UNITED STATES
NUCLEAR REGULATORY COMMISSION
REGION III
2443 WARRENVILLE ROAD, SUITE 210
LISLE, ILLINOIS 60532-4352

June 3, 2008

E. Lynn McGuire, Director
National Health Physics Program (115HP/NLR)
Department of Veterans Affairs
Veterans Health Administration
2200 Fort Roots Drive
Little Rock, AR 72114

SUBJECT: NRC INSPECTION REPORT 030-34325/08-03(DNMS) (FORM 591M Part 1)
MEDICAL CENTER, MEMPHIS, TENNESSEE

Dear Mr. McGuire:

This refers to the inspection conducted on May 5 - 6, 2008, at the Department of Veterans Affairs, Medical Center, Memphis, Tennessee. The inspection was a review of activities authorized under Permit No. 41-00119-08. The inspector conducted an exit briefing with the staff at the Medical Center at the completion of the inspection.

As a result of the inspection, the enclosed NRC Form 591M is issued for License No. 03-23853-01VA. The form sets forth the violation noted. Please acknowledge receipt of this form by signing and dating in the appropriate space on both the original and copy. You are requested to retain the original and return the signed and dated copy to this office within 10 days of receipt of this letter.

In accordance with 10 CFR 2.390 of the NRC's "Rules of Practice," a copy of this letter and its enclosure will be available electronically in the NRC Public Document Room or from the Publicly Available Records (PARS) component of NRC's document system (ADAMS). The NRC's document system is accessible from the NRC Web site at http://www.nrc.gov/reading-rm/adams.html.

We will gladly discuss any questions you have concerning this inspection.

Sincerely,

Patricia J. Pelke, Chief
Materials Licensing Branch

Docket No. 030-34325
License No. 03-23853-01VA
Permit No. 41-00119-08

Enclosure:
Inspection Report 030-34325/08-03(DNMS) (Form 591M Part 1)

NRC FORM 591M PART 1
(10-2003)
10 CFR 2.201

U.S. NUCLEAR REGULATORY COMMISSION

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED:	2. NRC/REGIONAL OFFICE
VA Medical Center 1030 Jefferson Avenue Memphis, TN 38104 REPORT Nos 2008003	**U.S. Nuclear Regulatory Commission** **Region I, 475 Allendale Road** **King of Prussia, Pennsylvania 19406-1415**

3. DOCKET NUMBER(S)	4. LICENSE NUMBER(S)	5. DATE(S) OF INSPECTION
030-34325	03-23853-01VA	May 5-6, 2008

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, NUREG-1600, to exercise discretion, were satisfied.

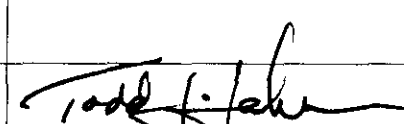
☐ Non-Cited Violation(s) was/were discussed involving the following requirement(s) and Corrective Action(s):

☒ 4. During this inspection certain of your activities, as described below and/or attached, were in violation of NRC requirements and are being cited. This form is a NOTICE OF VIOLATION, which may be subject to posting in accordance with 10 CFR 19.11.

10CFR 20.2003 states that a licensee may discharge licensed material into sanitary sewerage if each condition listed is satisfied. Condition a.1 requires that the material discharged is readily soluble (or is readily dispersible biological material) in water. Contrary to this requirement, up until May 6, 2008, the licensee had not determined if licensed materials discharged were readily soluble or dispersible. The licensee committed to immediately (as of May 6, 2008) stop all discharges of licensed material to sanitary sewerage until they had been determined to be soluble (or readily dispersible biological material) in water.

Licensee's Statement of Corrective Actions for Item 4, above.

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	Todd J. Jackson, CHP		**6/2/2008**

	Initial		Announced	X	Unannounced	X	Routine		Special

NRC FORM 591M PART 3 (10-2003) 10 CFR 2.201

U.S. NUCLEAR REGULATORY COMMISSION

Docket File Information

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE	2. NRC/REGIONAL OFFICE
VA Medical Center **1030 Jefferson Avenue** **Memphis, TN 38104** REPORT NOS 2008003	**U.S. Nuclear Regulatory Commission** **Region I, 475 Allendale Road** **King of Prussia, Pennsylvania 19406-1415**

3. DOCKET NUMBER(S)	4. LICENSE NUMBER(S)	5. DATE(S) OF INSPECTION
030-34325	03-23853-01VA	May 5-6, 2008

6. INSPECTION PROCEDURES USED	7. INSPECTION FOCUS AREAS	8. INSPECTOR
87131	All	Todd J. Jackson, CHP

SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM CODE(S)	2. PRIORITY	3. LICENSEE CONTACT	4. TELEPHONE NUMBER
2120	3	Albert LaGroue RSO	901-523-8990

[X] Main Office Inspection — Next Inspection Date: 201105

[ ] Field Office _____

[ ] Temporary Job Site _____

PROGRAM SCOPE

The program at this VA hospital consisted of nuclear medicine and a separate R&D program. Nuclear medicine is about 80% cardiac scans, with the balance typically bone, renal, gastric and lung scans. All unit doses are used; no generators handled. About 10-15 patients per day is the typical workload. Some therapeutic I-131 procedures have been performed, with 4 in 2008 so far. Maximum dosage used has been 100 mCi, with patient held due to home circumstances. The inspector reviewed written directives, instructions to patients, and preparations/ precautions taken in the hospital rooms used. Also examined were bioassay procedures and calibrations. No thyroid exposures have approached 10% of annual limits, and were therefore not required (although measurements were made). The inspector described calibration procedures that would be expected if bioassay were required, and discussed improvements that could be made to existing procedures. Sinks were labeled as "radioactive waste disposal sinks", although the licensee stated sinks in the Nuclear Medicine Dept. are not used for disposal.

The R&D program consists of 6 active users of C-14 and/or H-3. Facilities are separate from patient treatment areas such as Nuclear Medicine, and require key card access for entry. An October 2007 VA audit/inspection identified that there are numerous formerly used laboratories that require surveys/decommissioning for free release. Using the Oct 2007 date as documentation of the end of licensed activities in these facilities, the licensee had identified the need to complete decommissioning of the rooms within two years and was working toward achieving that objective. Sinks in all the research labs were also posted with the label "radioactive waste sink", and active labs were using the sinks for liquid disposal. Records were maintained of activity disposed, however no determination had been made of whether licensed material was soluble or readily dispersible as required by 10CFR20.2003(a)(1). The inspector stated this was a violation, and the licensee committed to stop all sink disposal until the solubility of waste materials was determined. The licensee also stated that the waste disposal labels posted on sinks would be removed from sinks where no disposal was occurring or expected.

No other violations were identified.