

DEC 19 1989

In Reply Refer To:  
License: 35-13157-01  
Docket: 30-02922/89-01

Muskogee Regional Medical Center  
ATTN: William R. Kennedy, CEO  
300 Rockefeller Drive  
Muskogee, Oklahoma 74401

Gentlemen:

This acknowledges receipt of your letter dated November 20, 1989, in response to our letter and attached Notice of Violation dated November 9, 1989. We have reviewed your reply and find that additional information is needed.

Your response to this letter should address those specific items regarding Violations 4, 5, and 6 as noted below. You should provide your response to this office within 10 days of the receipt of this letter.

Item 4: Your response indicates that you do not frequently use the 1000 mr/hr scale on your Victoreen Model 740-F survey instrument. You should note that although this may be the case during routine use, nonetheless, you are required to maintain a calibrated radiation measurement survey instrument capable of measuring dose rates over the range of 1 millirem per hour to 1000 millirem per hour. The requirements for calibration of these instruments are described in 10 CFR 35.51. Your response indicates that your corrective action has not adequately addressed this violation. Therefore, you are required to provide additional information describing (1) further actions taken to ensure that your instrument calibrations meet regulatory standards, (2) the corrective steps that will be taken to avoid further violation, and (3) the date when full compliance will be achieved.

Items 5 and 6: Although your response indicates that the violations observed during the inspection have been corrected, you have not addressed how you propose to prevent recurrence of these violations. Your response should identify those specific actions implemented to prevent future recurrence of similar violations.

Should you have any questions concerning this matter please contact Linda L. Kasner at (817) 860-8100.

Sincerely,

Original Signed By:  
LAWRENCE A. YANDELL  
A. Bill Beach, Director  
Division of Radiation Safety  
and Safeguards

cc:  
Oklahoma Radiation Control Program Director

bcc: (see next page)

RIV:NMIS  
LLKasner:ch  
12/19/89

C:NMIS  
CLCain  
12/19/89

AD:DRSS  
ABBeach  
12/19/89

IE-07  
11

bcc w/copy of licensee letter:

DMB - Original (IE-07)

RDMartin

ABBeach

LAYandell

LShea, RM/ALF (AR-2015)

CLCain

RJEverett

LLKasner

NMSB

MIS System

RIV Files (2)

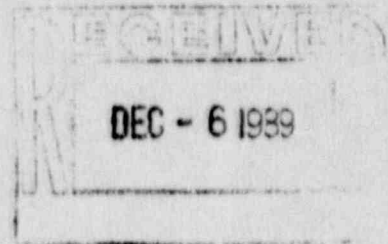
RSTS Operator



**Muskogee Regional  
Medical Center**

300 Rockefeller Drive  
Muskogee, Oklahoma 74401  
918/682-5501

*Vitality for Life*



November 20, 1989

U.S.N.R.C., Region IV  
611 Ryan Plaza Drive, Suite 1000  
Arlington, Texas 74012

RE: License No. 35-13157-01  
Docket: 30-02922/89-01

Dear Licensing Engineer:

This is in response to your November 9, 1989 correspondence concerning the October 6, 1989 inspection evaluation. Each response uses your numbering system.

1. Since one of the radiologists other than the R.S.O. was representing him on the Radiation Safety Committee, he was not present during the annual A.L.A.R.A. review which is a briefing of management on the entire nuclear program. Compliance with this feature is now complete as per item "2" below.
2. Since the physicians covering radiology services at this facility are a group that rotates coverage among physicians the R.S.O. was present on Committee meeting dates only occasionally. The quarterly meetings are now scheduled three months in advance and he has agreed to always be present. Compliance with this feature is complete.
3. This requirement was overlooked during quarterly linearity tests. We have done a linearity decay to the 10 uCi activity. Quarterly linearity measurements are done twice using the approved transmission method; once with a large activity and another with approximately 2 mCi that attenuates to less than 10 uCi indicated activity. Compliance with this feature is complete.
4. Since radiation levels at this facility are not needed above 100 mR/Hr, the 1000 mR/Hr scale was never used. That scale was, therefore, calibrated only at one point. The 1000 mR/Hr scale has been taped over. All scales up to a maximum of 300 mR/Hr are now being calibrated using two points on each scale. Compliance with this feature is complete.

