



**UNITED STATES
NUCLEAR REGULATORY COMMISSION**
REGION IV
1600 E. LAMAR BLVD.
ARLINGTON, TX 76011-4511

August 5, 2021

EA-21-019

David Hoffenberg, Chief Operations Officer
Eastern Idaho Health Services, Inc.
dba Eastern Idaho Regional Medical Center
P.O. Box 2077
Idaho Falls, ID 83403

SUBJECT: NOTICE OF VIOLATION; NRC INSPECTION REPORT 030-32290/2020-001

Dear Mr. Hoffenberg:

This letter refers to the inspection performed at your facilities in Idaho Falls, Idaho, between November 18 and 20, 2020, and remote inspection between July 20, 2020, and April 15, 2021. The purpose of the inspection was to examine activities conducted under your license as they relate to public health and safety and to confirm compliance with the U.S. Nuclear Regulatory Commission (NRC) rules and regulations. A final exit briefing was conducted telephonically with Mr. Jeff Sollis, Chief Executive Officer, you, and other members of your staff on April 28, 2021, and the details of the inspection and the four apparent violations were provided in NRC Inspection Report 030-32290/2020-001, dated May 11, 2021, NRC's Agencywide Documents and Management System (ADAMS) Accession No. [ML21126A332](#).

In the NRC letter transmitting the inspection report, the NRC provided you the opportunity to address the apparent violations identified in the inspection report by either attending a predecisional enforcement conference, requesting alternative dispute resolution, or providing a written response before we made our final enforcement decision. In a letter received June 8, 2021 (ADAMS Accession No. [ML21165A215](#)), you provided a written response to the apparent violations.

Based on the information developed during the inspection and the information that you provided in your response to the inspection report dated May 11, 2021, the NRC has determined that four violations of NRC requirements occurred. These violations are cited in the enclosed Notice of Violation (Notice) and the circumstances surrounding them are described in detail in the subject inspection report. The violations involved the failure to: (A) monitor individuals' exposure from licensed and unlicensed radiation sources; (B) implement certain elements of your radiation protection program sufficiently to ensure compliance with the provisions of Title 10 of the *Code of Federal Regulations* (CFR) Part 20; (C) reduce the dose that an individual may be allowed to receive in the current year by the amount of occupational dose received while employed by any other person; and (D) provide instruction to individuals who were likely to receive in a year an occupational dose in excess of 100 millirem.

The NRC considers the violations above to be significant violations because they represent a failure to provide adequate oversight for the radiation safety program, specifically in the area of occupational radiation monitoring and dose assessment. Therefore, these violations are

categorized collectively in accordance with the NRC Enforcement Policy as a Severity Level III problem. The NRC Enforcement Policy can be found at the NRC's website at <http://www.nrc.gov/about-nrc/regulatory/enforcement/enforce-pol.html>.

In accordance with the NRC Enforcement Policy, a base civil penalty in the amount of \$7,500 is considered for a Severity Level III problem.

Because your facility has not been the subject of escalated enforcement actions within the last two inspections, the NRC considered whether credit was warranted for *Corrective Action* in accordance with the civil penalty assessment process described in Section 2.3.4 of the NRC Enforcement Policy. The NRC has determined that *Corrective Action* credit is warranted based on your actions to: (1) revise and implement policies and processes associated with the wearing of dosimetry and tracking of dosimeter readings; (2) implement training for physicians performing licensed and unlicensed radiation procedures; and (3) implement a process for radiation dose history monitoring. Our understanding is that "Employees" referenced in your program policy and procedures includes both direct and contractor employees, all contractors will also receive program training and be included in oversight, and it is the responsibility of the Chief Medical Officer to ensure the program, including training, is being conducted adequately for both direct and contract employees.

Therefore, to encourage prompt and comprehensive corrective actions to address violations, and in recognition of the absence of previous escalated enforcement action, I have been authorized, after consultation with the Director, Office of Enforcement, not to propose a civil penalty in this case. However, significant violations in the future could result in a civil penalty. In addition, issuance of this Severity Level III problem constitutes an escalated enforcement action that may subject you to increased NRC inspection activities.

