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
Parkland Health Center 1101 West Liberty Farmington, MO 63640 REPORT NUMBER(S) 2017001	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
030-11341	24-16616-01	April 19, 2017 w/ final exit on May 2, 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)

Title of the Code of Federal Regulations (CFR) Section 20.1501(a) requires that each licensee make or cause to be made, surveys that may be necessary to comply with the regulations in this part; and are reasonable under the circumstances to evaluate the magnitude and extent of radiation levels; and concentrations or quantities of residual radioactivity; and the potential radiological hazards of the radiation levels and residual radioactivity detected.

Contrary to the above, as of April 19, 2017, the licensee routinely failed to perform surveys of a microwave located in the staff's lunch area to verify it was not contaminated after being used to prepare food containing radioactive materials for diagnostic nuclear medicine purposes. Specifically, the microwave was also used by the staff to heat their own food and drink.

Continued on 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	Kenneth Miller	Kenneth Miller	5/5/17
NRC INSPECTOR	Zahid Sulaiman, Health Physicist	Zahid Sulaiman	5/4/17
BRANCH CHIEF	Aaron T. McCraw, Chief, MIB		5/4/17

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED:	2. NRC/REGIONAL OFFICE
Parkland Health Center 1101 West Liberty Farmington, MO 63640 REPORT NUMBER(S) 2017001	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
030-11341	24-16616-01	April 19, 2017 w/ final exit on May 2, 2017

(Continued)

The inspector determined that the root cause of the violation was the licensee's oversight of this area of use. As a corrective action, as of April 28, 2017, the licensee obtained a new microwave dedicated only for the preparation of food containing radioactive materials, and it will be confined to the nuclear medicine area.

This is a Severity Level IV violation, in accordance with NRC Enforcement Policy, Section 6.7.

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

U.S. NUCLEAR REGULATORY COMMISSION

Docket File Information

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED:	2. NRC/REGIONAL OFFICE
Parkland Health Center 1101 West Liberty Farmington, MO 63640 REPORT NUMBER(S) 2017001	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
030-11341	24-16616-01	April 19, 2017 w/ final exit on May 2, 2017

6. INSPECTION PROCEDURES USED	7. INSPECTION FOCUS AREAS
87131	03.01-03.07

SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM CODE(S)	2. PRIORITY	3. LICENSEE CONTACT	4. TELEPHONE NUMBER
02120	3	Kenneth Miller, M.D., RSO	(573) 760-8042

☑ Main Office Inspection Next Inspection Date: 04/19/2020

☐ Field Office Inspection _____

☐ Temporary Job Site Inspection _____

PROGRAM SCOPE

This was a routine unannounced inspection of a 130-bed community hospital that was authorized to use licensed materials under 10 CFR 35.100, 35.200, and 35.300. The nuclear medicine department was staffed with three full-time nuclear medicine technologists (NMT) who performed approximately 200 diagnostic procedures monthly, primarily cardiac stress tests, HIDA, bone scans, lung scans using DTPA or MAA, gastric emptyings, and other diagnostic procedures. The licensee also performed approximately three iodine-131 (I-131) therapies annually. The licensee received unit doses, and I-131 in capsule form from a licensed radiopharmacy.

Performance Observations

The inspection consisted of interviews with select licensee personnel; review of select records; tours of the nuclear medicine department; and independent measurements. At the time of inspection, no licensed activities were conducted. The inspector: (1) observed the NMT conduct a physical inventory of sealed sources, and all sources were accounted for; (2) had the NMT demonstrate the dose calibrator constancy check, package receipt and check-in procedures, the end of the day daily area surveys and weekly wipe test, and proper handling of radioactive waste and disposal procedures. The inspector reviewed four written directives for I-131 diagnostic or therapy procedures, with no issues noted. The inspector reviewed the following records: quarterly program audits conducted by an outside consultant, package receipts, waste disposal records, daily surveys and weekly wipes test results, linearity and accuracy of the dose calibrator, sealed source inventory and leak tests, and DOT Hazmat training. The inspector also reviewed the dosimetry records for 2014, 2015, and 2016, indicating the maximum annual dose to be 319 mrem - DDE, and 1320 mrem - SDE. The inspector performed independent radiation measurements in each functional area that were consistent with licensee survey records and within regulatory limits.

The inspector identified one Severity Level IV violation of 10 CFR 20.1501(a). The licensee routinely failed to perform surveys of a microwave located in the staff's lunch area used to prepare food containing radioactive materials for diagnostic nuclear medicine purposes. Specifically, the microwave was also used by the staff to heat their own food and drink. The violation, root cause, and corrective actions are described in Parts 1 & 2 of this form.