

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED:

Phelps County Regional Medical Center
1000 West Tenth Street
Rolla, MO 65401

REPORT NUMBER(S) 16-001

2. NRC/REGIONAL OFFICE

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

3. DOCKET NUMBER(S)

030-14804

4. LICENSE NUMBER(S)

24-18295-01

5. DATE(S) OF INSPECTION

January 26, 2016

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	Zahid Sulaiman	<i>Zahid Sulaiman</i>	1/26/16
BRANCH CHIEF	Aaron T. McCraw	<i>[Signature]</i>	2/10/16

Docket File Information

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6. INSPECTION PROCEDURES USED 87131 & 87132	7. INSPECTION FOCUS AREAS 03.01-03.07
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SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM CODE(S) 02230	2. PRIORITY 2	3. LICENSEE CONTACT Edward F. Downey, Jr., D.O., RSO	4. TELEPHONE NUMBER (573) 364-8899
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Main Office Inspection Next Inspection Date: 01/26/2018
 Field Office Inspection _____
 Temporary Job Site Inspection _____

PROGRAM SCOPE

This was a routine inspection of a 224-bed regional medical center, authorized under NRC license to use byproduct materials for medical uses permitted by 10 CFR 35.100, 35.200, 35.300, 35.400, and 35.600. The nuclear medicine department was staffed with two full-time nuclear medicine technologists (NMT) who performed approximately 120 diagnostic nuclear medicine procedures monthly. The licensee received unit doses from a licensed radiopharmacy. Doses were primarily technetium-99m for cardiac, bone scan, Hida, lung scan, gastric emptying and other studies. The nuclear medicine department performed 20 iodine-131 therapy procedures per year. The licensee had one full-time nuclear medicine technologists (NMT) who performed approximately 60 diagnostic fluorine-18 studies monthly. Doses were received as unit dose from licensed radiopharmacy. The licensee is also planning to add Xofigo, Ra-223 treatment in near future. The radiation oncology department was staffed with two full-time oncologists, one dosimetrist, and one authorized medical physicist (AMP). The licensee conducts approximately two high dose rate brachytherapy (HDR) treatments per year. The majority of treatments conducted were to treat breast, and gynecological cancers. The HDR sources were exchanged quarterly, with the most recent source received in January 2016. The licensee had not conducted any manual brachytherapy since last inspection.

Performance Observations:

The inspector: (1) observed administration of technetium-99 diagnostic dose to a patient; (2) observed the NMT conduct a physical inventory of sealed sources and all sources were accounted for; (3) had the NMT demonstrated the dose calibrator constancy check, package receiving and check-in procedures, the end of the day daily and weekly area surveys, and proper handling of radioactive waste and disposal procedures. The inspector reviewed annual radiation safety program audits conducted by an outside consultant every quarter, with no findings. The inspector had the AMP demonstrate the HDR unit's: (1) security of licensed material; (2) daily spot checks; (3) emergency equipment and procedures; (4) safety procedures and instructions; (5) door interlock system; (6) radiation monitoring equipment; and (7) ON-OFF switch to prevent dual operation in the treatment room. The inspector reviewed four written directives and treatment plans, with no issues noted. The inspector reviewed dosimetry records for 2013, 2014, and 2015, indicating the maximum annual dose to be 404 mrem - DDE, and 1736 mrem - SDE, and performed independent radiation measurements of the hot lab, imaging, and stress room areas that were consistent with the licensee's survey results and within regulatory limits.

No violations of NRC requirements were identified during this inspection.