

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED:

Prime Healthcare Services - Blue Springs,
LLC d/b/a St. Mary's Medical Center
201 West R.D. Mize Rd.
Blue Springs, MO

2. NRC/REGIONAL OFFICE

Region III
2443 Warrenville Rd.
Lisle, IL 60532

Select a location (Use keyboard arrows to select). . .

REPORT NUMBER(S) 2016-001

3. DOCKET NUMBER(S)

030-18183

4. LICENSE NUMBER(S)

24-20274-01

5. DATE(S) OF INSPECTION

6/3/16

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	Robert G. Gattone, Jr.	Robert G. Gattone, Jr.	6/3/16
BRANCH CHIEF	Aaron T. McCann		6/14/16

Docket File Information

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St. Mary's Medical Center
201 West R.D. Mize Rd.
Blue Springs, MO

REPORT NUMBER(S) 2016-001

2. NRC/REGIONAL OFFICE

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

3. DOCKET NUMBER(S)

030-18183

4. LICENSE NUMBER(S)

24-20274-01

5. DATE(S) OF INSPECTION

6/3/16

6. INSPECTION PROCEDURES USED

87131

7. INSPECTION FOCUS AREAS

02.01 through 02.07

SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM CODE(S)

02120

2. PRIORITY

3

3. LICENSEE CONTACT

James Bergh, M.D., RSO

4. TELEPHONE NUMBER

(816) 228-5900

☒ Main Office Inspection

Next Inspection Date: 06/03/2019

☐ Field Office Inspection

☐ Temporary Job Site Inspection

PROGRAM SCOPE

The licensee's work hours were from 7:00am to 4:00pm Monday through Friday. The licensee conducted activities authorized by 10 CFR 35.100, 35.200 (excluding positron emission tomography), and 35.300 (limited to iodine-131). The licensee had two full time nuclear medicine technologists (NMTs). The licensee had not conducted 35.300 activities since 2013. No 35.300 activities were conducted during this inspection. The licensee received unit dosages from a commercial radiopharmacy.

Performance Observations

The inspector: (1) observed that licensed material was secured as required; (2) noted that the radiation safety officer was as authorized; (3) observed an NMT conduct gamma camera quality control tests; (4) observed an NMT conduct package receipt surveys; (5) observed an NMT don dosimeter badges; (6) observed an NMT conduct a dose calibrator constancy check prior to first use of the day; (7) noted that an NMT knew how to respond to a failed dose calibrator constancy check result; (8) noted that Cardinal Health conducted quarterly audits of the licensee's radiation protection program; (9) noted that the physician authorized users were as authorized; (10) noted that the licensee conducted daily ambient exposure rate surveys and weekly wipe surveys of selected areas; (11) observed an NMT demonstrate how he would respond to a radioactive spill based on a scenario posed by the inspector; (12) observed an NMT prepare a diagnostic imaging dosage for administration to a patient; (13) noted that syringe holders and syringes were labeled as required; (14) observed an NMT demonstrate how decay in storage was used for radioactive waste disposal; (15) noted that a survey instrument was calibrated as required; (16) observed an NMT administer Sestamibi to a patient using radiation protection techniques; (17) observed an NMT conduct a physical inventory of sealed sources; (18) reviewed selected records of sealed source leak tests; (19) reviewed selected records of sealed source inventories; (20) reviewed the last iodine-131 written directive dated 12/11/13 and noted that it contained the required information; (21) reviewed records associated with the iodine-131 written directive dated 12/11/13 and noted that the licensee used independent dual verification of the patient's identification prior to administration, pre-administration dosage verification, and post-administration dosage verification; (22) observed dosimetry records showing that whole body and extremity doses were well below regulatory limits; (23) reviewed selected dose calibrator calibration records; and (24) reviewed selected area survey records.