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IE07

U.S.N.R.C., Region IV  
November 20, 1989  
Page 2

5. Compliance with this feature was overlooked. The brachytherapy source inventory and routine radiation survey of the storage cabinet are now being made and recorded. Compliance with this feature is complete.
6. A system of recording radioactive doses has been in practice here since the original license was approved. The system did not change when the regulations changed. We are currently recording all radioactive material in full compliance with specifications in 10 CFR 35.53 (C). Compliance with this feature is complete.

Each of these violations have been corrected. Routine compliance will be verified each quarter during the record keeping audit.

If additional information is needed, please first contact our physicist, Mike Morris at (405) 528-3501.

Sincerely,



Bill R. Kennedy  
Chief Executive Officer  
Muskogee Regional Medical Center



NOV - 9 1989

In Reply Refer To:  
License: 35-13157-01  
Docket: 30-02922/89-01

Muskogee Regional Medical Center  
ATTN: William R. Kennedy, C.E.O.  
300 Rockefeller Drive  
Muskogee, Oklahoma 74401

Gentlemen:

This refers to the routine, unannounced radiation safety inspection conducted by Ms. L. L. Kasner of this office on October 6, 1989, of the activities authorized by NRC Byproduct Material License 35-13157-01, and to the discussion of our findings held by the inspector with members of your staff at the conclusion of the inspection.

The inspection was an examination of the activities conducted under the license as they relate to radiation safety and to compliance with the Commission's rules and regulations and the conditions of the license. The inspection consisted of selective examinations of procedures and representative records, interviews of personnel, and observations by the inspector.

During this inspection, the inspector reviewed the organization of the nuclear medicine department and the roles of individuals named as authorized users under the license. The inspector observed that several individual's responsibilities within the program had changed during this inspection period, but that key individuals such as the Radiation Safety Officer (RSO) had maintained their appointed positions. The inspector also reviewed the roles of your consulting medical physicists and the services they provide with respect to the radiation safety program and its management.

The inspector observed that individuals in your program, particularly those delegated as members of the Radiation Safety Committee (RSC), appeared to communicate effectively and generally performed program audits that were directed to safety issues. The audits performed by your consulting physicist appeared to have been useful in identifying procedures and program areas where radiation safety practice could be improved. However, it was observed that your RSO had been absent from the majority of the RSC meetings and had failed to provide management with annual program reviews during this inspection period. Although the RSO may delegate tasks to alternate individuals as you have done with your consulting physicist, it must be emphasized that the RSO is responsible for the overall effectiveness of the radiation safety program. This responsibility includes oversight of the program to coordinate the efforts of those individuals performing tasks related to the program, directing audits that adequately identify safety issues or areas of noncompliance, and providing guidance to management. The NRC expects the RSO to participate in management audits and committee meetings where policies and procedures related to the radiation safety program are developed or reviewed.

\*RIV:NMIS  
LLKasner:  
/ /89

\*C:NMIS  
CLCain  
/ /89

D. DRSS  
ABB  
11/9 /89

\*Previously Concurred

IE-07

During this inspection, certain of your activities were found not to be conducted in full compliance with NRC requirements. Consequently, you are required to respond to this matter in writing, in accordance with the provisions of Section 2.201 of the NRC's "Rules of Practice," Part 2, Title 10, Code of Federal Regulations. Your response should be based on the specifics contained in the Notice of Violation enclosed with this letter.

The response directed by this letter and the accompanying Notice is not subject to the clearance procedures of the Office of Management and Budget as required by the Paperwork Reduction Act of 1980, PL 96-511.

Should you have any questions concerning this letter, we will be pleased to discuss them with you.

