

JACKSONKELLY PLLC

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www.jacksonkelly.com

March 18, 2019

Br. 1

Via Overnight Courier

U.S. Nuclear Regulatory Commission, Region I
2100 Renaissance Blvd., Suite 100
King of Prussia, PA 19406-2713

RE: Transfer of Control Application
Summersville Regional Medical Center
Material License No. 47-31126-01 /03037131

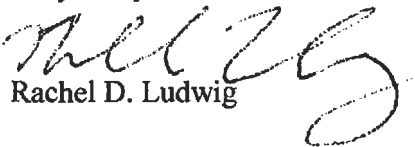
REC R61032019M0942

To whom it may concern:

Enclosed with this letter is the Transfer of Control Application submitted on behalf of Summersville Regional Medical Center and The West Virginia Health Care Cooperative, Inc. related to the change of control of Material License No. 47-31126-01. The projected effective date for the transaction further described in this application is July 1, 2019.

If you have any questions or concerns, please contact me at (304) 340-1185.

Very Truly Yours,


Rachel D. Ludwig

RDL/nej
Enclosure

611667
MATERIALC-00



400 Fairview Heights Rd. • Summersville, WV 26651 • 304-872-2891 • www.summersvilleregional.org

March 18, 2019

U.S. Nuclear Regulatory Commission, Region I
2100 Renaissance Blvd., Suite 100
King of Prussia, PA 19406-2713

RE: Summersville Regional Medical Center
Material License No. 47-31126-01

To whom it may concern:

The purpose of this letter is to advise you that The West Virginia Health Care Cooperative, Inc. ("WVHCC") intends to assume operations of Summersville Regional Medical Center ("SRMC") from Summersville Regional Medical Center Commission and lease the properties owned by the City of Summersville Building Commission for purposes of operating SRMC (the "Transaction"). West Virginia University Hospitals, Inc. is the sole member of WVHCC. In accordance with 10 C.F.R. §§ 30.34 and 70.36, SRMC and WVHCC jointly request the consent of the Nuclear Regulatory Commission ("NRC") to the change of control of Material License No. 47-31126-01 from SRMC to WVHCC. The projected effective date for the Transaction is July 1, 2019.

Enclosed with this letter is the Information Needed for Transfer of Control Application. Following the Transaction, there will be no changes to the personnel, use or location of the devices, but the licensee will change to WVHCC. WVHCC will abide by all constraints, conditions, requirements, representations and commitments of the current owner.

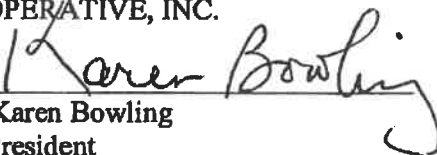
If you have any questions or concerns, please contact SRMC's representative, Karen Bowling, at (304) 872-8402, or WVHCC's counsel, Rachel D. Ludwig, at (304) 340-1185.

SUMMERSVILLE REGIONAL MEDICAL
CENTER

By: Karen Bowling
Its: President and CEO

March 18, 2019 Correspondence Re: Summersville Regional Medical Center Material License
No. 47-31126-01 acknowledged by:

THE WEST VIRGINIA HEALTH CARE
COOPERATIVE, INC.


By: Karen Bowling
Its: President

SUMMERSVILLE REGIONAL MEDICAL CENTER
License No. 47-31126-01
Information Needed for Transfer of Control Application
to Transfer License to The West Virginia Health Care Cooperative, Inc.

Include a contact name and either U.S. Nuclear Regulatory Commission (NRC) regional office or Headquarters telephone numbers for follow-up information, as required.

NRC Region: Region I
Telephone: 304-373-1528

Contact: Steve Radabaugh
Fax: 304-373-1543

Definitions:

Control: Control of a license is in the hands of the person or persons who are empowered to decide when and how that license will be used. That control is to be found in the person or persons who, because of ownership or authority explicitly delegated by the owners, possess the power to determine corporate policy and, thus, the direction of the activities under the license.

Transferee: A transferee is an entity that proposes to purchase or otherwise gain control of an NRC-licensed operation.

Transferor: A transferor is an NRC licensee selling or otherwise giving up control of a licensed operation.

Information Needed for Transfer of Control

Licensees must provide full information and obtain NRC's *prior written consent* before transferring control of the license. Provide the following information concerning changes of control by the applicant (transferor and/or transferee, as appropriate). If any items are not applicable, so state.

1. Describe any planned changes in the organization, including but not limited to, transfer of stocks or assets and mergers, change in members on Board of Directors, etc. Provide the new licensee name, mailing address, and contact information, including phone numbers. Clearly identify when the amendment request is due to a name change only.

