

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED: SSM Cardinal Glennon Children's Hospital 1465 South Grand Blvd. St. Louis, Missouri 63104		2. NRC/REGIONAL OFFICE REGION III US NUCLEAR REGULATORY COMMISSION 2443 WARRENVILLE ROAD, SUITE 210 LISLE, ILLINOIS 60532	
REPORT 2006-001			
3. DOCKET NUMBER(S) 030-35553	4. LICENSEE NUMBER(S) 24-32264-01	5. DATE(S) OF INSPECTION September 21, 2006	

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	<i>[Handwritten Signature]</i>	7/21/06

[Handwritten Initials]

Docket File Information
SAFETY INSPECTION REPORT
AND COMPLIANCE INSPECTION

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3. DOCKET NUMBER(S) 030-35553	4. LICENSE NUMBER(S) 24-32264-01	5. DATE(S) OF INSPECTION September 20 - 21, 2006	
6. INSPECTION PROCEDURES USED 87122	7. INSPECTION FOCUS AREAS 03.01 - 03.07		

SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM CODE(S) 03510	2. PRIORITY 5	3. LICENSEE CONTACT E. Richard Graviss, M.D., RSO	4. TELEPHONE NUMBER 314-577-5600
<input checked="checked" type="checkbox"/> Main Office Inspection		Next Inspection Date: Sept. 2011	
<input type="checkbox"/> Field Office _____			
<input type="checkbox"/> Temporary Job Site _____			

PROGRAM SCOPE

The licensee was a 200-bed children's hospital located in St. Louis, Missouri which served primarily the surrounding metropolitan area. Licensee operated a blood irradiator in the hospital as authorized by the license. The irradiator was used daily to sterilize blood and plasma for immuno-compromised patients. Around fourteen people were involved in the use of the blood irradiator.

Performance Observations

Licensee personnel demonstrated the use of the blood irradiator, including the irradiation of blood products, leak testing, and radiation surveys. Interviews with licensee staff indicated adequate knowledge of radiation safety concepts and procedures. Radiation surveys indicated radiation levels consistent with licensee records and postings,