



**UNITED STATES  
NUCLEAR REGULATORY COMMISSION**  
REGION III  
2443 WARRENVILLE RD. SUITE 210  
LISLE, IL 60532-4352

September 21, 2016

Mr. Craig Adams, 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 03034325/2016008(DNMS) – NEW MEXICO  
VA HEALTH CARE SYSTEM, ALBUQUERQUE, NEW MEXICO**

Dear Mr. Adams:

On August 22, 2016, the U.S. Nuclear Regulatory Commission (NRC) conducted a routine inspection at the New Mexico VA Health Care System, Albuquerque, New Mexico. The inspection was limited to a review of activities authorized under Permit Number 30-01747-02. 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's 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>.

C. Adams

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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,



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

Docket No.: 030-34325  
License No. 03-23853-01VA  
Permit No. 30-01747-02

Enclosure:  
IR 03034325/2016008(DNMS)

C. Adams

-2-

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OFFICE	RIV-DNMS		RIII-DNMS		RIII-DNMS		RIII	
NAME	JKatanic:ps PJPelke for		KNull PJPelke for		PJPelke			
DATE	9/21/2016		9/21/2016		9/21/2016			

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**SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION**

<b>1. LICENSEE/LOCATION INSPECTED:</b> Department of Veterans Affairs Under Secretary for Health Washington, D.C. Location: New Mexico VA Health Care System Albuquerque, NM  REPORT NUMBER(S) 2016008	<b>2. NRC/REGIONAL OFFICE</b>  Region III U. S. Nuclear Regulatory Commission 2443 Warrenville Road, Suite 210 Lisle, IL 60532-4352
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<b>3. DOCKET NUMBER(S)</b> 030-34325	<b>4. LICENSE NUMBER(S)</b> 03-23853-01VA	<b>5. DATE(S) OF INSPECTION</b> August 22, 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	Janine F. Katanic, PhD, CHP		9/21/2016
BRANCH CHIEF	Patricia J. Pelke		9/21/2016

**Docket File Information**

**SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION**

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<b>3. DOCKET NUMBER(S)</b>  030-34325	<b>4. LICENSE NUMBER(S)</b>  03-23853-01VA	<b>5. DATE(S) OF INSPECTION</b>  August 22, 2016
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<b>6. INSPECTION PROCEDURES USED</b>  87134	<b>7. INSPECTION FOCUS AREAS</b>  02.01 - 02.09
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**SUPPLEMENTAL INSPECTION INFORMATION**

<b>1. PROGRAM CODE(S)</b>  02110	<b>2. PRIORITY</b>  2	<b>3. LICENSEE CONTACT</b>  Craig Adams, NHPP	<b>4. TELEPHONE NUMBER</b>  (501) 257-1573
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**Main Office Inspection**                      **Next Inspection Date:** \_\_\_\_\_  
 **Field Office Inspection**    Albuquerque, New Mexico  
 **Temporary Job Site Inspection**

**PROGRAM SCOPE**

This was a routine, unannounced inspection of the New Mexico VA Health Care System permit number 30-01747-02, a permittee under the Department of Veterans Affairs Master Materials License. The location inspected was the Raymond G. Murphy VA Medical Center located at 1501 San Pedro SE, Albuquerque, New Mexico.

The previous inspection by the National Health Physics Program (NHPP) was on December 22, 2014 - no violations were identified.

The last NRC inspection of this facility was on August 4, 2003 - no violations identified

As written, the permit is a broad scope medical. However, the inspection revealed that the actual activities performed by the permittee only consisted of 10 CFR 35.100, 35.200, and 35.300 activities. In May 2015, the permit was amended by the NHPP when the previous Radiation Safety Officer (RSO) retired. The amended permit named one of the nuclear medicine technologists to be the RSO, but because he lacked the qualifications to be the RSO on a broad scope medical, certain restrictions were put on the permit until a fully qualified RSO was named. These restrictions stated that research could not be conducted, medical use of iodine-131 (I-131) was limited to less than 33 mCi, and the Radiation Safety Committee (RSC) could not expand the scope of use under the permit or approve any Authorized Users (AUs) without the concurrence of the NHPP. A full-time RSO was hired and started in May 2016. The new RSO had a delegation of authority letter that was signed and dated 5/26/16. The permit was amended on 7/28/16, to name the new RSO and remove the restrictions. At the time of the inspection, the new RSO was still getting settled in the position, determining his duties, and trying to organize the radiation safety program files.

The Nuclear Medicine (NM) Department consisted of one large room with 5 dual head cameras and separate PET/CT imaging suite. Three of the dual-head cameras contained gadolinium-153 (Gd-153) transmission sources. Two cameras contained cobalt-57 and Gd-153 sources. There is a hot lab facility that contains a separate ISO Class 8 clean room with a ISO Class 5 hood that is used as a radiopharmacy when they are utilizing generators and compounding doses. An area on the 5th floor has two treadmill rooms. The PET/CT camera was received in early 2016 to replace an older unit. The new unit has a 2.26 mCi germanium-68 (Ge-68) Model CS27 phantom source and two Ge-68 rod sources Model LS-LA, 1.120 mCi each. Per the NHPP, these sources were authorized under permit condition 6.G.