Summersville Regional Medical Center and The West Virginia Health Care Cooperative, Inc. have entered into an Operating Lease and Agreement dated December 31, 2018 (the "Agreement"), whereby the parties agree that The West Virginia Health Care Cooperative, Inc. will assume operations of Summersville Regional Medical Center from Summersville Regional Medical Center Commission and lease the properties owned by the City of Summersville Building Commission for purposes of operating Summersville Regional Medical Center (the "Transaction"). The anticipated effective date of the Transaction is July 1, 2019. Under the terms of the Agreement, Summersville Regional Medical Center is required to obtain approval by the NRC for the change of control in the licensed nuclear material to The West Virginia Health Care Cooperative, Inc.

The name of the transferee is: The West Virginia Health Care Cooperative, Inc. d/b/a Summersville Regional Medical Center.

The licensee will change to The West Virginia Health Care Cooperative, Inc. d/b/a Summersville Regional Medical Center.

The mailing address and contact information for the transferee will remain the same and is:

**James Michael Helvey, CNMT
400 Fairview Heights Road, Summersville, West Virginia 26651
Phone Number: 304-872-8439
Fax Number: 304-872-8584
mhelvey@srmcwv.org**

See attached pre- and post-transaction organizational charts showing the corporate structure of the license holder.

2. Describe any changes in personnel or duties that relate to the licensed program. Include training and experience for new personnel and any changes in the training program.

No changes to personnel. The Radiation Safety Officer for the activities authorized by this license will remain the same—James Michael Helvey, CNMT. Mr. Helvey's certificate is attached.

3. Describe any changes in the location, facilities, equipment, radiation safety program, use, possession, waste management, or other procedures that relate to the licensed program.

There will be no changes in location, facilities, equipment, or procedures that relate to the licensed program. The only change is the name of the licensee—The West Virginia Health Care Cooperative, Inc. d/b/a Summersville Regional Medical Center.

4. Describe the status of the licensee's facilities, equipment, and radiation safety program, including any known contamination and whether decontamination will occur prior to transfer. Include the status of calibrations, leak tests, area surveys, wipe tests, training, quality control, and related records.

All required surveillance has been performed, documented, and reviewed. See attached NRC's Safety Inspection Report and Compliance Inspection dated January 23, 2018 and Physicist's Report – Nuclear Medicine by National Physics Consultants, Ltd. dated February 14, 2019.

5. If current decommissioning funding plans (DFP) will be changed as a result of the transfer, the revised DFP should be submitted. If other financial assurance documents will be changed as a result of the transfer, confirm that all financial assurance instruments associated with the license will be held in the transferee's name before the license is transferred, and as required by 10 CFR 30.35(f), the licensee must, within 30 days, submit financial instruments reflecting such changes.

Not applicable.

6. Confirm that all records concerning the safe and effective decommissioning of the facility will be transferred to the transferee or to NRC, as appropriate. These records include

documentation of surveys of ambient radiation levels and fixed and/or removable contamination, including methods and sensitivity.

Not applicable.

7. Confirm that both transferor and transferee agree to transferring control of the licensed material and activity, and the conditions of transfer, and that the transferee has been made aware of any open inspection items and its responsibility for possible resulting enforcement actions.

Summersville Regional Medical Center and The West Virginia Health Care Cooperative, Inc. agree to transferring control of the licensed material and activity, and the conditions of transfer. Summersville Regional Medical Center has made The West Virginia Health Care Cooperative, Inc. aware of any open inspection items and its responsibility for possible resulting enforcement actions.

