



**UNITED STATES  
NUCLEAR REGULATORY COMMISSION**  
REGION III  
2056 WESTINGS AVENUE, SUITE 400  
NAPERVILLE, IL 60563-2657

January 21, 2026

EAF-RIII-2025-0164

Tanya Dodge  
Director of Imaging  
Centerpoint Medical Center of  
Independence, LLC  
19600 E 39<sup>th</sup> St.  
Independence, MO 64057

SUBJECT: NOTICE OF VIOLATION; NRC ROUTINE INSPECTION REPORT  
03013994/2024001 (DRSS) – CENTERPOINT MEDICAL CENTER OF  
INDEPENDENCE, LLC

Dear Tanya Dodge:

This letter refers to the inspection conducted on August 21, 2024, at your Independence, Missouri, facility (Inspection Report No. 03013994/2024001 (DRSS)), with continued in-office review through August 28, 2025. The purpose of the inspection was to review activities performed under your NRC license to ensure that activities were being performed in accordance with NRC requirements. The in-office review was to review dosimetry evaluations not available during the onsite portion of the inspection.

During the inspection, two apparent violations of NRC requirements were identified. The circumstances surrounding the apparent violations, the significance of the issues, and the need for lasting and effective corrective actions were discussed with your staff during an exit meeting on August 28, 2025. Inspection Report No. 03013994/2024001 (DRSS) was issued on September 11, 2025, and can be found in the NRC's Agencywide Documents Access and Management System (ADAMS) at accession number ML25253A066. ADAMS is accessible from the NRC website at <http://www.nrc.gov/reading-rm/adams.html>.

In the letter transmitting the inspection report, we provided you with the opportunity to address the apparent violations identified in the report by either attending a predecisional enforcement conference or by providing a written response before we made our final enforcement decision. In a letter dated September 30, 2025, (ML25345A245) you provided a 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 September 30, 2025, the NRC has determined that 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 were associated with 1) the failure to monitor occupational exposure to radiation from licensed and unlicensed radiation sources and require the use of individual monitoring devices by adults likely to receive a dose in excess of 10 percent of the annual limit to the skin of the extremities as required by 10 CFR 20.1502(a)(1) and 2) the failure to monitor individuals in accordance with NUREG-1556, Volume 9, Revision 3, as required by Condition 13.A of NRC License 24-18655-01. The failure to monitor individuals'

occupational exposure as required is a significant safety concern to the NRC due to the potential for unmonitored individuals to unknowingly receive occupational exposures to radiation from licensed and unlicensed sources in excess of regulatory limits. Therefore, these violations are categorized collectively in accordance with the NRC Enforcement Policy as a Severity Level III problem.

In accordance with the NRC Enforcement Policy, a base civil penalty in the amount of \$9,000 is considered for a Severity Level III problem.

Because your facility has not been the subject of escalated enforcement actions within the last two years or last two inspections, the NRC considered whether credit was warranted for *Corrective Action* in accordance with the civil penalty assessment process in Section 2.3.4 of the Enforcement Policy. In your letter dated September 30, 2025, you identified the following actions to correct and prevent recurrence of the violations identified above: (1) assigning extremity dosimetry (ring badges) to the interventional radiology physicians; (2) providing training that the ring badges are to be worn for all procedures using fluoroscopy, not just yttrium-90 procedures; and (3) including dosimetry checks in the "time out" procedure to ensure whole body and ring badges are being worn. Based on these actions, the NRC determined that credit was warranted for *Corrective Action*.

Therefore, to encourage comprehensive correction of violations and in recognition of the absence of previous escalated enforcement action, I have been authorized, after consultation with the Acting 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 escalated enforcement action that may subject you to increased inspection effort.

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 Inspection Report No. 03013994/2024001 (DRSS) and your letter dated September 30, 2025. 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 "Agency 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 and 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, proprietary, or safeguards 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). The NRC also includes significant enforcement actions on its website at <http://www.nrc.gov/reading-rm/doc-collections/enforcement/actions/>.

T. Dodge

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If you have any questions concerning this matter, please contact Diana Betancourt-Roldan, Enforcement Officer, at 630-810-4373.