The NRC has concluded that information regarding: (1) the reason for the violations; (2) the corrective actions that have been taken and the results achieved; and (3) the date when full compliance was achieved is already adequately addressed on the docket in NRC Inspection Report 030-32290/2020-001 and in your letter received on June 8, 2021. Therefore, you are not required to respond to this letter unless the description therein does not accurately reflect your corrective actions or your position. In that case, or if you choose to provide additional information, you should follow the instructions specified in the enclosed Notice.

In accordance with 10 CFR 2.390 of the NRC's "Rules of Practice and Procedure," a copy of this letter, its enclosure, and your response, if you choose to provide one, will be made available electronically for public inspection in the NRC Public Document Room or in the NRC's ADAMS, accessible from the NRC website at <http://www.nrc.gov/reading-rm/adams.html>. To the extent possible, your response should not include any personal privacy or proprietary information so that it can be made available to the public without redaction. The NRC also includes significant enforcement actions on its website at <http://www.nrc.gov/reading-rm/doc-collections/enforcement/actions>.

If you have any questions concerning this matter, please contact Dr. Lizette Roldán-Otero of my staff at 817-200-1455.

Sincerely,

Scott A. Morris
Regional Administrator

Docket No. 030-32290
License No. 11-27346-01

Enclosure: Notice of Violation

cc w/Enclosure:
Mark Dietrich
Radiation Control Program Director
Idaho Department of Environmental Quality
1410 North Hilton Drive
Boise, ID 83706

NOTICE OF VIOLATION; NRC INSPECTION REPORT 030-32290/2020-001 - DATED AUGUST 5, 2021

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Cvr Ltr & Encl: ADAMS ACCESSION NUMBER: ML

SUNSI Review: PAJ ADAMS: Non-Publicly Available Non-Sensitive Keyword: By:
 Yes No Publicly Available Sensitive

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NAME	MMuessle	SMorris				
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NOTICE OF VIOLATION

Eastern Idaho Health Services, Inc.
dba Eastern Idaho Regional Medical Center
Idaho Falls, Idaho

Docket No.: 030-32290
License No.: 11-27346-01
EA-21-019

During an NRC inspection conducted between July 20, 2020, and April 15, 2021, four violations of NRC requirements were identified. In accordance with the NRC Enforcement Policy, the violations are listed below:

- A. 10 CFR 20.1502(a)(1) requires, in part, that each licensee shall monitor exposure to radiation and radioactive material at levels sufficient to demonstrate compliance with the occupational dose limits of 10 CFR Part 20. At a minimum, each licensee shall monitor occupational exposure to radiation from licensed and unlicensed radiation sources under the control of the licensee and shall supply and require the use of individual monitoring devices by adults likely to receive, in 1 year from sources external to the body, a dose in excess of 10 percent of the limits in 10 CFR 20.1201(a).

Contrary to the above, from August 5, 2016, to November 18, 2020, the licensee failed to adequately monitor individuals' occupational exposure to radiation and radioactive material at levels sufficient to demonstrate compliance with the occupational dose limits of 10 CFR Part 20. Specifically, for one authorized user (AU), the licensee failed to adequately monitor the occupational exposure to radiation from licensed and unlicensed radiation sources under the licensee's control. Additionally, the licensee failed to require the proper use of individual monitoring devices by the AU who received, in 1 year from sources external to the body, a dose in excess of 10 percent of the limits in 10 CFR 20.1201(a) and had a substantial potential to exceed the NRC's annual limit in 10 CFR 20.1201(a).

- B. 10 CFR 20.1101(a) requires, in part, that each licensee implement a radiation protection program commensurate with the scope and extent of licensed activities and sufficient to ensure compliance with 10 CFR Part 20. The licensee's policy, "ALARA Program," Reference 7337, Version 3, dated December 4, 2018, and Version 2, dated May 1, 2015, Section 4, "Review of the ALARA Program," state, in part, that for: (1) personnel dose less than the Investigational Level I, except when deemed appropriate by the radiation safety officer, no further action will be taken in those cases where an individual's dose is less than the Table 1 values for Investigational Level I; and (2) personnel dose equal to or greater than Investigational Level II, the radiation safety officer or designee will investigate in a timely manner the causes of all personnel doses equaling or exceeding Investigational Level II and, if warranted, will take action.

