

**SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION**

1. LICENSEE/LOCATION INSPECTED:  Harrison County Community Hospital Nuclear Medicine Department 2600 Miller Street Bethany, MO 64424  REPORT NUMBER(S) 2016-001	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)  030-38827	4. LICENSE NUMBER(S)  24-35230-01	5. DATE(S) OF INSPECTION  March 31, 2016
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**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	Dennis P. O'Dowd	<i>Dennis P. O'Dowd</i>	03/31/16
BRANCH CHIEF	Aaron T. McCraw	<i>[Signature]</i>	4/29/16

**Docket File Information**

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6. INSPECTION PROCEDURES USED  87130	7. INSPECTION FOCUS AREAS  03.01-03.07
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**SUPPLEMENTAL INSPECTION INFORMATION**

1. PROGRAM CODE(S)  02121	2. PRIORITY  5	3. LICENSEE CONTACT  Michelle Gamble, CNMT, RSO	4. TELEPHONE NUMBER  (785) 969-3112
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Main Office Inspection      Next Inspection Date: 03/31/2021

Field Office Inspection \_\_\_\_\_

Temporary Job Site Inspection \_\_\_\_\_

**PROGRAM SCOPE**

This was an initial inspection of a 15-bed critical access community hospital authorized by the license, issued in June 2015, to use byproduct material permitted by 10 CFR 35.100 and 35.200, at the location specified on the license. The nuclear medicine department was staffed with one nuclear medicine technologist (NMT) who performed an average of 2-3 cardiac studies, and 1-2 other diagnostic studies (e.g., bone, biliary, lung) each day on Tuesdays and Thursdays, using unit doses received from a Kansas City nuclear pharmacy. No Xe-133 procedures, PET studies, or administrations of licensed material requiring a written directive were conducted. All waste was either held for decay-in-storage (DIS) or returned to the nuclear pharmacy as limited quantity shipments.

**PERFORMANCE OBSERVATIONS**

This inspection consisted of interviews with the licensee's NMT and radiology department director; tour of the nuclear medicine department; independent measurements; and a review of select records. Interviews with the licensee's NMT indicated an adequate level of understanding of emergency and material handling procedures and techniques, and knowledge of radiation safety concepts. The licensee's NMT discussed and/or successfully demonstrated the following: (1) radiation detection survey instruments and required surveys (i.e., daily, weekly); (2) package receipt and return procedures; (3) wipe test counting; (4) safe use procedures; (5) dose calibrator tests; (6) security and storage of licensed materials; (7) quarterly radiation safety program reviews and periodic training (i.e., refresher, ancillary staff, and DOT HAZMAT training); (8) sealed source inventory; (9) waste handling and disposal procedures; (10) contamination events/other incidents (none); (11) dosimetry (< 10% of annual regulatory limits). An outside consultant performed quarterly program audits that appear to be adequate to maintain program compliance. Licensed material was observed as adequately secured and was not readily accessible to members of the general public. Survey meters were found to be calibrated and operational, and performed well (within 10%) in side-by-side comparison with an NRC instrument. Independent measurements taken did not indicate readings in excess of regulatory limits in restricted or unrestricted areas, and were consistent with licensee survey records and postings. Personal dosimetry was observed being worn by the NMT. Dosimetry records indicated maximum whole body and extremity doses, respectively, from June-December 2015, as follows: 108 millirem (mrem) and 730 mrem. Personal dosimetry records reviewed for YTD 2016 did not indicate whole body and extremity exposures approaching 10 CFR Part 20 limits.

No violations of NRC requirements were identified as a result of this inspection.