

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED:

Freeman - Oak Hill Health System
1102 W 32nd St.
Joplin, MO 64804

REPORT NUMBER(S) 2018001

2. NRC/REGIONAL OFFICE

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

3. DOCKET NUMBER(S)

030-12360

4. LICENSE NUMBER(S)

24-17205-01

5. DATE(S) OF INSPECTION

February 6, 2018

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:

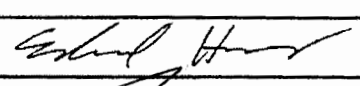
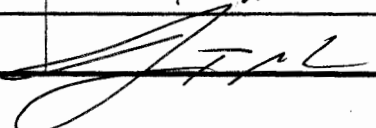
- ☒ 1. Based on the inspection findings, no violations were identified.
- ☐ 2. Previous violation(s) closed.
- ☐ 3. The violation(s), specifically described to you by the inspector as non-cited violations, are not being cited because they were self-identified, non-repetitive, and corrective action was 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	Edward F. Harvey		2/6/18
BRANCH CHIEF	Aaron T. McCraw		2/21/18

Docket File Information

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED: Freeman - Oak Hill Health System 1102 W 32nd St. Joplin, MO 64804 REPORT NUMBER(S) 2018001		2. NRC/REGIONAL OFFICE Region III U. S. Nuclear Regulatory Commission 2443 Warrenville Road, Suite 210 Lisle, IL 60532-4352	
3. DOCKET NUMBER(S) 030-12360	4. LICENSE NUMBER(S) 24-17205-01	5. DATE(S) OF INSPECTION February 6, 2018	
6. INSPECTION PROCEDURES USED 87131, 87132	7. INSPECTION FOCUS AREAS All		

SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM CODE(S) 02230	2. PRIORITY 2	3. LICENSEE CONTACT Paul Jones, MD - RSO	4. TELEPHONE NUMBER (417) 626-1111
<input checked="" type="checkbox"/> Main Office Inspection Next Inspection Date: February 6, 2020			
<input checked="" type="checkbox"/> Field Office Inspection 932 East 34th Street, Joplin, MO			
<input type="checkbox"/> Temporary Job Site Inspection			

PROGRAM SCOPE

This was an unannounced, routine inspection of a medical institution with authorization to use byproduct materials for diagnostic and therapeutic medical procedures under 10 CFR 35.100, 35.200, 35.300, and 35.600. Licensed activities were conducted at two facilities in Joplin, Missouri. At the location on West 32nd Street (West), the licensee performed approximately six diagnostic studies out of its radiology department and approximately eight cardiac stress tests out of its Heart Center per day. At the location on East 34th Street (East), the licensee operated a PET Center that performed an average of seven studies daily and an additional radiology department that performed approximately four studies per day. Five NMTs rotated through all four departments, with two NMTs staffed in the Heart Center. The licensee maintained an active I-131 therapy program at both locations; however, all doses over 33 mCi were administered from the East location at a frequency of approximately two per month. The licensee installed an HDR at its East location on 10/11/2017 and went clinical on 10/19/2017. Since that time, seven patients have received gynecological treatments with the HDR. The licensee still possessed temporary implant brachytherapy seeds in secured storage at the West facility, pending disposal.

The inspector observed nuclear medicine staff demonstrate package receipt and surveying procedures, daily dose calibrator constancy checks, daily surveys, and waste disposal procedures. In addition, the inspector observed the administration of a Tc-99m for a lung scan. The inspector noted that the NMT wore the appropriate personal protective equipment, assayed the dose, and verified patient identity prior to administering the doses. The nuclear medicine staff also demonstrated adequate knowledge of radiation protection principles and emergency procedures in the event of a spill through interviews with the inspector. In the radiation oncology department, the inspector toured the new HDR vault and observed licensee staff perform their daily checks that are completed prior to patient treatment.

The inspector reviewed a selection of licensee records, including written directives, treatment plans, quarterly audits, source inventories, survey meter calibration records, package receipt logs, dosimetry, and RSC meeting minutes with no issues noted. In addition, the inspector performed independent surveys, which revealed no readings that would indicate residual contamination or exposures to members of the public in excess of regulatory limits.

No violations of NRC requirements were identified during this inspection.