

### SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

**1. LICENSEE/LOCATION INSPECTED**

Weirton Medical Center  
601 Colliers Way  
Weirton, WV 26062-5091

**2. NRC/REGIONAL OFFICE**

Region 1  
475 Allendale Rd  
Suite 102  
King of Prussia, PA 19406

**REPORT NUMBER(S) 2025001**

**3. DOCKET NUMBER(S)**

030-12977

**4. LICENSE NUMBER(S)**

47-17567-01

**5. DATE(S) OF INSPECTION**

07/29/2025 - 09/18/2025

**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 violation(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 the 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)

Violation No. 1: 10 CFR 35.2092

10 CFR 35.92(b) requires that a licensee shall retain a record of each disposal permitted under 10 CFR 35.92(a) in accordance with 10 CFR 35.2092.

10 CFR 35.2092 requires, in part, that a licensee shall maintain records of the disposal of licensed materials, as required by 10 CFR 35.92, for 3 years.

Contrary to the above, as of at least July 29, 2025, the licensee failed to retain a record of each disposal permitted under 10 CFR 35.92(a) in accordance with 10 CFR 35.2092. Specifically, the licensee had not been creating records of each disposal of licensed material since at least the prior inspection.

This is a Severity Level IV violation. As an immediate corrective action, the licensee created a tabular log to track future disposals of radioactive waste that included all of the information as required by 10 CFR 35.2092.

Violation No. 2: 10 CFR 20.1201(f)

10 CFR 20.1201(f) requires 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, as of July 29, 2025, 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 obtain dosimetry records from the educational institution of a student conducting activities under their license and were therefore unable to reduce the occupational dose received by the student as part of licensed activities.

This is a Severity Level IV violation (NRC Enforcement Policy Section 6.7.d). As an immediate corrective action, the licensee contacted the student's educational institution and acquired their dose records. The licensee committed to establishing ongoing communication with each educational institution to ensure smooth sharing of dosimetry records for future student rotations.

**SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION**

**1. LICENSEE/LOCATION INSPECTED**

Weirton Medical Center  
601 Colliers Way  
Weirton, WV 26062-5091

**2. NRC/REGIONAL OFFICE**

Region 1  
475 Allendale Rd  
Suite 102  
King of Prussia, PA 19406

**REPORT NUMBER(S) 2025001**

**3. DOCKET NUMBER(S)**

030-12977

**4. LICENSE NUMBER(S)**

47-17567-01

**5. DATE(S) OF INSPECTION**

07/29/2025 - 09/18/2025

Violation No. 3: 10 CFR 20.1502(a)

10 CFR 20.1502(a) requires that each licensee shall monitor exposures to radiation and radioactive material at levels sufficient to demonstrate compliance with the occupational dose limits of this part. As 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, as of July 29, 2025, the licensee failed to 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). Specifically, the licensee failed to ensure several physicians conducting licensed activities were wearing personal dosimetry.

This is a Severity Level IV violation (NRC Enforcement Policy Section 6.7.d). As an immediate corrective action, the RSO for the licensee prepared a dose estimate for the physicians utilizing the dose records of individuals with the highest levels of involvement in all procedures in which the physicians participated. This estimate demonstrated that, despite the failure to monitor the occupational exposure of the physicians, there was not a significant potential for occupational overexposure. The licensee committed to provide increased oversight of the physicians moving forward to ensure dosimeters are worn and the results consistent with the anticipated occupational exposure of the individuals.

**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	Debbie Gongola, Director of Operations		9/22/2025
NRC INSPECTOR	Jason vonEhr	<b>JASON VONEHR</b> Digitally signed by JASON VONEHR Date: 2025.09.22 07:27:12 -04'00'	
BRANCH CHIEF	Farrah Gaskins		