NRC FORM 591M PART 1 (10-2011) 10 CFR 2.201 U.S. NUCLEAR REGULATORY COMMISSION SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION								
1. LICENSEE/LOCATIO	ON INSPECTED;		2. NRC/REGIONAL OFFICE					
Ozarks Medical Center 1100 Kentucky Avenue P. O. Box 1100 West Plains, MO 65775			Region III U. S. Nuclear Regulatory Commission 2443 Warrenville Road, Suite 210 Lisle, IL 60532-4352					
REPORT NUMBER(S) 11-01								
3. DOCKET NUMBER(S)		4. LICENSE NUMBE	R(S)	(S) 5. DATE(S) OF INSPECTION				
030-14280		24-18733-01	November 17, 2011					
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								
<ol> <li>The violations(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.</li> </ol>								
	Non-cited violation(s) were discuss	sed involving the fo	llowing requirement(s):					
<ul> <li>4. During this inspection, certain of your activities, as described below and/or attached, were in violation of NRC requirements and are being cited in accordance with NRC Enforcement Policy. This form is a NOTICE OF VIOLATION, which may be subject to posting in accordance with 10 CFR 19.11.</li> <li>(Violations and Corrective Actions)</li> </ul>								
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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				.1				
NRC INSPECTOR	Robert P. Hays		Zohuk H	taen	11/17/11			
BRANCH CHIEF	Tamara E. Bloomer		E. Vornus	01	21/18/1			
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NRC FORM 591M PART 3 (10-2011) U.S. NUCLEAR REGULATORY COMMISSION								
Docket File Information SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION								
Ozarks Medical Center			Region III					
1100 Kentucky Avenue P. O. Box 1100			U.S. Nuclear Regulatory Commission					
West Plains, MO 65775			2443 Warrenville Road, Suite 210					
, , , , , , , , , , , , , , , , , , ,			Lisle, IL 60532-4352					
REPORT NUMBER(S) 11-01		4. LICENSE NUMBER(						
	3. DOCKET NUMBER(S)		5)	5. DATE(S) OF INSPECTION				
030-14280	030-14280		November 17, 2011					
6. INSPECTION PROCEDURES US	ED		7. INSPECTION FOCUS AREAS					
87131			03.01-03.07					
		EMENTAL INSPECT						
1. PROGRAM CODE(S)	2. PRIORITY	3. LICENSEE CONTAC		4. TELEPHONE NUMBER				
2120	3	Mike Goodman,	CNMT	(417) 257-6140				
Main Office Inspec	ction	Next Inspection	Date: 11/17/2	2014				
Field Office Inspec	ction			1				
Temporary Job Si	te inspection	135 - Contraction - Constant - Constant	a and to a second lifes a second s	N 1997 A - 1 - 6				
		PROGRAM SC	COPE	· · ·				
The licensee was a medical institution authorized by the license to use any byproduct material as needed, for any byproduct material permitted by 10 CFR 35.100, 35.200, 35.300, and 31.11 as prepackaged kits at the location specified on the license.								
The nuclear medicine department was staffed with two nuclear medicine technologists (NMTs). The NMTs administered an average of 6-8 diagnostic studies, per day with the majority being cardiac studies using sestamibi. Iodine-123 is administered for uptake studies and averaged none to three administrations per week. No iodine-131 has been administered since the previous inspection. The licensee also has not used any kits as authorized by 10 CFR 31.11 since the previous inspection. The nuclear medicine department received unit doses from a local nuclear pharmacy and received a 37 GBq generator each week for lung studies and on-call doses as needed. All waste was either held for decay-in-storage or returned to the nuclear pharmacy as limited quantity shipments.								
Performance Observations								
During the inspection, the licensee's NMTs, demonstrated/discussed: (1) survey meter use and calibrations; (2) package check-in procedures; (3) unit dosage prep and safe use; (4) wipe test counting; (5) waste handling; (6) generator elutions and radiopharmaceutical preparation; (7) sealed source inventories and leak tests; (8) routine security of licensed material; (9) dose calibrator tests; (10) radiation safety program audits; (11) any contamination events (minor spots on treadmill); (12) hazmat refresher training; and (13) dosimetry for CY 2010: 216mr-DDE; 1113mr-SDE; and 2011: 140mr-DDE; 1046mr-SDE, through 10/04/2011. The inspector performed independent and confirmatory radiation measurements which indicated results consistent with licensee survey records and postings.								

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