

**SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION**

1. LICENSEE/LOCATION INSPECTED:

Midwest Health Professional, P.C.  
11520 St. Charles Rock Road  
Suite 108  
Bridgeton, MO 63044

REPORT NUMBER(S) 2013-001

2. NRC/REGIONAL OFFICE

Region III  
U. S. Nuclear Regulatory Commission  
2443 Warrenville Road, Suite 210  
Lisle, IL 60532-4352

3. DOCKET NUMBER(S)

030-35989

4. LICENSE NUMBER(S)

12-32391-01

5. DATE(S) OF INSPECTION

4/9/13

**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 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)

**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 |                |                    |         |
| NRC INSPECTOR             | Ken Lambert    | <i>Ken Lambert</i> | 4/9/13  |
| BRANCH CHIEF              | Tamara Bloomer | <i>T. Bloomer</i>  | 4/26/13 |

**Docket File Information****SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION**

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April 9, 2013

## 6. INSPECTION PROCEDURES USED

87130

## 7. INSPECTION FOCUS AREAS

03.01-07

**SUPPLEMENTAL INSPECTION INFORMATION**

## 1. PROGRAM CODE(S)

2201

## 2. PRIORITY

5

## 3. LICENSEE CONTACT

Tshwaka Kayem, M.D., RSO

## 4. TELEPHONE NUMBER

(314) 290-9331

- ☒ Main Office Inspection      Next Inspection Date: April 9, 2018
- ☐ Field Office Inspection \_\_\_\_\_
- ☐ Temporary Job Site Inspection \_\_\_\_\_

**PROGRAM SCOPE**

The licensee is a private practice, physician owned and operated medical facility authorized to possess 10 CFR 35.200 radioactive materials. The licensee employs one full time nuclear medicine technologist who performs approximately 20 cardiac stress tests per month using Tc-99m. The licensee receives unit doses from a local nuclear pharmacy. The licensee uses an outside consultant to perform the annual audit of the radiation safety program.

**PERFORMANCE OBSERVATIONS**

The inspector observed that radioactive materials were secured from unauthorized removal or access. Radioactive materials are stored in shielding in the imaging room. The nuclear medicine technologist demonstrated/discussed: (1) package receipt surveys; (2) dose calibrator daily and quarterly linearity checks; (3) well counter daily checks; (4) decay in storage and waste disposal practices; (5) daily and weekly surveys; and (6) spill procedures. The inspector reviewed the following records or documents: (1) package receipt and return; (2) daily survey and weekly wipes results; dose calibrator annual accuracy, quarterly linearity and daily constancy checks; (3) survey meter calibration; (4) waste disposal; (5) annual audit; (6) sealed source inventory; and (7) leak tests results. The technologist was knowledgeable regarding radiation safety practices. The technologist was observed wearing appropriate dosimetry. The inspector reviewed dosimetry records and noted that the maximum exposures were 96 mrem DDE and 131 mrem SDE for 2009; 103 mrem DDE and 123 mrem SDE for 2010; and 22 mrem DDE and 467 mrem SDE for 2012. The inspector performed independent measurements, which were comparable with licensee survey data.

No violations of regulatory requirements were identified.