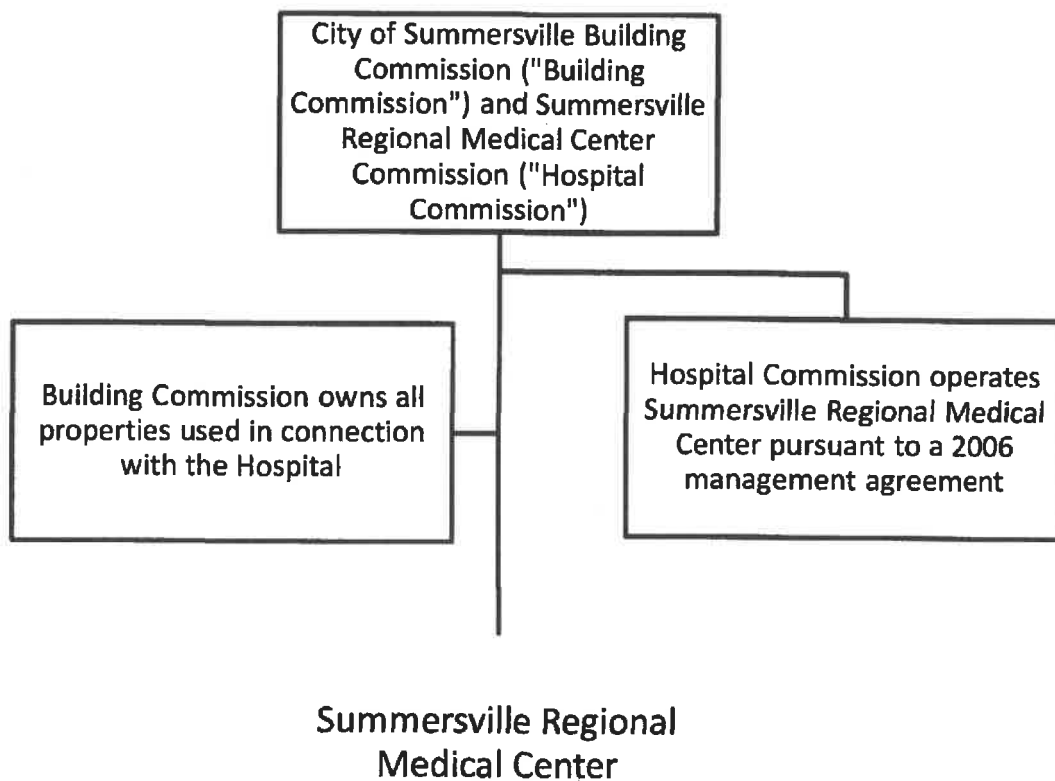
8. Confirm that the transferee will abide by all constraints, conditions, requirements, representations, and commitments of the transferor or that the transferee will submit a complete description of the proposed licensed program.

The West Virginia Health Care Cooperative, Inc. will abide by all constraints, conditions, requirements, representations and commitments of Summersville Regional Medical Center.

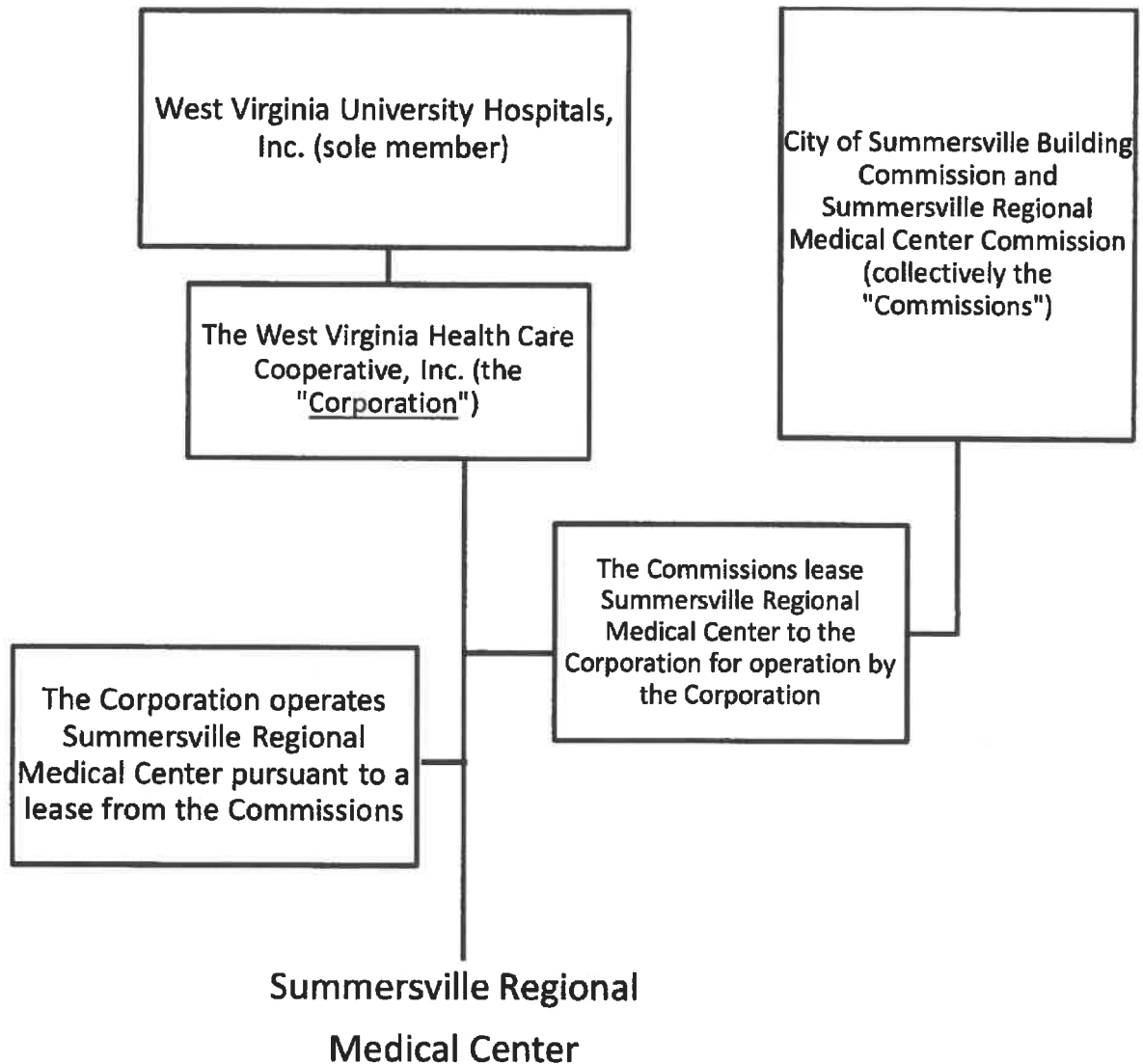
9. The transferee, in the case of fuel cycle facilities, shall provide documentation showing that it is financially qualified to conduct normal operations. The information can be in the form of income statements and balance sheet forecasts.

