NRC FORM 591M PART 1 (07-2012) 10 CFR 2.201

U.S. NUCLEAR REGULATORY COMMISSION

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED	2. NRC/REGIONAL OFFICE
Lester E. Cox Medical Center 1423 N. Jefferson Springfield, MO 65802 REPORT NUMBER(S) 2016001	Region III U. S. Nuclear Regulatory Commission 2443 Warrenville Road, Suite 210 Lisle, IL 60532-4352

3. DOCKET NUMBER(S)	4. LICENSE NUMBER(S)	5. DATE(S) OF INSPECTION
030-09784	24-01143-06	November 30, 2016 to January 3, 2017.

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 violations(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)

1) Contrary to Title 10 of the Code of Federal Regulations (CFR) 35.2075 (a) and (c), from November 2013 to November 2016, the licensee failed to retain a record of the basis for authorizing the release of an individual in accordance with 10 CFR 35.75 for 3 years after the date of release of the individual. Specifically, the licensee did not retain the records for the release criteria of any of its iodine-131 administrations during this time period.

continue next page

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	Ken Wohlt, RSO		1/9/17
NRC INSPECTOR	Luis Nieves Folch		1/4/17
BRANCH CHIEF	Aaron T. McCraw		1/4/17

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(Continued)

The cause of the violation was that the licensee was not aware of the requirement. As corrective action, the Radiation Safety Officer performed a general calculation using Regulatory Guide 8.39 to calculate what is the maximum amount they can administer and release the patient. Also the licensee has retrained the staff to be aware of the release criteria requirement.

2) Contrary to10 CFR 20.1802, on November 30, 2016, the licensee failed to control and maintain constant surveillance of licensed material that was in a controlled or unrestricted area and that was not in storage. Specifically, the Nuclear Medicine Technologists (NMTs) licensee left three doses, totaling 30 mCi, of technetium-99m outside a patient room where the NMT's could not maintain constant surveillance and control while they were administering a dose to the patient.

The cause of the violation was the NMTs', misunderstanding of what constitutes adequate surveillance. As corrective action, the Radiation Safety Officer retrained the NMTs on what constitutes adequate surveillance.

NRC FORM 591M PART 3
(07-2012)
10 CFR 2.201

U.S. NUCLEAR REGULATORY COMMISSION

Docket File Information

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6. INSPECTION PROCEDURES USED	7. INSPECTION FOCUS AREAS
87131	All

SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM CODE(S)	2. PRIORITY	3. LICENSEE CONTACT	4. TELEPHONE NUMBER
02240	2	Kenneth W. Wohlt, RSO	(417) 269-5309

☐ Main Office Inspection Next Inspection Date: November 30, 2018

☑ Field Office Inspection 3901 S. Fremont, 3801, and 3850 National

☐ Temporary Job Site Inspection

PROGRAM SCOPE

This was a routine unannounced inspection of a regional hospital authorized to use byproduct material under 10 CFR 35.100, 200, 300, 400, 600 and 1000 at its campus in Springfield, Missouri. At the time of the inspection, the licensee performed a comprehensive spectrum of diagnostic and therapeutic administrations of radiopharmaceuticals at the 3801 South National address, in addition to approximately 45 administration of Y-90 Sir-Spheres in 2016. The licensee performed approximately 40 fractionated breast and gynecological HDR procedures and 50 temporary or permanent seed implant procedures annually at the 3850 South National address. The licensee also performed administrations of PET radiopharmaceuticals at the 3901 South Fremont address.

PERFORMANCE OBSERVATIONS

The inspector toured the facilities to evaluate the licensee's measures for materials security, hazard communication, and exposure control. The inspector observed one fraction of an HDR treatment in addition to the preparation and administration of one GI bleed, one HIDA scan, and one cardiac rest test. The inspector conducted independent and confirmatory surveys, and found no residual contamination or exposures to members of public in excess of regulatory limits. The licensee's nuclear medicine and radiology staff demonstrated implementation of procedures for package receipt, waste handling, and administration of therapeutic radiopharmaceuticals and Sir-Spheres. The licensee's radiation oncology staff also demonstrated HDR spot checks and full calibrations, in addition to treatment planning and verification for HDR, LDR, and permanent implant brachytherapy.

The inspector reviewed the licensee's records for administration of byproduct material requiring a written directive, including numerous I-131 and Y-90 Sir-Sphere therapies, as well as a selection of LDR and permanent implant brachytherapy treatments performed since the last inspection. The inspector also reviewed a selection of nuclear medicine records, personnel dosimetry, quarterly consultant's audits, and RSC meeting minutes.

Two violations of NRC requirements were identified as a result of this inspection, as included in Part 1.

Nieves Folch, Luis

From: Nieves Folch, Luis
Sent: Wednesday, January 04, 2017 1:33 PM
To: 'Wohlt,Ken'
Subject: NRC 591 report
Attachments: image2017-01-04-141159.pdf

Dear Mr. Wohlt,

This message is to send you a 591 form with the 2 severity level 4 violations identified during the inspection conducted on December 1, 2016. Because we wrote the violations on a 591 we need you to sign the first page were it says 'LICENSEE'S REPERESENTATIVE" accepting the violations and send it back to me, unless you want to dispute the violations. After you send it back sign the NRC does not require any other correspondence on your part.

In accordance with Title 10 of the Code of Federal Regulations 2.390 of the NRC's "Rules of Practice," a copy of this message 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.
Please feel free to contact me if you have any questions regarding this correspondence.

Thank you,

Luis Nieves
Health Physicist
U.S. Nuclear Regulatory Commission
Division of Nuclear Materials Safety
(630) 829-9571