



UNITED STATES  
NUCLEAR REGULATORY COMMISSION

REGION III  
2443 WARRENVILLE ROAD, SUITE 210  
LISLE, ILLINOIS 60532-4352

January 14, 2014

Mr. Gary Williams, Director  
National Health Physics Program (115 HP/NLR)  
Department of Veterans Affairs  
Veterans Health Administration  
2200 Fort Roots Drive  
North Little Rock, AR 72114

SUBJECT: NRC INSPECTION REPORT 03034325/2013006(DNMS) — OVERTON  
BROOKS VA MEDICAL CENTER, SHREVEPORT, LOUISIANA

Dear Mr. Williams:

On December 19, 2013, the U.S. Nuclear Regulatory Commission (NRC) conducted a routine inspection at the Overton Brooks VA Medical Center, Shreveport, Louisiana. The inspection was limited to a review of activities authorized under Permit Number 17-12273-01. The inspector conducted an exit meeting with the management and staff at the facility at the completion of the inspection.

The inspection was an examination of activities conducted under the Permit as they relate to radiation safety and to compliance with the Commission's rules and regulations. Within these areas, the inspection consisted of selective examinations of procedures and representative records, interviews with personnel, independent measurements, and observation of activities in progress. Within the scope of the inspection no violations of NRC requirements were identified; therefore, no response to this letter or the enclosed NRC Form 591M is required.

In accordance with Title 10 of the *Code of Federal Regulations* (CFR) 2.390 of the NRC's "Rules of Practice," a copy of this letter and its enclosure will be available electronically for public inspection in the NRC Public Document Room or from the NRC's Agencywide Documents Access and Management System (ADAMS), accessible from the NRC's website at <http://www.nrc.gov/reading-rm/adams.html>.

G. Williams

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Should you have any questions concerning this inspection or the enclosed report, please contact Kevin Null of my staff at (630) 829-9854.

Sincerely,

A handwritten signature in black ink, appearing to read "Patricia J. Pelke". The signature is fluid and cursive, with the first name "Patricia" being more prominent than the last name "Pelke".

Patricia J. Pelke, Chief  
Materials Licensing Branch  
Division of Nuclear Materials Safety

Docket No.: 030-34325  
License No.: 03-23853-01VA  
Permit No.: 17-12273-01

Enclosure:  
Inspection Report 03034325/2013006(DNMS)



## SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

## 1. LICENSEE/LOCATION INSPECTED:

Department of Veterans Affairs  
Under Secretary for Health  
Washington, D.C.  
Location: Overton Brooks VA Medical Center, Shreveport, LA  
REPORT NUMBER(S) 2013006

## 2. NRC/REGIONAL OFFICE

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

## 3. DOCKET NUMBER(S)

030-34325

## 4. LICENSE NUMBER(S)

03-23853-01VA

## 5. DATE(S) OF INSPECTION

December 19, 2013

## 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             | Kevin G. Null     |           | 1/13/14 |
| BRANCH CHIEF              | Patricia J. Pelke |           | 1/14/14 |

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

|                                                                                                                                                                                                                       |                                                                                                                                             |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|
| 1. LICENSEE/LOCATION INSPECTED:<br><br>Department of Veterans Affairs<br>Under Secretary for Health<br>Washington, D.C.<br>Location: Overton Brooks VA Medical Center, Shreveport, LA<br><br>REPORT NUMBER(S) 2013006 | 2. NRC/REGIONAL OFFICE<br><br>Region III<br>U. S. Nuclear Regulatory Commission<br>2443 Warrenville Road, Suite 210<br>Lisle, IL 60532-4352 |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|

|                                            |                                           |                                                   |
|--------------------------------------------|-------------------------------------------|---------------------------------------------------|
| 3. DOCKET NUMBER(S)<br><br>030-34325       | 4. LICENSE NUMBER(S)<br><br>03-23853-01VA | 5. DATE(S) OF INSPECTION<br><br>December 19, 2013 |
| 6. INSPECTION PROCEDURES USED<br><br>87131 | 7. INSPECTION FOCUS AREAS<br><br>All      |                                                   |

**SUPPLEMENTAL INSPECTION INFORMATION**

|                                |                      |                                          |                                           |
|--------------------------------|----------------------|------------------------------------------|-------------------------------------------|
| 1. PROGRAM CODE(S)<br><br>2120 | 2. PRIORITY<br><br>3 | 3. LICENSEE CONTACT<br><br>Gary Williams | 4. TELEPHONE NUMBER<br><br>(501) 257-1572 |
|--------------------------------|----------------------|------------------------------------------|-------------------------------------------|