**Docket File Information (Continued)**

**SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION**

1. LICENSEE/LOCATION INSPECTED:

Department of Veterans Affairs  
Under Secretary for Health  
Washington, D.C.  
Location: New Mexico VA Health Care System  
Albuquerque, NM

REPORT NUMBER(S) 2016008

2. NRC/REGIONAL OFFICE

Region III  
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3. DOCKET NUMBER(S)

030-34325

4. LICENSE NUMBER(S)

03-23853-01VA

5. DATE(S) OF INSPECTION

August 22, 2016

**PROGRAM SCOPE**

NM is normally staffed with six nuclear medicine technologists but two left and had not been replaced. At the time of the inspection, of the remaining four staff, one was on maternity leave and one was on personal leave, resulting in two technologists to perform the fairly large workload of daily imaging activities. The department performs between 5 - 12 imaging procedures per day. A 7.5 Ci molybdenum-99/technetium-99m generator is received weekly and is used for on-call work. The technologists normally compound their own radiopharmaceuticals but because the staff was down to two, they were instead ordering unit doses from an external radiopharmacy. In addition to technetium-99m, fluorine-18, indium-111, iodine-123, and xenon-133 are routinely used. There was a period of time when both dose calibrators were not working and the staff relied on unit doses and the measurements from the outside nuclear pharmacies. Both dose calibrators were replaced with Capintec CRC-55tRs. The permittee also had a Captus 3000 NaI probe with well counter and sufficient calibrated hand-held radiation survey instrumentation. There were five AUs approved to sign written directives (WDs). Four had been approved by the RSC many years ago and the current RSO could not find files for these AUs indicating that they had been approved by the RSC. Each was stated to be an AU for the University of New Mexico (UNM) (State of New Mexico broad scope licensee BM233-94). The permittee was encouraged by the inspector to contact UNM to try to re-create the AU files. One AU was approved by the RSC during the interim period when there was an acting RSO. The inspector verified that per permit condition, the NHPP was provided with the individual's training and qualification records and concurred on the approval of the individual as an AU.

In 2016 YTD, there had only been one I-131 procedure requiring a written directive (WD); in 2015 there were four I-131 procedures requiring a WD; in 2014 there were 11 I-131 procedures and two strontium-89 procedures requiring a WD. Patient release for activities over 33 mCi of I-131 were performed in accordance with the calculations and guidance in Reg Guide 8.39. The inspector reviewed 100 percent of WD's for CY 2016 to date, 2015, and 2014. This included all I-131 and the 2 strontium-89 treatments.

Although the facility had a fairly robust research program in the past, it appears to have subsided around 2012 and completely halted in 2014. Research had been performed in Buildings 10 and 11. The inspector observed Building 11 laboratories and did not identify any radioactive sources. The RSO possessed some records to indicate that the areas had been decommissioned. The RSO was encouraged by the inspector to keep looking through the former RSO's files to more fully develop a decommissioning file for the facility. The inspector also visited Building 18, which is a storage garage for radioactive waste. The garage contained some recent decay-in-storage materials from the NM department, as well as nine 55-gallon drums filled with items such as test tubes from the former research program. A quote had been received to dispose of the drums. Based on the inspector's observations and interviews of staff, it does not appear that the permittee has plans to have maintain an active research program.

**Docket File Information (Continued)**

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**PROGRAM SCOPE**

The permittee was encouraged by the inspector to ascertain or characterize, through measurements or historical records, the contents of a locked Knaack box (also located in the garage) for which the key could not be located. If necessary, the contents could perhaps be disposed at the same time as the drums. The RSC minutes were reviewed. The Chair of the RSC was interviewed. The RSC met quarterly and reviewed the results of program audits and dosimetry results. Doses to individuals involved with permitted activities were reviewed. For 2015, the highest doses observed were 760 mrem DDE, 769 mrem LDE, and 771 mrem SDE, with the highest extremity being 9430 mrem, consistent with radiopharmaceutical compounding activities. Dose to the declared pregnant woman was tracked/recorded. There were procedures for the conduct of RSC meetings, but they had not been revised to reflect the current status of the program. The new RSO was in the process of revising this and other radiation safety procedures in the radiation safety manual.

Radiation surveys were taken of areas of radioactive materials use and storage. All readings were in compliance with regulatory requirements and consistent with permittee measurements and postings. Instruments used: RadEyeG, NRC tag 46791G, serial 13420, cal due 10/27/16; Ludlum 2401-P, NRC tag 21193G, serial 197188, cal due 4/5/17.

Within the scope of the inspection, no violations were noted.