Sincerely,

*Original Signed By:*  
**A. B. BEACH**

A. Bill Beach, Director  
Division of Radiation Safety  
and Safeguards

Enclosure:

Appendix - Notice of Violation

cc:

Oklahoma Radiation Control Program Director

bcc:

DMB - Original (IE-07)

RD Martin

AB Beach

LAYandell

LShea, RM/ALF (AR-2015)

\*CLCain

\*RJEverett

\*LLKasner

\*NMIS

\*MIS System

\*RIV Files (2)

\*RSTS Operator

\*REHall, URFO

\*W/766

IE-07

APPENDIX

NOTICE OF VIOLATION

Muskogee Regional Medical Center  
Muskogee, Oklahoma

Docket: 30-02922/89-01  
License: 35-13157-01

During an NRC inspection conducted on October 6, 1989, violations of NRC requirements were identified. In accordance with the "General Statement of Policy and Procedure for NRC Enforcement Actions," 10 CFR Part 2, Appendix C (1989) (Enforcement Policy), the violations are listed below:

1. 10 CFR 35.21(b)(3) requires that the Radiation Safety Officer (RSO) brief management once each year on the byproduct material program.

Contrary to the above, during interviews with the licensee's management representative and RSO conducted on October 6, 1989, the inspector determined that annual management briefings had not been conducted during the period from January 1987 through October 1989.

This is a Severity Level IV violation. (Supplement VI)

2. 10 CFR 35.22(a)(3) requires that in order to establish a quorum and to conduct business, at least one-half of the Radiation Safety Committee's (RSC) membership must be present, including the RSO and the management's representative.

Contrary to the above, during the inspection conducted on October 6, 1989, the inspector determined that the RSO had been absent from all but two of the quarterly RSC meetings conducted during the period from November 1986 through July 1989.

This is a Severity Level IV violation. (Supplement VI)

3. 10 CFR 35.50(b)(3) requires, in part, that a licensee shall test each dose calibrator for linearity upon installation and at least quarterly thereafter over the range of its use between the highest dosage that will be administered to a patient and 10 microcuries.

Contrary to the above, the inspector observed that quarterly linearity tests performed on the licensee's Capintec dose calibrator were performed using source activities ranging from 200 millicuries to 450 microcuries during the period from July 1986 until the date of the inspection. The licensee did not test the instrument for linearity at activity levels below 450 microcuries even though they routinely administered patient doses as low as 15 microcuries.

This is a Severity Level IV violation. (Supplement VI)

4. 10 CFR 35.51(a) requires, in part, that a licensee shall calibrate survey instruments annually and following repair. This calibration shall include

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two separate readings on all scales with readings up to 1000 millirem per hour.

Contrary to the above, the licensee had failed to perform calibrations on one survey instrument, Victoreen Model 740-F, Serial Number 2209, that included two points on each scale reading up to 1000 millirem per hour. The remaining scales on the instrument had been properly calibrated.

This is a Severity Level IV violation. (Supplement VI)

5. 10 CFR 35.59(g) and (h) require, in part, that a licensee shall  
(1) conduct quarterly physical inventories of brachytherapy sources; and  
(2) measure the ambient dose rates quarterly in all areas where such sources are stored.

Contrary to the above, the inspector determined that during the period from July 1986 until the date of this inspection, physical inventories of 18 cesium-137 brachytherapy sources and surveys of the area used to store brachytherapy sources had not been performed.

This is a Severity Level IV violation. (Supplement VI)

6. 10 CFR 35.53(c) requires that records of the measurement of radiopharmaceutical dosages contain: (1) generic name, trade name, or abbreviation of the radiopharmaceutical, its lot number, and expiration dates and the radionuclide; (2) patient's name, and identification number if one has been assigned; (3) prescribed dosage and activity of the dosage at the time of measurement, or a notation that the total activity is less than 10 microcuries; (4) date and time of the measurement; and (5) initials of the individual who made the record.

Contrary to the above, during the inspection conducted on October 6, 1989, the inspector observed that records of the measurement of radiopharmaceutical doses did not include: (1) the name of the radiopharmaceutical; (2) the lot number; and (3) the expiration date of the radionuclide.

