

### SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED: Heartland Regional Medical Center 5325 Faraon Street St. Joseph, MO 64506		2. NRC/REGIONAL OFFICE  Region III: 2443 Warrenville Rd., Ste. 210 Lisle, IL 60532-4352	
REPORT NUMBER(S) 2011-001			
3. DOCKET NUMBER(S) 030-14791	4. LICENSE NUMBER(S) 24-18287-01	5. DATE(S) OF INSPECTION <i>Oct 3, 2011</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, to exercise discretion, were satisfied.  

\_\_\_\_\_ Non-cited violation(s) were discussed involving the following requirement(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)

#### Statement of Corrective Actions

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>	<i>10/3/2011</i>
BRANCH CHIEF	Tamara E. Bloomer	<i>Tamara Bloomer</i>	<i>10/12/11</i>

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

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3. DOCKET NUMBER(S) 030-14791		4. LICENSE NUMBER(S) 24-18287-01	5. DATE(S) OF INSPECTION 10/03/2011
6. INSPECTION PROCEDURES USED 87130, 87131, & 87132		7. INSPECTION FOCUS AREAS 03-01 - 03-07	

**SUPPLEMENTAL INSPECTION INFORMATION**

1. PROGRAM CODE(S) 02120	2. PRIORITY 3	3. LICENSEE CONTACT Edward Stevens, M.D., RSO	4. TELEPHONE NUMBER (816) 271-6000
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Main Office Inspection                      Next Inspection Date: Oct. 2014

Field Office Inspection \_\_\_\_\_

Temporary Job Site Inspection \_\_\_\_\_

**PROGRAM SCOPE**

This licensee was a large community hospital authorized to use licensed materials in Sections 35.100, 35.200, 35.300, 35.400 and 35.500. The licensee retained a consulting physicist who audited the nuclear medicine radiation safety program on a quarterly basis.

The nuclear medicine department was staffed with 6 technologists who performed approximately 500+ diagnostic nuclear medicine procedures monthly. The department performed a full spectrum of diagnostic imaging studies. The licensee operated 3 separate imaging areas within the hospital. The licensee received a generator from a licensed vender. The licensee maintained an active radiopharmaceutical therapy program. Typically in a year, the licensee administered 40+ I-131 treatments for hyperthyroidism; 20-25 treatments for thyroid carcinoma; and 15-20 whole body CA follow up studies (capsule form only). The licensee released these patients in accordance with Section 35.75. No beta radiopharmaceuticals had been administered since 2009.

The radiation therapy department was staffed with one medical physicist, one dosimetrist, and one authorized user. The radiation therapy activities were limited to temporary gynecological and permanent prostate implants. The licensee administered 50-70 I-125/Pd-103 permanent prostate implants annually. The department typically administered 5-10 temporary gyn implants annually. The institution intended to amend its license in the near future to add HDR activities.

This inspection consisted of interviews with select licensee personnel; a review of select records; a tour of the nuclear medicine department and the heart center; and independent measurements. The inspector observed the administration of several diagnostic nuclear medicine procedures. The inspection included observations of dose calibrator and QA checks, security of byproduct material, confirmatory inventories of sources, and use of personnel monitoring.