



UNITED STATES
NUCLEAR REGULATORY COMMISSION

REGION III
2443 WARRENVILLE RD. SUITE 210
LISLE, IL 60532-4352

May 7, 2014

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 03034325/2014001(DNMS) —
JACK C. MONTGOMERY VA MEDICAL CENTER, MUSKOGEE, OKLAHOMA

Dear Mr. Williams:

On April 17, 2014, the U.S. Nuclear Regulatory Commission (NRC) conducted a routine inspection at the Jack C. Montgomery VA Medical Center, Muskogee, Oklahoma. The inspection was limited to a review of activities authorized under Permit Number 35-13184-01. The inspector conducted an exit meeting with the management and staff at the facility at the completion of the inspection.

The inspection was an examination of activities conducted under the Permit as they relate to radiation safety and to compliance with the Commission's rules and regulations. 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 the inspection no violations of NRC requirements were identified; therefore, no response to this letter or the enclosed NRC Form 591M is required.

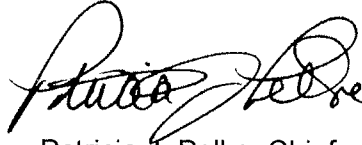
In accordance with Title 10 of the *Code of Federal Regulations* (CFR) 2.390 of the NRC's "Rules of Practice," a copy of this letter and its enclosure will be available electronically for public inspection in the NRC Public Document Room or from the NRC's Agencywide Documents Access and Management System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

G. Williams

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

Sincerely,

A handwritten signature in black ink, appearing to read "Patricia J. Pelke". The signature is fluid and cursive, with a large initial "P" and "J".

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

Docket No.: 030-34325
License No.: 03-23853-01VA
Permit No.: 35-13184-01

Enclosure:
Inspection Report 03034325/2014001(DNMS)



SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED:

Department of Veterans Affairs
Under Secretary for Health
Washington, D.C.
Location: Jack C. Montgomery VA Med. Ctr, Muskogee, OK

2. NRC/REGIONAL OFFICE

Region III
U. S. Nuclear Regulatory Commission
2443 Warrenville Road, Suite 210
Lisle, IL 60532-4352

REPORT NUMBER(S) 2014001

3. DOCKET NUMBER(S)

030-34325

4. LICENSE NUMBER(S)

03-23853-01VA

5. DATE(S) OF INSPECTION

April 17, 2014

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>for</i>		
NRC INSPECTOR	Anthony D. Gaines	<i>Anthony D. Gaines</i>	5/6/14
BRANCH CHIEF	Patricia J. Pelke	<i>Patricia J. Pelke</i>	5/7/14

Docket File Information
SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED: Department of Veterans Affairs Under Secretary for Health Washington, D.C. Location: Jack C. Montgomery VA Med. Ctr, Muskogee, OK REPORT NUMBER(S) 2014001	2. NRC/REGIONAL OFFICE Region III U. S. Nuclear Regulatory Commission 2443 Warrenville Road, Suite 210 Lisle, IL 60532-4352
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3. DOCKET NUMBER(S) 030-34325	4. LICENSE NUMBER(S) 03-23853-01VA	5. DATE(S) OF INSPECTION April 17, 2014
6. INSPECTION PROCEDURES USED 87131	7. INSPECTION FOCUS AREAS All	

SUPPLEMENTAL INSPECTION INFORMATION

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

Field Office Inspection Muskogee, OK

Temporary Job Site Inspection

PROGRAM SCOPE

This was a routine, unannounced inspection of permitted activities conducted under Department of Veterans Affairs Permit number 35-13184-01. The permit was issued to the VA Medical Center authorizing 10 CFR 35.100, 35.200, and 35.300 at the Muskogee, Oklahoma location. The staff present during the inspection consisted of two certified nuclear medicine technologists (CNMT) and one full-time physician authorized user, whom is also the Radiation Safety Officer (RSO). There is one other authorized user on the permit that only performs cardiac studies on Fridays. The nuclear medicine facilities included a hot lab and two imaging rooms, and one room for cardiac stress tests.

An average of five to six studies are conducted each day, Monday through Friday. Typically it is three cardiac studies and the rest are mostly bone and HIDA studies. The permittee receives unit doses from Cardinal Health. The permittee is authorized to perform iodine-131 studies requiring a written directive and they perform these studies rarely (one to two per year). All patients that were administered iodine-131 requiring a written directive were given between two to three millicuries, as they only treat for hyperthyroidism.

Radiation Services and Consultants, Inc., provided services which included, but were not limited to, QA/QC of equipment, leak-testing of sealed sources, and program audits.



Docket File Information
SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

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PROGRAM SCOPE (Continued)

Performance Observations

The nuclear medicine department, hot lab, and imaging rooms were appropriately posted and secured. Radioactive shipments were delivered to the hot lab by the pharmacy prior to the arrival of the CNMT's. Security escorted the shipment and unlocked the door. When the CNMT's arrived in the morning they checked the package for removable contamination and radiation levels. Instrument preparation and calibration is performed each morning prior to the patient studies.

The inspector observed dose preparation and administration of radiopharmaceuticals to patients by CNMT's. The dose calibrator was used to measure doses prior to all administrations. The CNMT's used ALARA techniques, wore protective clothing, used syringe shields, and utilized appropriate personal dosimetry during all radioisotope handling. Appropriate use of a survey meter was observed during the package receipt survey. The inspector had discussions with nuclear medicine staff about protocols that were implemented for area and patient surveys. The inspector interviewed the two CNMT's, as well as the RSO/physician authorized user who oversees the safety program, about the permittee's implementation of its radiation safety program.

Administrations requiring a written directive consisted primarily of whole body scans and thyroid therapy using iodine-131. Iodine-131 was administered in capsule form only. Patients that were administered iodine-131 for therapy were surveyed after administration, released in accordance with 10 CFR 35.75, and provided written instructions to keep radiation dose ALARA to family members. A random selection of written directives were reviewed for iodine-131 treatments. Other documents reviewed included program audits, occupational dosimetry records, radiation safety committee minutes, leak tests and inventory records, and instrument calibrations.

No violations were identified.



G. Williams

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Should you have any questions concerning this inspection or the enclosed report, 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.: 35-13184-01

Enclosure:
Inspection Report 03034325/2014001(DNMS)

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