

OFFICE OF THE PROVOST



August 11, 1989

Mr. A.B. Beach
Director
Division of Radiation Safety
and Safeguards
611 Ryan Plaza Drive, Suite 1000
Arlington, Texas 76011

Dear Mr. Beach,

In response to you letter dated July 13, 1939, regarding the June 26 Enforcement Conference held at the Region IV Office, I describe below some corrective measures which we have taken in respect to Nuclear Pharmacy at the University of Oklanoma Health Sciences Center.

We have just completed a three-day detailed audit of the entire Radiation Safety Program. I asked our Radiation Safety Committee to suggest names of persons who were best qualified to conduct such a comprehensive audit, and have engaged their first choice, Mr. Thomas Pitchford of the University of Missouri. Mr. Pitchford will report his findings and recommendations in written form to me, and I will forward a copy of the external audit report to your office. In addition, to address the issue of labeling radiopharmaceuticals, the product labels for the dispensed products are being hand corrected until new printed labels become available.

I have reviewed the Enforcement Conference Summary and note there are two statements that should be corrected. It is stated in the fourth paragraph that "management of the nuclear pharmacy radiation safety had been left to the pharmacy director". This statement is not correct, and should be amended to read, "day to day management of the nuclear pharmacy radiation safety program had been left to the pharmacy director." Also, on page 2 the last sentence states "The RSO further stated he did not routinely visit the pharmacy during these audits". This statement should be corrected to read "The RSO stated that he did routinely visit the pharmacy during these audits." I would appreciate the insertion of these clarifications and corrections.

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Dr. Ahluwalia has now developed an extensive list of items to be included in the monthly audit of the Nuclear Pharmacy program. In addition, we have developed a preliminary job description for the new position of Assistant Radiation Safety Officer. The audit list and the preliminary job description are attached.

If I may provide further information, please feel free to contact me.

Sincerely,

Clayton Rich, M.D.

Provost

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Attachments

cc: Thomas Godkins, M.P.H., Assistant to the Provost Bhagwat Ahluwalia, Ph.D., Radiation Safety Officer

NUCLEAR PHARMACY AUDIT CHECKLIST

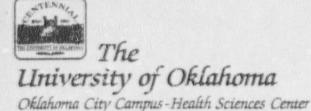
CTIVITIES:	IN COMPLIANCE:	YES	NO
HOOD VENTILATION			
a) Rm 139C Eas b) Rm 139C Wes c) Rm 139D d) Rm 139 HOT			
HOOD OPERABLE LEVI	I INDICATOR		
a) Rm 139C I b) Rm 139C V c) Rm 139D d) Rm 139 HG	Vest		
OUTSIDE RECEIVING CONTAINER, I	ock		
DISPENSING ACTIVIT a) SYRINGE SF b) GLOVES c) LABCOATS d) FOOD & DRI	HELD		
GENERATOR EJUTION			
SURVEY METER CALIF a) PACKAGE RECEIVIT b) OUTGOING PACKAGE c) OTHER SURVEY MET d) CHECK SOURCES e)	G SURVEY METER		
a) CONTAINER LABER b) CONTAINER SURVI c) CONTAINER SHIP			
CAR TRUNK BLOCKING, PA	ACKING & BRACING		
METAL BOXES WITH I	OAM IN CAR TRUNK COMPARIMENI"		
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AT THE TIME OF DIS	PATCH TRANSPORT INDEX"		
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OFF HOURS RECEIVED	G PROCEDURES		
WASTE CONTAINERS			
REFRIGERATORS			
OMMENTS:			
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			era Versasi nd.

PAGE TWO OF THREE

PALLEWALL	USER PRACTICES:	IN COMPLIANCE:	YES NO
USE	OF UNAUTHORISED RM		
USE	OR STORAGE OF RM IN UNRE	ESTRICTED AREA	
RM	PROVIDED TO UNAUTHORISED	STAFF	
PRE	SCENCE OF AUTHORISED USER		The state of the s
POSTING:			
POS	TING OF RADIOACTIVE MATER	RIAL SIGNS	
NRC	FORM 3		
NOT	TICE TO EMPLOYEES (Reg. Pa	rt 19, 20 etc.)	
PAL	IATION AREA SIGN		
EME	RGENCY PROCEDURES	N. NATORY ARROTTO CONTROL OF THE PROPERTY OF T	
RS	MANUAL, NRC Part 10, PROC	EDIRES	
TEST:			
DOS	E CALTERATOR #1 ACCURACY DAILY CONSTANCY		
DOS	E CALIBRATOR #2 ACCURACY DAILY CONSTANCY		
ARE	A SURVEY RECEIVING AREA WORK BENCH SINK DISPENSING HOOD DISTRIBUTION AREA GENEPATOR AREA STORAGE AREA WASTE CONTAINERS OTHER AREA		
COMMENTS:			
	Manager and Control of the Control o		
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PAGE THREE OF THREE

