

Initial	Announced	X	Unannounced	X	Routine	Special	Other
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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 SJRMC – Field Hospital REPORT NO: 2011-001	2. NRC/REGIONAL OFFICE U.S. Nuclear Regulatory Commission Region IV, 612 East Lamar Blvd, Suite 400 Arlington, Texas 76011-4125
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3. DOCKET NUMBER 030-12728	4. LICENSE NUMBER 24-01090-03	5. DATE OF INSPECTION September 22-October 24, 2011
6. INSPECTION PROCEDURES USED 87131	7. INSPECTION FOCUS AREAS 03.01-03.07	8. INSPECTOR Latischa M. Hanson

SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM CODE 02120	2. PRIORITY 3	3. LICENSEE CONTACT Duane Eugene Myers, M.D., RSO	4. TELEPHONE NUMBER (417) 781-2727
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☐ Main Office Inspection _____ Next Inspection Date: _____ TBD*
☒ Field Office 2817 St. John's Boulevard, Joplin, Missouri _____
☐ Temporary Job Site Inspection _____

PROGRAM SCOPE

Persons Contacted: Larry Canon, Lead CNMT; Duane E. Myers, M.D., RSO; Nora Cannon, Director of Imaging; Whit Sanders, Manager, Radiation Oncology; Connie Wilkins, Director Radiation Oncology; Dottie Bringle, COO/CNO; Dennis Manley, Director Quality & Risk Management; Mike Warren, Compliance

This was an unannounced inspection of a field hospital, established to continue nuclear medicine operations post-catastrophic EF-5 tornado which hit Joplin, Missouri on May 22, 2011. The license amendment number 48 was issued August 30, 2011, authorizing a field hospital to house a nuclear medicine building containing one camera, one stress lab & a hot lab. The licensee to only uses 35.100 & 200 material (no pet), although the license authorizes 35.300 & 400 material (a call was placed to Region III to clarify this with inspection staff). This inspection was limited to the nuclear medicine department, as the Radiation Oncology department was not operational & staff has been transferred to surrounding radiation oncology locations to maintain employment.

The nuclear medicine department is located in a temporary building that houses small areas for emergency room, intensive care unit, x-ray & the like. The nuclear medicine department's hot lab is located in a small room that serves also as a patient injection site/tech office. The licensee had limited printed records but maintained access to a database to obtain any required documentation needed to complete the nuclear medicine department inspection. The licensee employs four techs who perform studies for mainly cardiac & bone procedures. The licensee receives unit doses of tc-99 & in-111 from Cardinal Health twice a day, with the delivery personnel either accessing the hot lab by key or when licensee staff is on the premises.

Performance Observation
 The inspector was able to directly observe several patient injections & RAM handling & security. ALARA principals were observed enacted & no violations were noted. The licensee employs a helper for nuclear medicine patient transport. The licensee maintained documentation to demonstrate the employee had radiation worker training since the worker has unescorted access to RAM. Interviews were conducted with licensee personnel with regards to: radiation protection procedures, written directives, RAM security procedures, daily surveys, package receipt procedures, calibrator constancy checks, disposal policies and waste handling procedures. The personnel were found to be knowledgeable, with no violations noted. The personnel were observed wearing the required personnel dosimetry. Securing of RAM was observed & found to be in accordance with regulatory requirements.

Records Review
 The inspector conducted random review of required records, inclusive of leak tests, training, area surveys & contamination control, audits, inventories, equipment calibration, inspection & maintenance documentation, personnel monitoring, receipt & transportation documentation, RPP program & utilization logs. Written directive documentation was reviewed, with no violations noted. The licensee utilizes contract health physics group, Associates of Medical Physics. The licensee continues to maintain an active Radiation Safety Committee & corresponding RSC minutes were reviewed. No violations were noted.

The licensee maintains monthly personnel monitoring devices (badges & fingers). All recorded doses were within regulatory limits. Rad waste is maintained in the hot lab & the corresponding rad waste logs were maintained in accordance with regulatory requirements. The inspector noted that the facility was properly posted with Caution Radioactive Materials signage and NRC Form-3.

*The Radiation Oncology department was not able to be inspected due to it remaining non-operational. Region IV DNMS Branch recommends closing nuclear medicine inspection portion & lending Region III the ability to coordinate a future brachy inspection when the licensee is operational. The April 2008 inspection was clear. No violations were noted with this field location & a clear 591 for the nuclear medicine department is forwarded to Region III for issuance.

NRC FORM 591M PART 3 (Rev. by RIV 03/09)

SUNSI Review By: <u>LMH</u> Supervisory Review By: _____	<div style="border: 1px solid black; width: 20px; height: 20px; margin: 0 auto;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 0 auto; text-align: center;">X</div>	Non-Public Public	<div style="border: 1px solid black; width: 20px; height: 20px; margin: 0 auto;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 0 auto; text-align: center;">X</div>	Sensitive – Official Use Only Non-Sensitive
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