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
St. Mary's Health Center 6420 Clayton Road St. Louis, Missouri 63117 REPORT 2005-001	REGION III US NUCLEAR REGULATORY COMMISSION 2443 WARRENVILLE ROAD, SUITE 210 LISLE, ILLINOIS 60532

3. DOCKET NUMBER(S)	4. LICENSEE NUMBER(S)	5. DATE(S) OF INSPECTION
030-02361	24-08960-02	December 15, 2005

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.

(Violations and Corrective Actions)

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	Geoffrey M. Warren		12/15/05

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
St. Mary's Health Center REPORT NUMBER(S) 2005-001	**Region III**

3. DOCKET NUMBER(S)	4. LICENSE NUMBER(S)	5. DATE(S) OF INSPECTION
030-02361	*24-08960-02*	December 15, 2005

6. INSPECTION PROCEDURES USED	7. INSPECTION FOCUS AREAS
87131, 87132	03.01 - 03.07, 03.01 - 03.07

SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM CODE(S)	2. PRIORITY	3. LICENSEE CONTACT	4. TELEPHONE NUMBER
02230	2	Alex M. Hashemi, M.S., RSO	314-768-8276

[X] Main Office Inspection — Next Inspection Date: **Dec. 2007**

[ ] Field Office _____

[ ] Temporary Job Site _____

PROGRAM SCOPE

The licensee was a 365-bed hospital located in St. Louis, Missouri, which served the local area. Licensee had authorization to use byproduct materials under Sections 35.100, 35.200, 35.300, and 35.400, as well as iridium-192 for a high dose rate (HDR) remote afterloader. Licensed activities were conducted only at the facility indicated on the license.

The nuclear medicine department was staffed with four full-time and two part-time nuclear medicine technologists. The licensee's nuclear medicine staff typically administered 700 diagnostic doses monthly in the nuclear medicine area. Doses were primarily technetium-99m for cardiac, bone, and other studies. Cardiac studies were dual isotope, using technetium-99m and thallium-201. In addition, licensee performed occasional studies using other isotopes. Doses were received as unit doses from a licensed radiopharmacy or prepared from bulk technetium. Licensee performed around 60 iodine-131 treatments annually, including whole-body scans, hyperthyroid treatments, and thyroid ablations with the iodine-131 in capsule form. All waste was held for decay-in-storage or returned to the radiopharmacy.

The radiation therapy staff consisted of two oncologists, one physicist, and one dosimetrist. The staff performed around 50 HDR fractions to around 20 patients annually using a Nucletron MicroSelectron HDR Classic device. While authorized for seed implants under 35.400, licensee did not perform any seed therapies.

Performance Observations

The inspector observed one therapeutic administration of iodine-131 including package receipt, dose assay, and administration, and identified no issues with the procedures. Licensee personnel demonstrated dose calibrator constancy tests, survey meter daily checks, kit preparation, daily and weekly contamination surveys, and HDR daily checks. The inspector found no concerns with these activities. The inspector reviewed written directives for radiopharmaceutical therapies and HDR treatments and found no issues. Interviews with licensee staff indicated adequate knowledge of radiation safety procedures. Radiation surveys indicated radiation levels consistent with licensee survey records.