☐ Main Office Inspection      Next Inspection Date:      N/A

☒ Field Office Inspection      Shreveport, LA

☐ Temporary Job Site Inspection

**PROGRAM SCOPE**

This was a routine, unannounced inspection of permitted activities conducted under Department of Veterans Affairs Permit number 17-12273-01. The permit was issued to the VA Medical Center authorizing 10 CFR 35.100, 35.200, 35.300, and 35.500 material at the Shreveport, Louisiana location. The permit also authorizes a number of short and long-lived radionuclides that were used for research and development studies, and two sealed sources of strontium-90 and cesium-137 that are in secured storage pending disposal. The staff consisted of one supervisory nuclear medicine technologist (NMT), six staff NMT's, and two administrative staff. There were two full-time physician authorized users present during the inspection. The nuclear medicine facilities included a hot lab, four imaging rooms, one room for cardiac stress tests, a radwaste room in the nuclear medicine department and a radwaste bunker for storage of the two sealed sources.

An average of 15 cardiac stress studies and 6 other diagnostic studies, including PET procedures, are conducted each day. Flourine-18 is ordered from Southern Isotopes in bulk or unit doses. The permittee receives a six curie molybdenum-99/technetium-99m generator every Sunday from Mallinckrodt, Inc., and unit doses are ordered from Cardinal Health as needed. Approximately twenty iodine-131 studies requiring a written directive are performed each year. All patients that were administered iodine-131 requiring a written directive were evaluated for release in accordance with regulatory requirements.

The Radiation Safety Officer (RSO) is an authorized physician user named on the permit. Medical Physics Consultants, Inc., provided services which included, but were not limited to, QA/QC of equipment, leak-testing of sealed sources, and program audits.



**Docket File Information**

**SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION**

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December 19, 2013

**PROGRAM SCOPE (Continued)**

**Performance Observations**

The nuclear medicine department, waste storage room and waste storage bunker, and imaging rooms were appropriately posted and secured. Radioactive shipments were delivered to the hot lab and checked for removable contamination and radiation levels by nuclear medicine staff. Instrument preparation and calibration is performed each morning prior to the patient studies.

The inspector observed dose preparation and administration of radiopharmaceuticals to patients by NMT's. The dose calibrator was used to measure doses prior to all administrations. The NMT's used ALARA techniques, wore protective clothing, used syringe shields, and utilized appropriate personal dosimetry during all radioisotope handling. Appropriate use of survey meters was demonstrated or described by NMT's. The inspector also observed and had discussions with nuclear medicine staff about protocols that were implemented for radioactive material package receipt, and area and patient surveys. The inspector interviewed several NMT's, as well as the RSO/physician authorized user who oversees the safety program, about the permittee's implementation of its radiation safety program.

Administrations requiring a written directive consisted primarily of whole body scans and thyroid therapy using iodine-131. Iodine-131 was administered in capsule form only. Patients that were administered iodine-131 for therapy were surveyed after administration, released in accordance with 10 CFR 35.75, and provided written instructions to keep radiation dose ALARA to family members. A random selection of written directives were reviewed for iodine-131 treatments, as well as two written directives for samarium-153 treatments. Other documents reviewed included program audits, occupational dosimetry records, radiation safety committee meeting minutes, leak tests and inventory records, and instrument calibrations.

The inspector reviewed results of surveys conducted in three rooms in building 33 where research and development studies were conducted. The last time material was used in the building was about 4 years ago. Results of surveys for removable contamination indicated that the building is suitable for release for unrestricted use. The permittee is working with the National Health Physics Program (NHPP) to close out the building and release it for unrestricted use. Permittee management indicated that they planned to submit a request to NHPP before the end of calendar year (CY) 2013. A telephone contact with the NHPP on January 9, 2014, confirmed that on December 30, 2013, the permittee submitted closeout survey results of the rooms and requested that they be released for unrestricted use. The permittee's request was being evaluated by the NHPP.

No violations were identified.



G. Williams

- 2 -

Should you have any questions concerning this inspection or the enclosed report, please contact Kevin Null of my staff at (630) 829-9854.

Sincerely,

/RA/

Patricia J. Pelke, Chief  
Materials Licensing Branch  
Division of Nuclear Materials Safety

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|--------|---------------|---|-------------|--|------|--|------|--|
| OFFICE | RIII DNMS     | E | RIII DNMS   |  | RIII |  | RIII |  |
| NAME   | KGNull:ps*KGN |   | PJPelke*PJP |  |      |  |      |  |
| DATE   | 1/14/14       |   | 1/14/14     |  |      |  |      |  |

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