

Official Record

FEB 08 1990

Docket No. 030-12343
License No. 45-17199-01

Humana Hospital Greenbrier Valley
ATTN: Mr. Greg L. Gibson
Executive Director
P. O. Box 497
Ronceverte, WV 24970

Gentlemen:

SUBJECT: ENFORCEMENT CONFERENCE SUMMARY (NRC OFFICE OF
INVESTIGATION REPORT NO. 02-85-016)

This letter refers to the Enforcement Conference held at our request on January 24, 1990. The issues discussed at this conference related to the findings of an NRC Investigation, a synopsis of which was sent to you on January 12, 1990. The findings pertained to the accuracy of information submitted to the NRC. A summary and list of attendees are enclosed.

We are continuing our review of these issues to determine the appropriate enforcement action.

In accordance with Section 2.790 of the NRC's "Rules of Practice," Part 2, Title 10, Code of Federal Regulations, a copy of this letter and its enclosures will be placed in the NRC Public Document Room.

Should you have any questions concerning this matter, please contact us.

Sincerely,

ORIGINAL SIGNED BY
J. PHILLIP STOHR
J. Philip Stohr, Director
Division of Radiation Safety
and Safeguards

Enclosures:

- 1. Enforcement Conference Summary
- 2. List of Attendees

cc w/enclosures:
State of West Virginia

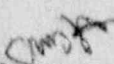


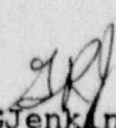
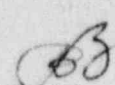

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Enclosure 1

ENFORCEMENT CONFERENCE SUMMARY

On January 24, 1990, the attendees listed in Enclosure 2 met at Humana Hospital Greenbrier Valley to discuss the findings of the NRC Investigation contained in a report issued on July 24, 1987. The findings pertained to the submission of a license amendment request to the NRC which contained false qualification data for a physician.

NRC representatives discussed the seriousness of providing false information to the NRC, and reviewed the findings of the NRC Office of Investigations report. NRC representatives also explained the NRC Enforcement Policy.

Licensee representatives reviewed the circumstances surrounding the submittal of the physician's qualifications to the NRC. Licensee representatives stated that the physician was never involved in nuclear medicine at the hospital and if the authorized user was not available then nuclear medicine studies were not performed. The licensee also stated that the hospital's executive committee met and discussed the merits of having the physician authorized to perform nuclear medicine procedures, but probably were not aware of problems with the physician's qualifications. The licensee stated that the physician's privileges at the hospital were immediately suspended when the question of a false preceptor statement was brought to their attention.

The licensee reviewed the actions that have been taken to prevent a recurrence. These actions included changing the by-laws of the corporation to modify the credentialing procedure and training the executive committee and staff on the credentialing procedure and quality assurance requirements. The procedure now requires verification of education received, contact of all states where an individual is licensed, and an independent check of credentials by an outside agency. The licensee also stated that a similar procedure was in place for increasing the privileges of a physician at the hospital.

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ENCLOSURE 2

LIST OF ATTENDEES

NRC Attendees: J. P. Stohr, Director, Division of Radiation
Safety and Safeguards (DRSS), Region II
G. R. Jenkins, Director, Enforcement and
Investigation Coordination Staff, Region II
C. M. Hosey, Chief, Nuclear Materials Safety
Section, (DRSS), Region II
R. J. Goddard, Regional Counsel, Region II

Licensee Attendees: G. Gibson, Executive Director
S. Ward, Jr., Associate Executive Director
T. Lesko, MD, Chief, Department of Radiology
and Nuclear Medicine
A. Elswick, Technical Director, Nuclear
Medicine
L. Anthony, Physics Consultant