Not applicable.

PRE-TRANSACTION ORGANIZATIONAL CHART



POST-TRANSACTION ORGANIZATIONAL CHART



**State of West Virginia
Medical Imaging and Radiation Therapy
Technology Board of Examiners**

- This is to certify that -

James M. Helvey

is hereby licensed as a
Medical Imaging Technologist
licensed in

Nuclear Medicine

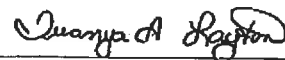
pursuant to the provisions of
Chapter 30, Article 23 et. Seq. of the
West Virginia code of 1931, as amended

Each licensee shall conspicuously display this certificate
in the principal place of employment at all times. This
constitutes the authority to practice Medical Imaging. Current
license status must be verified online at www.wvrtboard.org

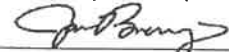
In Witness Whereof, the signature of the Chairperson
and the seal of the Medical Imaging and Radiation
Therapy Technology Board of Examiners is hereby
Affixed.

This certificate is dated **11/26/2017**

License number **9038**



Tuanya Layton, Chairperson



Jamie Browning, Executive Director



NMTCB

www.nmtcb.org
(404) 315-1739

The Nuclear Medicine Technology
Certification Board CERTIFIES THAT

James Helvey

Cert Number: 024329

is an active Certified Nuclear Medicine Technologist in good standing.

⊗ **Certificant since: 5/22/2003**

Expiration: 12/31/2019

The status is only guaranteed at the time this card was issued. For up to date status,
please refer to the online verification function at www.nmtcb.org.

NRC FORM 591M PART 1
(07-2012)
10 CFR 2.201

U.S. NUCLEAR REGULATORY COMMISSION

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED:
Summersville Regional Medical Center
400 Fairview Heights Road
Summersville, West Virginia 26651

2. NRC/REGIONAL OFFICE

U.S. Nuclear Regulatory Commission
Region I, 2100 Renaissance Blvd, Suite 100
King of Prussia, Pennsylvania 19406-2713

REPORT NUMBER(S) 2018001

3. DOCKET NUMBER(S)
030-371314. LICENSE NUMBER(S)
47-31126-015. DATE(S) OF INSPECTION
1/23/18

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) and corrective action(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 the 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	TIM HOWARD	Tim Howard	1/24/18
NRC INSPECTOR	Robin Elliott	Robin Elliott	1/23/18
BRANCH CHIEF			

SUNSI Review Completed By: /RA/ RElliott

☒ Public
 ☒ Non-Sensitive

NATIONAL PHYSICS CONSULTANTS, LTD.

www.nationalphysics.com

1-888-456-5255

kstoneberg@nationalphysics.com

Physicist's Report – Nuclear Medicine

Walt Smith
Summersville Regional Medical Center
400 Fairview Heights Road
Summersville, WV 26651
RSO: Mike Helvey
Technologist(s): Mike Helvey

February 14, 2019

This visit included a review of NRC and/or State license status, examination of records pertaining to the radiation safety program and the performance of quality control procedures on various equipment in the nuclear medicine department. Evaluation and testing were performed to assure compliance with the regulations and standards of the various state and/or national agencies. Areas of special interest or regulatory variances are discussed below.

All personnel received exposures less than the ALARA I trigger limits.

LICENSING

- The facility is being purchased by West Virginia University. In accordance with regulation 10 CFR 30.34, before the transfer of control of the license, it is necessary to obtain the NRC's written consent. Please contact our office for assistance in documenting the transfer of control to the NRC once the necessary information is received.

PERSONNEL DOSIMETRY

- The NRC form 5's or equivalent notifications for 2017 are in the process of being distributed to the appropriate personnel. It is recommended that this item be completed as soon as possible.
- All appropriate personnel will need to receive their NRC Form 5 or equivalent notification for 2018.

