

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

<p>1. LICENSEE/LOCATION INSPECTED:</p> <p>Truman Medical Center 2301 Holmes Street Department of Radiology Kansas City, MO 64108</p> <p>REPORT NUMBER(S) 2017001</p>	<p>2. NRC/REGIONAL OFFICE</p> <p>Region III U. S. Nuclear Regulatory Commission 2443 Warrenville Road, Suite 210 Lisle, IL 60532-4352</p>
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<p>3. DOCKET NUMBER(S)</p> <p>030-30130</p>	<p>4. LICENSE NUMBER(S)</p> <p>24-25816-01</p>	<p>5. DATE(S) OF INSPECTION</p> <p>March 2², 2017</p>
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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:

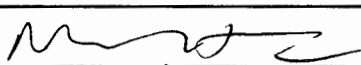
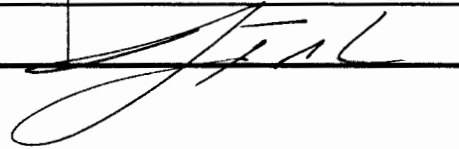
- 1. Based on the inspection findings, no violations were identified.
- 2. Previous violation(s) closed.
- 3. The violation(s), specifically described to you by the inspector as non-cited violations, are not being cited because they were self-identified, non-repetitive, and corrective action was or is 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	Navid Tehrani		3/22/17
BRANCH CHIEF	Aaron McCraw		4/11/17

Docket File Information

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Truman Medical Center
2301 Holmes Street
Department of Radiology
Kansas City, MO 64108

REPORT NUMBER(S) 2017001

2. NRC/REGIONAL OFFICE

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

3. DOCKET NUMBER(S)

030-30130

4. LICENSE NUMBER(S)

24-25816-01

5. DATE(S) OF INSPECTION

March 22, 2017

6. INSPECTION PROCEDURES USED

87131

7. INSPECTION FOCUS AREAS

All

SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM CODE(S)

02120

2. PRIORITY

3

3. LICENSEE CONTACT

Amber Johnson - Lead NMT

4. TELEPHONE NUMBER

(816) 404-0760

 Main Office Inspection

Next Inspection Date: 02/22/2020

 Field Office Inspection Temporary Job Site Inspection

PROGRAM SCOPE

This was an unannounced, routine inspection of a 260-bed medical institution that performed medical procedures pertaining to diagnostic testing authorized to use any byproduct material for any study permitted by 10 CFR 35.100, 35.200, and 35.300, at the location specified on the license.

The nuclear medicine department was staffed with three full-time and one part-time nuclear medicine technologists (NMT) who perform an average of 110-112 diagnostic studies a month (Monday - Friday), using only unit doses received from a local nuclear pharmacy. The licensee performed 3-4 iodine-131 administrations requiring a written directive, monthly. All waste was either held for decay-in-storage (DIS) or returned to the nuclear pharmacy as limited quantity shipments

PERFORMANCE OBSERVATIONS

The inspector toured the nuclear medicine department to evaluate the licensee's measures for materials security, hazard communication, and exposure control. The inspector observed the preparation and administration of one gastric empty study. The inspector conducted independent surveys and found no exposures to members of the public distinguishable from background. The technologist on staff demonstrated implementation of procedures for package receipt, area surveys, spill response, and waste handling. Through these demonstrations and other discussions, the technologists on staff demonstrated adequate knowledge of radiation protection principles, licensee procedures and NRC requirements.

The inspector also reviewed a selection of licensee records for instrument quality control, package receipt, dose administration, area surveys, decay-in-storage waste handling, dosimetry records, sealed source inventory and leak testing, written directives, Radiation Safety Committee (RSC) notes, and quarterly audits of the radiation safety program.

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