Sincerely,



Signed by Shuaibi, Mohammed  
on 01/21/26

Mohammed Shuaibi  
Acting Regional Administrator

Docket No. 030-13994  
License No. 24-18655-01

Enclosure: Notice of Violation

cc (w/encl): Nicholas Bell, RSO  
State of Missouri

Letter to T. Dodge from M. Shuaibi dated January 21, 2026.

SUBJECT: NOTICE OF VIOLATION; NRC ROUTINE INSPECTION REPORT  
03013994/2024001 (DRSS) – CENTERPOINT MEDICAL CENTER OF  
INDEPENDENCE, LLC

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DATE	12/30/2025		12/30/2025		1/5/2026		1/20/2026	
OFFICE	RIII-EICS		RIII-ORA					
NAME	DBetancourt- Roldan		MShuaibi					
DATE	1/21/2026		1/21/2026					

**OFFICIAL RECORD COPY**

## NOTICE OF VIOLATION

Centerpoint Medical Center of Independence, LLC  
Independence, Missouri

Docket No. 030-13994  
License No. 24-18655-01  
EAF-RIII-2025-0164

During an NRC inspection conducted on August 21, 2024, with continued in-office review through August 28, 2025, violations of NRC requirements were identified. In accordance with the NRC Enforcement Policy, the violations are listed below:

- A. Title 10 of the *Code of Federal Regulations* (10 CFR) 20.1502(a)(1) requires, in part, that 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).

Title 10 CFR 20.1201(a)(2)(ii) requires, in part, that the annual limit to the skin of the extremities is a shallow-dose equivalent of 50 rem (0.5 Sievert).

Contrary to the above, since 2022 the Licensee failed to monitor occupational exposure to radiation from licensed and unlicensed radiation sources under the control of the Licensee and supply and require the use of individual monitoring devices for 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)(2)(ii). Specifically, the Licensee failed to provide extremity dosimeters to interventional radiologists performing yttrium-90 therapy procedures and working with licensed and unlicensed radiation sources.

- B. License Condition 13.A of NRC License No. 24-18655-01 requires, in part, that the licensee conduct its program in accordance with the statements, representations, and procedures contained in the application dated December 23, 2020.

Table C-2, Item 10, of the application dated December 23, 2020, states, in part, that the licensee will monitor individuals in accordance with the criteria in the section titled "Radiation Safety Program – Occupational Dose" in NUREG-1556 Vol.9, Rev. 3, "Consolidated Guidance About Materials Licenses: Program-Specific Guidance About Medical Use Licensees."

Contrary to the above, since 2022 the Licensee failed to monitor individuals in accordance with the criteria in the section titled "Radiation Safety Program – Occupational Dose" in NUREG-1556 Vol.9, Rev. 3, "Consolidated Guidance About Materials Licenses: Program-Specific Guidance About Medical Use Licensees." Specifically, the Licensee failed to provide extremity dosimetry to interventional radiologists performing yttrium-90 therapy procedures or perform an evaluation to determine that monitoring was not required.

This is a Severity Level III problem (Section 6.7).

Enclosure

The NRC has concluded that information regarding the reason for the violations, the corrective actions taken and planned to correct the violation and prevent recurrence, and the date when full compliance was achieved, is already adequately addressed on the docket in Inspection Report No. 03013994/2024001 (DRSS) and the letter from Licensee dated September 30, 2025. However, the Licensee is required to submit a written statement or explanation pursuant to 10 CFR 2.201 if the description therein does not accurately reflect the Licensee's corrective actions or position. In that case, or if the Licensee chooses to respond, the Licensee should clearly mark its response as a "Reply to a Notice of Violation, (EAF-RIII-2025-0164)," 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, Region III, within 30 days of the date of the letter transmitting this Notice of Violation (Notice).

If the Licensee chooses to respond, the response will be made available electronically for public inspection in the NRC Public Document Room or in the NRC's Agencywide Documents Access and Management System (ADAMS), accessible from the NRC website at <http://www.nrc.gov/reading-rm/adams.html>. Therefore, to the extent possible, the response should not include any personal privacy, proprietary, or safeguards information so that it can be made available to the public without redaction.

In accordance with 10 CFR 19.11, the Licensee may be required to post this Notice within two working days of receipt.

Dated this 21<sup>st</sup> day of January 2026.