ADMINISTRATIVE/EDUCATION

- The annual management review of the Radiation Safety Program will be due in May of 2019. The review will be completed in conjunction with our next visit.
- The annual review of radiation safety for radiation workers including stress lab workers is in progress. Please forward documentation of the training to our office upon completion.
- The annual review of the operating procedure manual is due.

SEALED SOURCES

- One old Co-57 flood source has been returned to the manufacturer. Documentation of the return is on file.

SURVEYS

- There was no record of the required daily area survey being performed on 11/29/18, 12/21/18, 1/4/19 and 1/11/19. The technologists were notified of the omissions. Attention to this item is recommended.

ACCREDITATION

- If required, the annual gamma camera testing will be due in May of 2019.

EQUIPMENT

- The survey meter with serial number 226174 will be due for calibration in April of 2019.



C. Kelly Stoneberg
Consultant

RSO's Signature

MEDICAL PHYSICS SURVEY

FACILITY: Summersville Regional		LOCATION: Summersville, WV					
	DATE:	11/30/17	2/8/18	5/3/18	8/7/18	11/20/18	2/14/19
I. LICENSING							
1.	NRC license current. Amendment #10 Expires: 4/30/26	YES	YES	YES	YES*	YES*	YES*
2.	License Applications and supporting documents available for reference.	YES	YES	YES	YES	YES	YES
3.	Materials/Possession limits current and not exceeded.	YES	YES	YES	YES	YES	YES
4.	Facilities description current. Temporary and remote waste storage sites authorized. Future plans/changes considered.	YES	YES	YES	YES	YES	YES
5.	NRC Regulations available on line.	YES	YES	YES	YES	YES	YES
6.	Last regulatory inspection report on file. Corrective action. Last inspection date: 5/20/15	YES	YES	YES	YES	YES	YES
II. PERSONNEL DOSIMETRY							
1.	Personnel dosimetry records in order. Reviewed through:	YES 10/14/17	YES 1/14/18	YES*	YES 4/14/18	YES 7/4/18	YES 10/4/18
2.	Current yearly occupational radiation dose determined for new/temporary employees, as required. Attempt to obtain cumulative occupational radiation dose records.	YES	YES	pending		YES	YES
3.	Whole body & ring badges worn by all personnel handling or using radioactive materials, as required, including declared pregnant radiation workers.	YES	YES	YES	YES	YES	YES
4.	Annual notification of yearly occupational dose given to employees that exceed 100 mrem. Last Received: 2016	YES	YES*	YES*	YES*	YES*	YES*

MEDICAL PHYSICS SURVEY

FACILITY: Summersville Regional

LOCATION: Summersville, WV

DATE:	11/30/17	2/8/18	5/3/18	8/7/18	11/20/18	2/14/19
III. ADMINISTRATIVE/EDUCATION						
1. Annual Management review of the Radiation Safety Program. Last date performed: 5/18	YES	YES*	YES*	YES*	YES	YES*
2. Annual review of radiation safety for radiation workers including DOT. Last date performed: 1/18	YES*	YES*	YES	YES	YES*	YES*
3. Annual review of radiation safety for non-radiation workers. Last date performed: 10/18	YES*	YES	YES	YES*	YES	YES
4. Operating Procedure Manual available. Date last reviewed: 1/18	YES*	YES*	YES	YES	YES*	YES*
5. Medical Physics Survey reviewed & signed by Radiation Safety Officer.	YES	YES	YES	YES	YES	YES
6. Required training given to new employees during orientation. (QMP, Hazmat, Reg. Guide 8.13)	YES	YES	YES	YES	YES	YES
7. Air emission evaluations for calendar year on file. Report submitted, if necessary.	NA	NA	NA	NA	NA	NA
IV. HEALTH PHYSICS						
1. Radioactive materials properly stored.	YES	YES	YES	YES	YES	YES
2. Gloves available and used.	YES	YES	YES	YES	YES	YES
3. Syringe/Vial shields and labels used and completed.	YES	YES	YES	YES	YES	YES
4. Adequate shielding during elution, kit preparation, and storage.	YES	YES	YES	YES	YES	YES
5. Hands monitored periodically and prior to leaving the restricted areas.	YES	YES	YES	YES	YES	YES
6. Restricted area secured.	YES	YES	YES	YES	YES	YES
V. RADIOPHARMACEUTICALS						
1. Kit Preparation/Patient Disposition. Records in order.	YES	YES	YES	YES	YES	YES
2. Each patient dose assayed prior to administration.	YES	YES	YES	YES	YES	YES
3. Prescribed dosage ranges available.	YES	YES*	YES	YES	YES	YES
4. No medical events since the last visit. If so, records in order. If applicable, report submitted.	YES	YES	YES	YES	YES	YES

