

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED:
Department of Veterans Affairs
Under Secretary for Health
Washington, D.C.
Location: South Texas VA System, San Antonio, TX
REPORT NUMBER(S) 2012-016

2. NRC/REGIONAL OFFICE
Region III
U. S. Nuclear Regulatory Commission
2443 Warrenville Road, Suite 210
Lisle, IL 60532-4352

3. DOCKET NUMBER(S)
030-34325

4. LICENSE NUMBER(S)
03-23853-01VA

5. DATE(S) OF INSPECTION
May 15, 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	<i>DM</i>		
NRC INSPECTOR	Martha Poston	<i>Martha Poston</i>	5/25/12
BRANCH CHIEF	Patricia J. Pelke	<i>Patricia J. Pelke</i>	5/25/2012

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(Continued)

Radiation Survey instruments are sent to a vendor for calibration. Personnel are badged using a NVLAP approved vendor. Staff dosimetry results ranged between 20-35 mrem whole body and extremity dose ranged between 14-113 mrem. All other functions are performed by the radiation safety staff. Records for staff training, leak tests, physical inventory, dose calibrator linearity & accuracy, instrument calibration, monthly RSO audits and personnel exposure were reviewed and no issues identified. The inspector observed the check-in of material and the administration of a dose to a patient. No issues were identified.

No violations were identified.

Docket File Information
SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

PJP

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6. INSPECTION PROCEDURES USED 87131	7. INSPECTION FOCUS AREAS 03.01 - 03.07
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SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM CODE(S) 2120/3610	2. PRIORITY 3	3. LICENSEE CONTACT Gary Williams	4. TELEPHONE NUMBER (501) 257-1572
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Main Office Inspection Next Inspection Date: _____

Field Office Inspection South Texas VA, San Antonio, TX

Temporary Job Site Inspection _____

PROGRAM SCOPE

The radiation safety program oversees active nuclear medicine and nuclear cardiology programs, and limited research activities. The facility does approximately 12-13 patients per day and uses approximately 700 mCi of Tc-99m/month. All doses are single unit doses. Per the RSO, no brachytherapy has been conducted on site since his appointment (approximately 8 months ago). The radiation safety staff consists of the RSO and two assistant RSO's. The RSO reports to the Director of Radiology, and also has the ability to report directly to the Director of the facility. The program is overseen by a Radiation Safety Committee (RSC). Active research at the facility currently only consists of the use of tritiated glucose by Dr. DeFronzo for research related to diabetes.

The nuclear medicine program uses Tc-99m for standard nuclear medicine modalities (e.g., bone, liver, and cardiac studies), I-131 for thyroid therapies, Xe-133 for lung imaging, and F-18 (FDG) for PET/CT imaging. The department is budgeted for eight nuclear medicine technologists (NMT's) but staffing losses has the current level at four NMT's and one lead NMT. Of these only two are currently cross certified in PET/CT. Both of these individuals were not available on the day of the inspection, so all PET/CT imaging had to be cancelled. The PET/CT program was reviewed and found to be adequate. The radiation safety staff contracts with Cardinal Health pharmacy for maintenance of the five (5) dose calibrators at the facility.

Performance Observations

Radiation controls associated with the research area were reviewed and found to be adequate. The hospital is currently undergoing significant changes associated with remodeling and upgrading of facilities. Discussions with the radiation safety staff indicated they are actively involved in the planning and remodeling processes to ensure that shielding, negative air balance, and other radiological concerns are addressed during the construction. The nuclear medicine and nuclear cardiology areas were reviewed and found to be adequate and personnel found to be informed and appropriately trained.