



**UNITED STATES  
NUCLEAR REGULATORY COMMISSION**  
REGION III  
2443 WARRENVILLE RD. SUITE 210  
LISLE, IL 60532-4352

May 23, 2022

Edwin M. Leidholdt, Ph.D. Director  
National Health Physics Program (115 HP/NLR)  
Department of Veterans Affairs  
Veterans Health Administration  
2200 Fort Roots Drive  
Building 101  
North Little Rock, AR 72114

**SUBJECT: NRC INSPECTION REPORT 03034325/2022001(DNMS) – VA MEDICAL  
CENTER, HAMPTON, VIRGINIA**

Dear Dr. Leidholdt:

On April 14, 2022, the U.S. Nuclear Regulatory Commission (NRC) conducted a routine inspection at the VA Medical Center, Hampton, Virginia. The inspection was limited to a review of activities authorized under Permit Number 45-07569-01. 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 the NRC's Agencywide Documents Access and Management System (ADAMS, accessible from the NRC Web site at <http://www.nrc.gov/reading-rm/adams.html>).

Should you have any questions concerning this inspection or the enclosed report, please contact Bryan Parker of my staff at 678-828-7050.

Sincerely,

**Michael M.  
LaFranzo**

 Digitally signed by Michael M.  
LaFranzo  
Date: 2022.07.15 12:29:56 -05'00'

Michael LaFranzo, Acting Chief  
Materials Licensing Branch  
Division of Nuclear Materials Safety

Docket No. 030-34325  
License No. 03-23853-01VA  
Permit No. 45-07569-01

Enclosure:  
IR 03034325/2022001



## Materials Inspection Report

## 1. Licensee/Location Inspected:

Department of Veteran Affairs  
Hampton VA Medical Center  
100 Emancipation Drive  
Hampton, VA 23667

Report Number(s) 03034325/2022001

## 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)

03-23853-01 VA

## 5. Date(s) of Inspection

April 14, 2022

## 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. During this inspection, certain of your activities, as described below and/or attached, were in violation of NRC requirements, and were assessed at Severity Level IV, in accordance with the NRC Enforcement Policy.

A. 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, corrective action was or is being taken, and the remaining criteria in the NRC Enforcement Policy were satisfied.

(Non-cited violation(s) was/were discussed involving the following requirement(s))

B. The following violation(s) is/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 AND DATE
LICENSEE'S REPRESENTATIVE		
NRC INSPECTOR	Shawn Seeley	Shawn W. Seeley <small>Digitally signed by Shawn W. Seeley Date: 2022.07.28 20:19:58 -04'00'</small>
BRANCH CHIEF	Michael LaFranzo	Bryan A. Parker <small>Digitally signed by Bryan A. Parker Date: 2022.10.13 15:20:09 -04'00'</small>



## Materials Inspection Record

1. Licensee Name: Department of Veteran Affairs		2. Docket Number(s): 030-34325		3. License Number(s) 03-23853-01VA	
4. Report Number(s): 03034325/2022001			5. Date(s) of Inspection: April 14, 2022		
6. Inspector(s): Shawn Seeley		7. Program Code(s): 03614		8. Priority: 2	9. Inspection Guidance Used: 87131
10. Licensee Contact Name(s): Ed Leidholdt, PhD - NHPP Director		11. Licensee E-mail Address: edwin.leidholdt@va.gov		12. Licensee Telephone Number(s): 707-562-8374	
13. Inspection Type: <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Non-Routine <input type="checkbox"/> Initial <input type="checkbox"/> Unannounced		14. Locations Inspected: <input type="checkbox"/> Main Office <input checked="" type="checkbox"/> Field Office <input type="checkbox"/> Temporary Job Site <input type="checkbox"/> Remote		15. Next Inspection Date (MM/DD/YYYY): <input type="checkbox"/> Normal <input type="checkbox"/> Extended <input type="checkbox"/> Reduced <input type="checkbox"/> No change	

## 16. Scope and Observations:

This was an announced routine inspection at the VA Medical Center in Hampton, VA. They utilize radioactive materials under a limited scope medical permit with approval for uses under 10 CFR 35.100, 35.200, and 35.300 (written directive procedures) at the address listed above. The RSO is through a contract with Jeremy Mangum, MS, who works an average of one day per month at the facility. He is located in Las Vegas, NV. The RSO receives assistance in his duties from Mr. Brian Trainer, a Certified Nuclear Medicine Technologist (CNMT) with additional support from other staff CNMTs. The RSO reports to Dennis Walker, M.D., Chief of Radiology Services and Chair of the Radiation Safety Committee (RSC). The Chief of Staff, Shawn Alexander, M.D., serves as the management representative on the RSC. The RSC meets quarterly and reports to the Quality Management Committee.

The Chief Technologist is David Amick, CNMT, who supervises 2 staff CNMTs. The permittee performs approximately 8-10 patients per day; 80% of the imaging procedures are cardiac with the remaining 20% general studies with unit doses received from a local commercial radiopharmacy, 98% is Tc-99m. No studies are performed after hours. The permittee utilizes two SPECT cameras and one treadmill. PET imaging services are provided to the facility typically one day per week through a contract with Diagnostic Laboratories, LLC, out of Gray, TN.

Doses are delivered to the hot lab and the radiopharmacy driver does not have unescorted access. The hot lab is secured via a combination of PIV-controlled magnet locks and key locks. Two levels of security are in place for sealed sources in storage.

The inspector determined that 35.300 procedures have not been conducted for a few years. The AU, Dr. Alexander, intends to bring therapeutics back into the facility soon. Dr. Alexander also discussed their plans to bring PET services in-house. Renovations will begin soon and the target date for use is December 2022. The permittee is aware what needs to be submitted to NHPP for adding that to the permit.

The inspection consisted of an examination of rooms and equipment of the Nuclear Medicine Service, a review of radiation safety practices, and observations of and interviews with staff. Records reviewed included dosimetry results, security procedures, RSO reports, area surveys, training, package check-in procedures, and equipment quality control back. The inspector toured and reviewed locations of use and compared current locations of use to those authorized by permit conditions. No issues were observed.

### Materials Inspection Record (Continued)

The inspector performed confirmatory survey measurements in the hot labs, dosing area, scan room, and the patient waiting area. Background readings were noted in most areas with all measurements in compliance with licensee posting and NRC regulations.

Within the scope of this inspection, no violations were noted.