MEDICAL PHYSICS SURVEY

FACILITY: Summersville Regional

LOCATION: Summersville, WV

DATE: 11/30/17 2/8/18 5/3/18 8/7/18 11/20/18 2/14/19

VI. SEALED SOURCES

1. Sealed Source Inventory and Leak Test completed semi annually.	YES	YES	YES	YES	YES	YES*
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VII. SURVEYS

1. Area surveys performed and documented. Stress lab surveys included. Action levels documented.	YES	YES*	YES*	YES*	YES	YES*
2. Area wipe test performed and documented in DPM. Action levels documented.	YES	YES	YES	YES	YES	YES
3. Package receipt surveys include readings at surface, 1 meter, empty packing mat'l & wipe test(s).	YES	YES	YES	YES	YES	YES
4. Package(s) returned to mfg. or radiopharmacy include survey(s), wipe test(s), shipping papers, pkg. seals, & DOT labels, as required.	YES	YES	YES	YES	YES	YES
5. Radioactive materials labels defaced prior to disposal.	YES	YES	YES	YES	YES	YES
6. Waste surveys performed and documented.	YES	YES	YES	YES	YES	YES

VIII. POSTINGS/NOTICES

1. "Posting" for required documents available.	YES	YES	YES	YES	YES	YES
2. State "Notice to Employees" properly posted.	YES	YES	YES	YES	YES	YES
3. Emergency Procedures posted; including updated RSO & telephone numbers.	YES	YES	YES	YES	YES	YES
4. "Caution-Radioactive Materials" signs properly posted.	YES	YES	YES	YES	YES	YES
5. Defects and Noncompliance signs properly posted.	YES	YES	YES	YES	YES	YES

MEDICAL PHYSICS SURVEY

FACILITY: Summersville Regional

LOCATION: Summersville, WV

IX. ACCREDITATION TJC/ACR	11/30/17	2/8/18	5/3/18	8/7/18	11/20/18	2/14/19
1. Accreditation status determined TJC	YES	YES	YES	YES	YES	YES
2. Physicians, Physicists & Technologists meet ACR staffing requirements including continuing education	YES	YES	YES	YES	YES	YES
3. ACR notified of any unit changes.	N/A	N/A	N/A	N/A	N/A	N/A
4. Acceptance tests performed on any new unit upon installation	N/A	N/A	N/A	N/A	N/A	N/A
5. Annual performance tests completed and evaluated by physicist. Date last performed: 5/18	YES	YES*	YES*	YES	YES	YES*
6. System testing using Jaszczak phantom performed at least semi-annually on all SPECT systems.	N/A	N/A	N/A	N/A	N/A	N/A
7. High count rate floods performed monthly.	YES	YES	YES	YES	YES	YES
8. Center of rotation performed monthly.	YES	YES	YES	YES	YES	YES
9. Spatial resolution (Bars) performed weekly.	YES	YES	YES	YES	YES	YES
10. Uniformity evaluations (Floods) performed daily	YES	YES	YES	YES	YES	YES
11. Acquisition monitors tested annually Date last performed: 5/18	YES	YES	YES	YES	YES	YES

MEDICAL PHYSICS SURVEY

FACILITY: Summersville Regional

LOCATION: Summersville, WV

DATE:	11/30/17	2/8/18	5/3/18	8/7/18	11/20/18	2/14/19
X. EQUIPMENT						
1. Survey Meter Calibration current with certificate on file.	YES	YES*	YES	YES*	YES	YES*
2. Survey meter check source reading and battery check performed each day of use.	YES	YES	YES	YES	YES	YES
3. Dose Calibrator Constancy performed & documented each day of use. Limit: 10%	YES	YES	YES	YES	YES	YES
4. Dose Calibrator Activity Linearity performed upon installation and quarterly & documentation on file, including RSO signature. Limit: 10%	YES 11/30/17	YES 2/8/18	YES 5/3/18	YES 8/7/17	YES 11/20/18	YES 2/14/19
5. Dose Calibrator Accuracy performed upon installation and annually with documentation on file, including RSO signature. Limit: 10%	YES 8/3/17	YES 2/8/18	YES 2/8/18	YES 8/7/18	YES 8/7/18	YES 2/14/19
6. Dose Calibrator Geometry performed upon installation or after repair & documented including RSO signature. Last date performed: 4/7/06, 8/22/13	YES	YES	YES	YES	YES	YES
7. Gamma Camera QC performed as required.	YES	YES	YES	YES	YES	YES
8. Uptake probe calibrated each day of use and documented.	YES	YES	YES	YES	YES	YES
9. Well Counter calibrated each day of use & documented. Eff 90%, 8/7/18	YES	YES	YES	YES	YES	YES