This is a Severity Level V violation. (Supplement VI)

Pursuant to the provisions of 10 CFR 2.201, Muskogee Regional Medical Center is hereby required to submit to this office, within 30 days of the date of the letter transmitting this Notice, a written statement or explanation in reply, including for each violation: (1) the reason for the violation if admitted, (2) the corrective steps which have been taken and the results achieved, (3) the corrective steps which will be taken to avoid further violations, and (4) the date when full compliance will be achieved. Where good cause is shown, consideration will be given to extending the response time.

Dated at Arlington, Texas,  
this 9th day of November 1989



**INSPECTOR'S REPORT**  
Office of Inspection and Enforcement

~~Kasner, Linda L~~  
REVIEWER  
C.L. Cain CXC

## SPECTORS

LICENSEE/VENDOR		TRANSACTION TYPE		DOCKET NO. IS <u>000000</u> OF LICENSE NO. (BY PRODUCT) 113 <u>000000</u>		REPORT		NEXT INSP. DATE			
MUSKOGEE REGIONAL MEDICAL CENTER		X 1 - INSERT		01300291212		8901		0492			
		M - MODIFY									
		D - DELETE									
		R - REPLACE									
		1		2		14		15			
PERIOD OF INVESTIGATION/INSPECTION				INSPECTION PERFORMED BY				ORGANIZATION CODE (IF REGION/HQ CONDUCTING ACTIVITY) (SEE LEAD) 0530 (MUSKOGEE REGIONAL MEDICAL CENTER) (BY CODE) 113			
FROM		TO		X 1 - REGIONAL OFFICE STAFF		OTHER		REGION		DIVISION	
2 DAY 1 YR		MO. DAY 1 YR		2 - RESIDENT INSPECTOR				4		3	
100689		100689		3 - PERFORMANCE APPRAISAL TEAM				4		3	
30		31		30				33		34	

REGIONAL ACTION (Check one box only)		TYPE OF ACTIVITY CONDUCTED (Check one box only)			
<input type="checkbox"/> = NRC FORM 801	<input checked="" type="checkbox"/> 02 = SAFETY	<input type="checkbox"/> 06 = MGMT VISIT	<input type="checkbox"/> 10 = PLANT SEC.	<input type="checkbox"/> 14 = INQUIRY	
<input type="checkbox"/> = REGIONAL OFFICE LETTER	<input type="checkbox"/> 03 = INCIDENT	<input type="checkbox"/> 07 = SPECIAL	<input type="checkbox"/> 11 = INVENT VER	<input type="checkbox"/> 15 = INVESTIGATION	
	<input type="checkbox"/> 04 = ENFORCEMENT	<input type="checkbox"/> 08 = VENDOR	<input type="checkbox"/> 12 = SHIPMENT/EXPORT		
	<input type="checkbox"/> 05 = MGMT AUDIT	<input type="checkbox"/> 09 = MAT ACCT.	<input type="checkbox"/> 13 = IMPORT		

INSPECTION INVESTIGATION FINDINGS NYS STATE POLICE OFFICE										TOTAL NUMBER OF VIOLATIONS AND DEVIATIONS				ENFORCEMENT CONFERENCE HELD				REPORT CONTAIN 2780 INFORMATION				LETTER OF REPORT TRANSMITTAL DATE			
B I C I D I																		NRC FORM 881 OR 881 LETTER ISSUED				REPORT SENT TO HQ FOR ACTION			
1 - CLEAR																									
2 - VIOLATION																									
3 - DEVIATION																									
4 - VIOLATION & DEVIATION																									
016																						110989			
38										40-41				42				43				44 49 50			

[illegible]

**INSPECTOR'S REPORT**  
(Continuation)

Office of Inspection and Enforcement

DOCKET NO. (8 digits) OR LICENSE NO. (BY PRODUCT) (13 digits)		REL. CRT		MODULE NUMBER	
03002922		NO.	SEC.	51871101016	
			A	VIOLATION SEVERITY OR DEVIATION	
			B	1 2 3 4 5 6	
			C	X	
			D		
				SITE RELATED	
				A C	
				B D	

VIOLATION OR DEVIATION (Enter up to 2400 characters for each NO. R. If the text is too short, use the number. If not, be necessary to paraphrase. Limit lines to 50 characters each.)

