

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED: Hannibal Clinic Operations, LLC 100 Medical Drive Hannibal, Missouri 63401 REPORT NUMBER(S) 12-01		2. NRC/REGIONAL OFFICE Region III U. S. Nuclear Regulatory Commission 2443 Warrenville Road, Suite 210 Lisle, IL 60532-4352	
3. DOCKET NUMBER(S) 030-37200	4. LICENSE NUMBER(S) 24-32619-01	5. DATE(S) OF INSPECTION March 22, 2012	

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 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.
(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	Andrew M. Bramnik	<i>Andrew M. Bramnik</i>	3/22/12
BRANCH CHIEF	<i>TAYLOR BLOOMER</i>	<i>Tamara Bloomer</i>	3/30/12

Docket File Information

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<p>3. DOCKET NUMBER(S)</p> <p>030-37200</p>	<p>4. LICENSE NUMBER(S)</p> <p>24-32619-01</p>	<p>5. DATE(S) OF INSPECTION</p> <p>March 22, 2012</p>
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<p>6. INSPECTION PROCEDURES USED</p> <p>87130</p>	<p>7. INSPECTION FOCUS AREAS</p> <p>03.01 - 03.08</p>
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SUPPLEMENTAL INSPECTION INFORMATION

<p>1. PROGRAM CODE(S)</p> <p>02201</p>	<p>2. PRIORITY</p> <p>5</p>	<p>3. LICENSEE CONTACT</p> <p>Bassam Mikhail, M.D. - RSO</p>	<p>4. TELEPHONE NUMBER</p> <p>(573) 531-3187</p>
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Main Office Inspection Next Inspection Date: 3/1/2017

Field Office Inspection

Temporary Job Site Inspection

PROGRAM SCOPE

This was a routine inspection of a private clinic that performed between six and ten diagnostic nuclear medicine administrations per day. Two nuclear medicine technologists performed all patient procedures using unit doses of licensed material obtained from an area nuclear pharmacy. The licensee did not use xenon-133 or molybdenum/technetium generators. The licensee performed primarily cardiac, HIDA, bone, and thyroid scans, and was not authorized to administer therapeutic doses of licensed material. At the time of the inspection, the licensee was authorized to use sealed sources for diagnostic medical use permitted by 10 CFR 35.500. The licensee possessed 28 Gd-153 line sources for establishing attenuation-corrected images; however, the technologists informed the inspectors that they had not used the sources for almost a year. The licensee stated their intent to return the sources to the manufacturer by the end of March 2012 and subsequently request that authorization under 10 CFR 35.500 be removed from their NRC license.

PERFORMANCE OBSERVATIONS

Interviews of available staff revealed an adequate level of understanding of emergency and material handling procedures and techniques. The licensee successfully demonstrated package receipt procedures, daily surveys, and waste handling and disposal procedures. The inspectors confirmed that these activities were successfully completed by reviewing selected records since the previous inspection. A contract physicist performed quarterly program audits that were adequate to oversee the program, and recommendations to enhance ALARA were readily implemented.

Licensed material was adequately secured and not readily accessible to members of the general public. The licensee possessed a radiation survey meter that was calibrated and operational. The inspectors identified contamination reading approximately 0.3 mR/hr near the licensee's injection area, which was located in a patient exam room. The inspectors observed the licensee's decontamination and survey techniques, and follow-up surveys did not identify any readings above background levels. Personal whole body and extremity dosimetry badges were observed being worn by the staff during the inspection, and records did not indicate doses in excess of 10 CFR Part 20 limits since the previous inspection. Dosimetry records indicated that the highest annual whole body and extremity readings since 2010 were 375 mrem and 1503 mrem, respectively. No violations were identified during this inspection.