RECORDS	IN COMPLIANCE:	YES	NO
SEALED SOURCE WIPE RECORDS			
DOSE CALIBRATOR #1 DAILY CONSTANCY			******************
QUARTERLY LINEARITY HIGH RANGE LOW	RANGE		
DOSE CALIBRATOR #2 DAILY CONSTANCY QUARIFRLY LINEARITY			
Management and the control of the co	RANGE		
RADIOACTIVE WASTE DISPOSAL RECORDS			
DAILY RESULIS: Mo99	THE STATE OF THE S		
RECEIPT RECORDS		em. Statistica em la Carrella esta	
NUCLEAR PHARM RELATED MISADMINISTRATIONS			
DISTRIBUTION RECORDS			
ORDER APPROVAL RECORDS			
DAILY ROOM SURVEY RECORDS WEEKLY WIPE TEST RECORDS			
PERSONNEL EXPOSURE RECORDS			
PREVIOUS RSO INSPECTION REPORT			
BIO ASSAY RECORDS			MARTINE THE THE STATE OF THE STATE OF
OFF HOURS RECEIVING RECORDS			
STAFF TRAINING			
ALL ITEMS IN COMPLIANCE?	YES NO		
DEFICIENCIES IN PREVIOUS AUDIT? YES NO CORRECTED? YES NO			
COMMENTS:			MATERIA SULTE SULTENA
	-		
PERSON RECEIVING COPY OF REPORT:			***************************************
AUDITOR:			
RSO REVIEW AND COMMENTS:			-
			-
BA/RI-1989			



DEPARTMENT OF RADIOLOGICAL SCIENCES College of Medicine MEMORANDUM

TO:

Eugene Patterson, Ph.D.

Chairman

Radiation Safety Committee

FROM:

B. Wally Ahluwalia, Fh.D. Con ghl

Director, Office of Radiation Safety

DATE:

July 31, 1989

SUBJECT: OFFICE OF RADIATION SAFETY PERSONNEL AND TENTATIVE

SCHEDULE ASSISGNMENT OF ASSISTANT TO RSO

The following lists the staff of the Office of Radiation Safety. This includes the proposed additional position of Assistant RSO.

Radiation Safety Officer Assistant to the Radiation Safety Officer Radiation Safety Assistant Radiation Safety Secretary Medical Physics Assistant (Student 0.5 FTE)

Medical Physics Assistant (Student 0.5 FME)

The following is an outline of the job description for the new position of Assistant Radiation Safety Officer.

- a. Semi annual audit of all OUHSC Minilicenses.
- b. Monthly audit of Nuclear Pharmacy Medical Distribution license activities.
- C. Receipt audits of Nuclear Pharmacy.
- Monthly preparation of papers for RSC (with input from RSO).
- To assist Campus RSO in audit of Nuclear Medicine at OMH, OCMH, Therapy, Clinical Lab and etc.
- Final inspection and clearance of all areas released from radioactive material activity.
- Patient room survey. g.
- Assistance to RSO. h.
- i. Ancillary staff teaching.
- Overall responsibility of all OUHSC licenses in the absence of RSO from campus.

/db



UNITED STATES

NUCLEAR REGULATORY COMMISSION

REGION IV

611 RYAN PLAZA DRIVE, SUITE 1000 ARLINGTON, TEXAS 76011

JUL 1 3 1989

In Reply Refer To:

License: 35-03176-04MD Docket: 30-12750/89-02

EA: 89-128

University of Oklahoma Health Sciences Center ATTN: Clayton Rich, M.D.

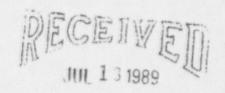
Provost and Vice President

for Health Sciences

P.O. Box 26901

Oklahoma City, Oklahoma 73190

Dear Dr. Rich:



PPOVOST'S OFFICE



ASSISTANT TO THE PROVOST

This refers to the Enforcement Conference held at Region IV's request in the Region IV office on June 26, 1989. This meeting related to activities authorized by NRC License No. 35-03176-04MD.

The subjects discussed at the meeting are described in the enclosed Enforcement Conference Summary. I feel the Enforcement Conference to have been beneficial for both your staff as well as NRC and appreciate your attendance and candor during the conference discussion. As indicated in the Summary, we have yet to notify you of the enforcement action to be taken.

This letter also acknowledges receipt of your letters dated June 23 and 30, 1989. I have forwarded your response to the Notice of Violation issued on June 15, 1989, for technical review. You will receive separate correspondence regarding your response and proposed corrective actions. I am pleased to note that you are proceeding with an independent audit of your radiation safety program. Please be advised that your review of the audit might suggest significant program changes that may require license amendment. These should be appropriately submitted for NRC review prior to implementation.