MEDICAL PHYSICS SURVEY SURVEY METER EVALUATION

FACILITY: Summersville Regional

LOCATION: Summersville, WV

Type:	Ludlum	Ludlum
Mfg.:		
Model No.:	14C	14C
Serial No.:	226246	226174
Ck Source & Geometry	Internal	Internal

Calibrated	10/4/16	4/5/16
Calibrated	10/6/17	4/11/17
Calibrated	11/6/18	4/19/18

Date		
11/30/17	OK-3.0	OK-0.95
2/8/18	OK-3.0	OK-1.0*
5/3/18	OK-3.0	OK-1.0
8/7/18	OK-3.0*	OK-0.9
11/20/18	OK-3.0	OK-1.0
2/14/19	OK-3.0	OK-0.9*

MEDICAL PHYSICS SURVEY DOSE CALIBRATOR EVALUATION ACCURACY TEST

FACILITY: Summersville Regional

MODEL No.: Capintec CRC 15W

LOCATION: Summersville, WV

SERIAL No.: 171601

Date	Cs-137 (220) Cal/Disp/% (uCi)	Ba-133 (624) Cal/Disp/% (mCi)	Sealed Source Set Used	Test	Accuracy Performed By	Linearity Test
11/30/17	---	---	---	158.0	---	59.5 mCi – 25.7 μ Ci
2/8/18	157/158/0.7	179/178/0.6	#1	157.8	K. Stoneberg	71.6 mCi – 29.9 uCi
5/3/18	---	---	---	158.0	---	74.2 mCi – 30 uCi
8/7/18	155/156/0.6	173/171/1.3	#1	157.7	K. Stoneberg	68.0 mCi – 28.6 uCi
11/20/18	---	---	---	157.9	---	68.3 mCi – 13.0 uCi
2/14/19	153/151/1.5	167/166/0.8	#1	158.1	K. Stoneberg	61.9 mCi – 26.3 uCi

#1 Cs-137, S/N 76918. Ba-133, S/N BM06133E12058206

CONSTANCY READINGS

Date	Tc-99m (080) uCi	Tl-201 (205) uCi	Cs-137 (220) uCi	I-123 (277) uCi
11/30/17	292	167	159	133
2/8/18	292	166	158	133
5/3/18	291	166	158	133
8/7/18	289	165	156	132
11/20/18	287	163	156	131
2/14/19	285	163	151	130

Source: Cs-137
Model: MED 3550

Activity: 206.5
Calibration: 3/1/06

MEDICAL PHYSICS SURVEY SCINTILLATION PROBE EVALUATION

FACILITY: Summersville Regional
LOCATION: Summersville, WV

MODEL No.: AtomLab 960
S/N.:150

Date	NUCLIDE	CPM	RESOLUTION	CHI ²	HV
11/30/17	Cs-137	64370	6.7%	9.46	1031
2/8/18	Cs-137	66030	6.8%	8.23	1033
5/3/18	Cs-137	63989	6.8%	8.06	1033
8/7/18	Cs-137	65194	6.8%	6.86	1035
11/20/18	Cs-137	63373	6.6%	10.34	1034
2/14/19	Cs-137	64639	6.8%	4.14	1037

SCINTILLATION WELL EVALUATION

FACILITY: Summersville Regional
LOCATION: Summersville, WV

MODEL No.: Capintec CRC 15W
S/N.:171601

Date	NUCLIDE	GAIN	KCPM	DEVIATION	ENERGY DEVIATION	CHA 4-5	CHI ²
11/30/17	Cs-137	1958	49.59	0.4%	0.5%	0.89	8.7
2/8/18	Cs-137	1958	50.70	-0.2%	-0.5%	1.00	3.1
5/3/18	Cs-137	1958	50.94	1.1%	-0.5%	0.97	---
8/7/18	Cs-137	1974	49.40	0.3%	0.3%	0.91	1.9
11/20/18	Cs-137	1974	52.51	0.0%	-1.1%	0.91	2.4
2/14/19	Cs-137	1990	49.90	0.6%	0.4%	0.92	1.8

Wipe Efficiency – Co-57, 90%, 8/7/18

MEDICAL PHYSICS SURVEY SEALED SOURCE INVENTORY

FACILITY: Summersville Regional
LOCATION: Summersville, WV

DEPARTMENT: Nuclear Medicine

Nuclide:	Cs-137	Cs-137	Cs-137	Co-57	Long Term Storage Sources
Type:	Vial	Rod	Button	Flood	
Location:	Hot Lab	Hot Lab	Hot Lab	Hot Lab	
Assay:	206.5 uCi	100.6 nCi	10 uCi	15 mCi	
(Date)	3/1/06	4/1/06	5/1/06	11/23/18	
Mgr:	NAS	NAS	Cardinal Health	RadQual	
Serial No.:	76918	77051	1140-97-15	BM01L151829 7202	
Model:	MED 3550	MED 3400		BM01L-15	

