NRC FORM 591M PART 1
(10-2003)
10 CFR 2.201

U.S. NUCLEAR REGULATORY COMMISSION

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED:	2. NRC/REGIONAL OFFICE
Heartland Regional Medical Center 5325 Faraon Street St. Joseph, MO 64506 REPORT **2006-001 &-002**	**U.S. Nuclear Regulatory Commission** **Region III** **2443 Warrenville Road** **Suite 210** **Lisle, Illinois 60532-4351**

3. DOCKET NUMBER(S)	4. LICENSEE NUMBER(S)	5. DATE(S) OF INSPECTION
030-14791	24-18287-01	Feb. 8, 2006

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

☒ 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, NUREG-1600, to exercise discretion, were satisfied.

_____ Non-Cited Violation(s) was/were discussed involving the following requirement(s) and Corrective Action(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. This form is a NOTICE OF VIOLATION, which may be subject to posting in accordance with 10 CFR 19.11.

(Violations and Corrective Actions)

Licensee's Statement of Corrective Actions for Item 4, above.

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			
NRC INSPECTOR	**Deborah A. Piskura**	DAPiskura	2/8/06

NRC FORM 591M PART 3
(10-2003)
10 CFR 2.201

U.S. NUCLEAR REGULATORY COMMISSION

Docket File Information

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE	2. NRC/REGIONAL OFFICE
Heartland Regional Medical Center REPORT NUMBER(S) **2006-001 & 2006-002**	**Region III** **2443 Warrenville Road, Suite 210** **Lisle, IL 60532**

3. DOCKET NUMBER(S)	4. LICENSE NUMBER(S)	5. DATE(S) OF INSPECTION
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6. INSPECTION PROCEDURES USED	7. INSPECTION FOCUS AREAS
87130, 87131 and 87132	03.01, 03.02, 03.03, 03.04, 03.05, 03.06, 03.07, and 03.08

SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM CODE(S)	2. PRIORITY	3. LICENSEE CONTACT	4. TELEPHONE NUMBER
02240	G 2	Edward M. Stevens, M.D., RSO	816.271.6000

[X] Main Office Inspection — Next Inspection Date: Feb. 2008

[X] Field — Heartland Cardiovascular Consultants, St. Joseph, MO

[ ] Temporary Job Site

PROGRAM SCOPE

This licensee was a 400-bed hospital, authorized to use licensed material permitted by Sections 35.100, 35.200, 35.300, 35.400, 35.500, and 35.1000 Sr-90 IVB devices. The nuclear medicine department was staffed with five full-time technologists who performed approximately 500+ diagnostic nuclear medicine procedures per month. Nuclear medicine activities were performed in three separate areas within the main hospital (in-patient studies within the radiology department, out-patient studies in a clinic and cardiac studies in the cardiac rehab department). In addition, the hospital performed cardiac imaging at a separate cardiac clinic. The radiology department received a Mo-99/Tc-99m generator each week. All other studies performed by the other nuclear medicine imaging areas unitized unit doses from a licensed radiopharmacy. The hospital performed a full spectrum of nuclear diagnostic imaging studies. Typically, in a year the hospital administered 10-15 iodine-131 thyroid carcinoma therapies and 100 hyperthyroidism treatments. The hospital obtained its I-131 in capsule form only. The department occasionally administered Sr-89 and Sm-153 dosages for treatment of metastatic bone disease. The licensee retained the services of a consulting physicist to audit the radiation safety program on a quarterly basis.

The radiation therapy activities were performed by a contract medical physicist and one in-house dosimetrists. Brachytherapy activities included I-125 or Pd-103 permanent implants and Cs-137 temporary gynecological implants. The licensee performed approximately 70-75 I-125 or Pd-103 permanent prostate implants (ultrasound guided) per year. Although the licensee was approved for 35.1000 material, the hospital never acquired an IVB unit to date.

This inspection consisted of interviews with licensee personnel, a review of select records, tours of the nuclear medicine and radiation oncology departments, and independent measurements. The inspector observed licensee nuclear medicine personnel prepare, assay and administer several unit doses for various imaging procedures. The inspection included observations of dose calibrator QA checks, package receipts and surveys, and area surveys. At the time of this inspection, the licensee was in the process of treating a patient with a Cs-137 gynecological implant. The inspector review the written directive for this procedure, performed a confirmatory radiation survey of the exterior of the patient's room, performed a confirmatory inventory of the licensee's brachytherapy sources in the safe, noted the patient room postings, and interviewed the physician authorized user and nurses who attended the patient.