



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

July 31, 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 03034325/2022007(DNMS) – VA MEDICAL
CENTER, ANN ARBOR, MICHIGAN

Dear Dr. Leidholdt:

On July 12-13, 2022, the U.S. Nuclear Regulatory Commission (NRC) conducted a routine inspection at the VA Medical Center, Ann Arbor, Michigan. The inspection was limited to a review of activities authorized under Permit Number 21-00159-04. 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: 2022.07.31 14:35:43
-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. 21-00159-04

Enclosure:
IR 03034325/2022007



Materials Inspection Report

1. Licensee/Location Inspected:

Department of Veterans Affairs
Under Secretary of Health
Washington, D.C. 20420
Location Inspected: Ann Arbor, MI and Toledo, OH

Report Number(s) 2022-007

2. NRC/Regional Office

Region III
U. S. Nuclear Regulatory Commission
2443 Warrenton 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

July 12-13, 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	Ryan Craffey	 Digitally signed by Ryan J. Craffey Date: 2022.07.27 17:26:27 -04'00'
BRANCH CHIEF	Michael LaFranzo	Michael M. LaFranzo  Digitally signed by Michael M. LaFranzo Date: 2022.07.31 14:34:07 -05'00'



Materials Inspection Record

1. Licensee Name: Department of Veterans Affairs		2. Docket Number(s): 030-34325		3. License Number(s) 03-23853-01VA	
4. Report Number(s): 2022-007			5. Date(s) of Inspection: July 12-13, 2022		
6. Inspector(s): Ryan Craffey		7. Program Code(s): 03614		8. Priority: 2	9. Inspection Guidance Used: IP 87130
10. Licensee Contact Name(s): Clint Abell - Program Manager Melonie Wissing - RSO		11. Licensee E-mail Address: clinton.abell@va.gov melonie.wissing@va.gov		12. Licensee Telephone Number(s): 501-708-5013 734-845-3406	
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 type="checkbox"/> Temporary Job Site <input checked="" type="checkbox"/> Field Office <input type="checkbox"/> Remote		15. Next Inspection Date (MM/DD/YYYY): No Change <input type="checkbox"/> Normal <input type="checkbox"/> Extended <input type="checkbox"/> Reduced <input checked="" type="checkbox"/> No change	

16. Scope and Observations:

The Charles S. Kettles VA Medical Center in Ann Arbor, Michigan was authorized by VA MML broad scope Permit No. 21-00159-04 to use byproduct material for medical diagnosis, therapy, research in humans, and other research and development activities. At the time of the inspection, five full-time NMT performed 20-25 diagnostic administrations each weekday, including up to 10 PET scans, using unit doses from local radiopharmacies. The technologists also administered occasional I-131 and Ra-223 therapies, and were involved in the administration of Lu-177 therapies for an ongoing clinical trial. No other research and development activities were ongoing at the time of the inspection; however, one user was considering reactivating an approval for tritium and/or C-14. Permitted activities here and at a satellite facility in Toledo, Ohio (where one of the five NMTs worked Wednesdays, Thursdays and every other Tuesday to perform diagnostic administrations) were approved and overseen by an RSC which met quarterly, and an RSO based at the nuclear medicine department in Ann Arbor.

The inspector toured the VA Medical Center in Ann Arbor and the satellite facility in Toledo. All areas were adequately posted, and all licensed material was adequately secured. Independent and confirmatory surveys in both nuclear medicine departments and in areas approved for research found no residual contamination or exposures to members of the public in excess of regulatory limits. The permittee's survey instruments were calibrated, operable and responded appropriately to radiation fields present at the facility. In Ann Arbor, the inspector observed two cardiac stress tests, a bone scan and a MUGA using Tc-99m, a DaT scan using I-123, two PET scans using F-18, the receipt of packages containing licensed material, and end-of-day area surveys. In Toledo, the inspector observed two cardiac stress tests and decay-in-storage waste handling. The inspector noted the implementation of effective ALARA practices throughout. The inspector discussed handling of radioactive contamination with the technologists, protocols for therapeutic administrations with an AU, and available equipment and procedures for research activities with the RSO. All personnel were knowledgeable of radiation protection principles and regulatory requirements, and wore appropriate dosimetry as required.

The inspector reviewed a selection of the permittee's records, including RSC meeting minutes and authorized user and use approvals, RSO audits, written directives and release calculations, dose calibrator quality control records, records related to the most recent research activities (2019), and personnel dosimetry reports, which documented occupational exposures that were well below regulatory limits.

No violations of NRC regulations were identified as a result of this inspection. The inspector held an exit meeting with the RSO and representatives of the Medical Center's management at the conclusion of the inspection.