DATE					Performed by:
11/30/17	X	X	X	X	K. Stoneberg
2/8/18	X	X	X	X	K. Stoneberg
5/3/18	X	X	X	X	K. Stoneberg
8/7/18	X	X	X	X	K. Stoneberg
11/20/18	X	X	X	X*	T. Parsons
2/14/19	X	X	X	X	K. Stoneberg

Long Term Storage Sources – (Co-57, Line, 160 uCi, 6/1/07, Cardinal Health, S/N 1231-68),
(Co-57, Vial, 5.644 mCi, 3/1/06, NAS, MED3550, S/N 76779)
(Co-57, Button, 100 uCi, 8/1/06, S/N 1194-32-8)

X – Inventoried

R – Returned to Manufacturer

MEDICAL PHYSICS SURVEY SEALED SOURCE INVENTORY

FACILITY: Summersville Regional
LOCATION: Summersville, WV

DEPARTMENT: Nuclear Medicine

Nuclide:	Ba-133	Cs-137
Type:	Vial	Button
Location:	Hot Lab	Hot Lab
Assay:	265 uCi	10 uCi
(Date)	3/2/12	6/1/13
Mgr:	Benchmark	
Serial	BM06133E120	1639-66-22
No.:	58206	
Model:		

DATE			Performed by:
11/30/17	X	X	K. Stoneberg
2/8/18	X	X	K. Stoneberg
5/3/18	X	X	K. Stoneberg
8/7/18	X	X	K. Stoneberg
11/20/18	X	X	T. Parsons
2/14/19	X	X	K. Stoneberg

X – Inventoried
R – Returned to Manufacturer

MEDICAL PHYSICS SURVEY **SEALED SOURCE LEAK TEST ANALYSIS REPORT**

FACILITY: Summersville Regional DEPARTMENT: Nuclear Medicine

LOCATION: Summersville, WV ATTENTION: RSO

Analysis of the WIPE used to conduct a leak test on the sealed sources identified below was performed by gas or scintillation detection and reveals removable contamination was less than 0.005 uCi, unless otherwise noted, when compared against NIST traceable standards.

Source: Cs-137, Vial, 206.5 uCi, 3/1/06, NAS, S/N 76779

Date:	11/30/17	2/8/18	5/3/18	8/7/18	11/20/18	2/14/19
Wipe No.:	SR 17-10	SR 18-1	SR 18-4	SR 18-7	SR 18-10	SR 19-1
MDA (uCi):	1.6 E-4	1.6 E-4	1.6 E-4	1.2 E-4	1.2 E-4	1.2 E-4
Net CPM:	<MDA	<MDA	<MDA	<MDA	<MDA	<MDA
Net uCi:	<0.005	<0.005	<0.005	<0.005	<0.005	<0.005
CPM for 0.005 uCi:	3276	3276	3276	3560	3560	3560
Analyst:	K. Stoneberg	K. Stoneberg	K. Stoneberg	K. Stoneberg	T. Parsons	K. Stoneberg
Swabbed By	K. Stoneberg	K. Stoneberg	K. Stoneberg	K. Stoneberg	T. Parsons	K. Stoneberg

Source: Co-57, Flood, 15 mCi, 11/23/18, RadQual, S/N BM01L1518297202

Date:	2/14/19
Wipe No.:	SR 19-2
MDA (uCi):	4.1 E-5
Net CPM:	<MDA
Net uCi:	<0.005
CPM for 0.005 uCi:	9891
Analyst:	K. Stoneberg
Swabbed By	K. Stoneberg

Source: Ba-133, Vial, 265 uCi, 3/2/12, S/N BM06133E12058206

Date:	11/30/17	2/8/18	5/3/18	8/7/18	11/20/18	2/14/19
Wipe No.:	SR 17-12	SR 18-3	SR 18-6	SR 18-9	SR 18-12	SR 19-3
MDA (uCi):	5.2 E-5	5.2 E-5	5.2 E-5	4.1 E-5	4.1 E-5	4.1 E-5
Net CPM:	<MDA	<MDA	<MDA	<MDA	<MDA	<MDA
Net uCi:	<0.005	<0.005	<0.005	<0.005	<0.005	<0.005
CPM for 0.005 uCi:	9861	9861	9861	9940	9940	9940
Analyst:	K. Stoneberg	K. Stoneberg	K. Stoneberg	K. Stoneberg	T. Parsons	K. Stoneberg
Swabbed by	K. Stoneberg	K. Stoneberg	K. Stoneberg	K. Stoneberg	T. Parsons	K. Stoneberg

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