In response to your comment regarding the inspection record of the University's other licensed programs, I wish to emphasize two points, first, the lack of significant findings during the inspection of your other programs does not change NRC's opinion that management of your radiation safety program deserves careful review. Secondly, NRC does not expect licensees to rely on inspector identification of items of noncompliance or safety issues. We expect and encourage our licensees to develop programs that will provide objective evaluation of potential problem areas and initiate prompt corrective 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 will be placed in the NRC's Public Document Room.

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

Sincerely,

A. B. Beach, Director Division of Radiation Safety

and Safeguards

Enclosure: Enforcement Conference Summary w/Attachment

cc w/enclosure: Oklahoma Radiation Control Program Director

APPENDIX

ENFORCEMENT CONFERENCE SUMMARY

Licensee:

University of Oklahoma

Health Sciences Center

License No .:

35-03176-04MD

Docket:

30-12750

SUBJECT: ENFORCEMENT CONFERENCE TO DISCUSS NRC FINDINGS

On June 26, 1989, representatives of the University of Oklahoma Health Sciences Center (UOHSC) met with NRC personnel in the Region IV office to discuss apparent violations of NRC requirements as observed during an inspection conducted at the UOHSC nuclear pharmacy. The discussion included review of those corrective actions proposed or taken by the licensee as a result of the inspection.

The NRC staff presentation focused on those violations related to the manufacture and distribution of capsules containing iodine-131 that were not approved for human use by medical licensees, the inappropriate labeling of radiopharmaceuticals dispensed from the nuclear pharmacy, the inoperability and lack of charcoal filters in fume hoods used to process volatile liquid moderated iodine-131, and the Radiation Safety Officer's (RSO) and Radiation Safety Committee's (RSC) management of the licensee's program.

The licensee reviewed those corrective actions which have been implemented, including restructuring the reporting responsibilities of the RSO within the management organization, expanding the RSO's staff, and the use of leaded glass will shields to prevent future errors that the licensee identified as the root cause of a mislabeling incident resulting in seven diagnostic misadministrations at customer hospitals. The licensee has terminated the manufacture of iodine-131 capsules and noted that they are working on an amendment request for this activity to be submitted for NRC review. The licensee reported that they had not taken action to correct a violation related to a distribution statement printed on labels of products dispensed from the pharmacy.

The licensee then reviewed the RSO's management of the radiation safety program as related to the nuclear pharmacy. The RSO stated that, due to the variety of activities conducted under the University's broad license and the number of individuals involved in the program, management of the nuclear pharmacy radiation safety program had been left to the pharmacy director. The RSO explained that, although internal audits were performed at weekly or semiannual intervals, the audit did not include an evaluation of activities conducted within the pharmacy. The audits focused on monitoring byproduct material receipt and disposal without attention to its use or application. The RSO

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further stated that he did not routinely visit the pharmacy during these audits and that he had been unaware of the use of two fume hoods to store, label, and compound radioiodine. The licensee plans to add an additional full-time employee to the RSO's staff but could not confirm how the additional staff member would impact the nuclear pharmacy's radiation safety program. The NRC staff expressed their concern that management functions of the RSC and RSO had been inappropriately delegated to other individuals and that significant areas of the nuclear pharmacy program were not being properly evaluated. The NRC staff emphasized the need for the licensee to review the conditions of the license and to adequately evaluate the activities conducted in their programs to ensure that all are authorized under the license. During the conference the Provost expressed his concern regarding the significance of these deficiencies and proposed conducting an independent audit of the program by outside consultant.

The NRC staff explained that a decision would be made as to the appropriate enforcement action and that the licensee would be notified.

Linda L. Kasner Health Physicist

Attachment: Attendance List

ATTACHMENT

Enforcement Conference Attendance List
University of Oklahoma Health Sciences Center

Arlington, Texas

June 26, 1989

University of Oklahoma Health Sciences Center

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Clayton Rich, M.D., Provost and Vice President, Health Sciences Tom Godkins, Assistant to the Provost for Administrative Affairs Victor Yanchick, Ph.D., Dean, College of Pharmacy Stanley Mills, Ph.D., Director, Nuclear Pharmacy Bhagwat Ahluwalia, Ph.D., Radiation Safety Officer

Nuclear Regulatory Commission, Washington, D.C.

D. B. Howe, Nuclear Materials Safety and Safeguards

J. R. DelMedico, Office of Enforcement

Nuclear Regulatory Commission, Arlington, Texas

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

W. L. Fisher, Chief, Nuclear Materials Safety Branch

C. L. Cain, Chief, Nuclear Materials Inspection Section

D. A. Powers, Chief, Nuclear Materials Licensing Section

G. F. Sanborn, Enforcement Officer

W. L. Holley, Radiation Specialist

L. L. Kasner, Health Physicist