Contrary to the above, from August 5, 2016, to November 18, 2020, the licensee failed to implement a radiation protection program commensurate with the scope and extent of licensed activities sufficient to ensure compliance with 10 CFR Part 20. Specifically, the licensee's policy, "ALARA Program," failed to: (1) include provisions regarding actions to be taken when dosimeter results were less than the licensee's Investigational Level I, such as when dosimeters were returned unused or had unexpectedly low exposures; and (2) investigate personnel radiation dose equal to or greater than the licensee's Investigational Level II and take action if warranted.

Enclosure

- C. 10 CFR 20.1201(f) requires, in part, that the licensee shall reduce the dose that an individual may be allowed to receive in the current year by the amount of occupational dose received while employed by any other person.

Contrary to the above, from August 5, 2016, to November 18, 2020, the licensee failed to reduce the dose that an individual may be allowed to receive in the current year by the amount of occupational dose received while employed by any other person. Specifically, the licensee failed to reduce the dose that an AU was allowed to receive by the amount of occupational dose that the AU was concurrently receiving while performing interventional radiology procedures at other facilities that were not owned or controlled by the licensee.

- D. 10 CFR 19.12(a)(3) requires, in part, that all individuals who in the course of employment are likely to receive in a year an occupational dose in excess of 100 mrem shall be instructed in, and required to observe, to the extent within the worker's control, the applicable provisions of the Commission regulations and licenses for the protection of personnel from exposure to radiation and/or radioactive material.

Contrary to the above, from August 5, 2016, to November 18, 2020, the licensee failed to provide to individuals, who in the course of employment were likely to receive in a year an occupational dose in excess of 100 mrem, instruction on the applicable provisions of the Commission regulations and licenses for the protection of personnel from exposure to radiation and/or radioactive material. Specifically, the licensee failed to provide adequate instructions regarding the proper use of personnel dosimeters to an AU who was likely to receive in a year an occupational dose in excess of 100 mrem.

This is a Severity Level III Problem (NRC Enforcement Policy, Section 6.7.c).

The NRC has concluded that information regarding: (1) the reason for the violations; (2) the corrective actions that have been taken and the results achieved; and (3) the date when full compliance was achieved is already adequately addressed on the docket in NRC Inspection Report 030-32290/2020-001 and in your letter received on June 8, 2021. However, you are required to submit a written statement or explanation pursuant to 10 CFR 2.201 if the description therein does not accurately reflect your corrective actions or your position. In that case, or if you choose to respond, clearly mark your response as a "Reply to a Notice of Violation, EA-21-019," and send it to the U.S. Nuclear Regulatory Commission, ATTN: Document Control Desk, Washington, DC 20555-0001 with a copy to the Regional Administrator, U.S. Nuclear Regulatory Commission, Region IV, 1600 E. Lamar Blvd, Arlington, Texas 76011-4511, and email it to R4Enforcement@nrc.gov within 30 days of the date of the letter transmitting this Notice of Violation (Notice).

If you contest this enforcement action, you should also provide a copy of your response, with the basis for your denial, to the Director, Office of Enforcement, U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001.

If you choose to respond, your response will be made available electronically for public inspection in the NRC Public Document Room or in the NRC's ADAMS, accessible from the NRC website at <http://www.nrc.gov/reading-rm/adams.html>. Therefore, to the extent possible, your response should not include any personal privacy or proprietary information so that it can be made available to the public without redaction. If personal privacy or proprietary information is necessary to provide an acceptable response, please provide a bracketed copy of your

response that identifies the information that should be protected and a redacted copy of your response that deletes such information. If you request withholding of such information, you must specifically identify the portions of your response that you seek to have withheld and provide in detail the bases for your claim of withholding (e.g., explain why the disclosure of information will create an unwarranted invasion of personal privacy or provide the information required by 10 CFR 2.390(b) to support a request for withholding confidential commercial or financial information).

In accordance with 10 CFR 19.11, you are required to post this Notice within 2 working days of receipt.

Dated this 5th day of August 2021