NRC FORM 591M PAF (10-2003)	RT 1		U.S. NUCLEAR REGULATORY COMMISSION		
10 CFR 2.201					
SAFET	Y INSPEC	TION REPORT AND C	COMPLIANCE INSP	PECTION (	)
LICENSEE/LOCATION INSPECTED:     St. Anthony's Medical Center     St. Louis, Missouri			2. NRC/REGIONAL OFFICE U.S. Nuclear Regulatory Commission Region III 2443 Warrenville Road Lisle, Illinois 60532-4352		
REPORT	2006-001				
3. DOCKET NUMBER(S)		4. LICENSEE NUMBER(S)		5. DATE(S) OF IN	SPECTION
030-10108		24-01041-01	Ì	1/19/2006	
LICENSEE:	<u> </u>				
Nuclear Regulatory Con of procedures and repre  1. Based on the 2. Previous vio 3. The violation non-repetitive, a exercise discret 4. During this in cited. This form	nmission (NRC) resentative records e inspection findir lation(s) closed. a(s), specifically dand corrective action, were satisfied. Non-Cited Viola	tion(s) was/were discussed involving the control of your activities, as described below the control of your activities, as described below the control of your activities.	ditions of your license. The inbservations by the inspector non-cited violations, are not tremaining criteria in the NRC and the following requirement(s	nspection consisted of select. The inspection findings a specing cited because they we Enforcement Policy, NURECT and Corrective Action(s):	ctive examinations re as follows:  re self-identified, 6-1600, to
					<del></del>
corrective actions is mad	30 days, the acti	ensee's Statement of Corre ons described by me to the inspect with the requirements of 10 CFR 2. I). I understand that no further writt	tor will be taken to correct the 201 (corrective steps already	violations identified. This st taken, corrective steps which	h will be taken,
Title		Printed Name		nature	Date
LICENSEE'S REPRESENTATIVE					
NRC INSPECTOR	Michael	M Lufranzo	aul M Lefre	ingo	1/19/2006

NRC FORM 591M PART 1 (10-2003)

## NRC FORM 591M PART 3 U.S. NUCLEAR REGULATORY COMMISSION (10-2003) **Docket File Information** 10 CFR 2.201 SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION 1. LICENSEE 2. NRC/REGIONAL OFFICE Region III 2443 Warrenville Road Lisie, IL 60532 St. Anthony's Medical Center 2006-001 REPORT NUMBER(S) 3. DOCKET NUMBER(S) 4. LICENSE NUMBER(S) 5. DATE(S) OF INSPECTION 24-01041-01 1/19/2006 030-10108 6. INSPECTION PROCEDURES USED 7. INSPECTION FOCUS AREAS 87130/87131/87132 03.01-03.07 SUPPLEMENTAL INSPECTION INFORMATION 2. PRIORITY 3. LICENSEE CONTACT 1. PROGRAM CODE(S) 4. TELEPHONE NUMBER 314-525-1688 Dr. Mark Pohlman - RSO 02240 G2 Next Inspection Date: 1/2008 Main Office Inspection Field

## **PROGRAM SCOPE**

Permitted under 10 CFR 35.400: The licensee performs approximately 30-40 permanent implant cases using Iodine-125 per year and one case using Cs-137 per year.

Permitted under 10 CFR 35.300: The licensee performs approximately 20 iodine-131 whole body scans per year, 1-3 treatments per month for hyperthyroid and carcinoma. The licensee also administers 1-2 treatments using Sr-89 per year.

Permitted under 10 CFR 35.100 and 35.200: The licensee performs approximately 5-10 administrations per day. The licensee primarily uses Technetium-99m for various types of scans. The licensee receives unit doses only in the nuclear medicine department. Since this area was inspected in 2004 and is normally inspected on a 5-year inspection frequency, this portion of the program was not inspected during this site inspection.

The licensee has not performed any activities under 10 CFR 35.500.

The licensee does not possess any Gadolinium-153 sources.

Temporary Job Site

The licensee has not performed any activities under 10 CFR 35.1000 and all sources have been returned to the manufacturer.

The licensee performed 5-10 brachytherapy cases per year using a mobile HDR unit which contains a nominal 10 curies of Ir-192.

## Performance Observations

The inspector interviewed the licensee's management, radiation safety officer, authorized users and other staff members and found that personnel were knowledgeable regarding their responsibilities under the license. The licensee adequately demonstrated to the inspector proper techniques regarding the use, handling and storage of licensed material. The inspector performed a selected physical inventory of licensed material and reviewed the licensee's program for securing licensed material from unauthorized access or removal; no abnormal issues were identified. The inspector performed independent surveys and did not identify any abnormal radiation measurements. The inspector reviewed a selected number of written directives from the cases involving the HDR program, manual brachytherapy program and non-sealed source treatment programs. The inspector did not identify any regulatory issues during the review. The inspector reviewed a representative sample of the licensee's dosimetry records for 2003, 2004 and 2005 and noted that exposures to employees were less than regulatory limits.