10 CFR 35.21(b)(3) requires that the Radiation Safety Officer (RSO) brief management once each year on the byproduct material program.

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INSPECTOR'S REPORT  
(Continuation)

Office of Inspection and Enforcement

DOCKET NO. (8 digits) OR LICENSE NO. (BY PRODUCT) (13 digits)		REPORT NO.		MODULE NUMBER		SITE RELATED
			SEC			
03002922		29101	A	587100	6	
			B			
			C			
			D			

VIOLATION OR DEVIATION (ENTER NC TO 2400 CHARACTER FOR EACH ROW. IF THE TEXT EXCEEDS THIS NUMBER, IT WILL BE NECESSARY TO PARTITION. LIMIT THIS TO 20 CHARACTERS EACH.)

10 CFR 35.22(a)(3) requires that in order to establish a quorum and to conduct business, at least one-half of the Radiation Safety Committee's (RSC) membership must be present, including the RSO and the management's representative.

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INSPECTOR'S REPORT  
(Continuation)

Office of Inspection and Enforcement

DOCKET NO. (8 digits) OR LICENSE NO. (BY PRODUCT) (13 digits)		REPORT		MODULE NUMBER	
		NO.	SEC.		
030029127		8901	A	5871100	
			B		
			C		
			D		

VIOLATION SEVERITY OR DEVIATION						SITE RELATED
1	2	3	4	5	6	
						A C B D
			X			

VIOLATION OR DEVIATION (Enter up to 2400 characters for each item. If the text exceeds this number, it will be necessary to paraphrase. Limit lines to 80 characters each.)

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Contrary to the above, the inspector observed that quarterly linearity tests performed on the licensee's Capintec dose calibrator were performed using source activities ranging from 200 millicuries to 450 microcuries during the period from July 1986 until the date of the inspection. The licensee did not test the instrument for linearity at activity levels below 450 microcuries even though they routinely administer patient doses as low as 15 microcuries.

## INSPECTOR'S REPORT

(Continuation)

Office of Inspection and Enforcement

DOCKET NO. (8 digits) OR LICENSE NO. (BY PRODUCT) (13 digits)		A. NO.		MODULE NUMBER		6	
03002922		8901		587100			
		A		VIOLATION SEVERITY OR DEVIATION		SITE RELATED	
		B		1 2 3 4 5 6		A C	
		C				B D	
		D					

VIOLATION OR DEVIATION (Enter up to 2400 characters for each item. If the entry exceeds this number, it will be necessary to paraphrase. Limit space to 60 characters each.)

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## INSPECTOR'S REPORT

(Continuation)

Office of Inspection and Enforcement

DOCKET NO. (8 digits) OR LICENSE NO. (BY PRODUCT) (13 digits)		AL. CT		MODULE NUMBER	
NO	SEC	NO	SEC		
230020	22	8410	1	587100	
			A	VIOLATION SEVERITY OR DEVIATION	
			B	1 2 3 4 5 6	
			C		
			D		

SITE RELATED	
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VIOLATION OR DEVIATION (Enter up to 2400 characters for each step. If the text exceeds this number, it will be necessary to paraphrase. Limit lines to 50 characters each.)

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18 cesium-137 brachytherapy sources and surveys of the area used to store  
brachytherapy sources had not been performed at quarterly intervals.



**INSPECTOR'S REPORT**  
 (Continuation)

Office of Inspection and Enforcement

DOCKET NO. (8 digits) OR LICENSE NO. (BY PRODUCT) (13 digits)		A		MODULE NUMBER		SITE RELATED A C B D
03502927		NO	SEC	5871001		
		A		VIOLATION SEVERITY OR DEVIATION		
		B		1 2 3 4 5 6		
		C				
		D				

VIOLATION OR DEVIATION (Enter up to 2400 characters for each item. If the text exceeds this number, it will be necessary to paraphrase. Limit lines to 80 characters each.)

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