactorily earlier in the morning and that it must have been left on for an extended period of time. The instrument's batteries were replaced immediately and the permittee decided to use their back-up instrument as their primary survey instrument because the instrument had a battery check capability. The permittee also decided to acquire another instrument (of the same model) to prevent recurrence. Security of the nuclear medicine department was found to be adequate. The inspector also noted that occupational radiation exposures were well within regulatory limits.

3. INDEPENDENT AND CONFIRMATORY MEASUREMENTS:

The inspector conducted independent surveys with a Ludlum Model 2401-P survey meter. The inspector identified low-level (i.e., slightly above background level) contamination in a few non-radioactive trash cans in the nuclear medicine department. Examples of items in these containers included post-injection items such as band-aids, gauze, and gauze tape, etc. This was brought to the attention of the nuclear medicine staff who indicated that patients sometimes throw these items in the non-radioactive trash containers as they exit the department. As a result, the nuclear medicine staff routinely conduct surveys of all the non-radioactive trash containers at the end of each day. Any contaminated items that are discovered are discarded in a radioactive waste container. No additional contamination was detected.

4. VIOLATIONS, NCVs, AND OTHER SAFETY ISSUES:

No violations of NRC requirements were identified.

5. PERSONNEL CONTACTED:

- *Paul Russo, Medical Center Director
- *#John Pattella, Executive Assistant to the Chief of Staff
- *Edward Bourne, Radiation Safety Officer
- *Miguel Lapuz, M.D., Chief of Staff
- *Lisa Laws, Radiology Supervisor
- *Martha Curry, Quality Management Supervisor
- *Timothy Dove, Imaging Supervisor and Administrative Officer
- *Timothy Doherty, Assistant Medical Center Director
- *Anthony Dawson, Associate Medical Center Director
- *Corinne Deurdulian, M.D., Authorized User
- *#Gary Williams, Director, National Health Physics Program

Individual(s) present at entrance meeting

* Individual(s) present at exit meeting

-END-