

Docket File Information

SAFETY INSPECTION REPORT
AND COMPLIANCE INSPECTION

1. LICENSEE St. Joseph Health Center REPORT NUMBER(S) 2006-004		2. NRC/REGIONAL OFFICE Region III 2443 Warrenville Road Lisle, IL 60532	
3. DOCKET NUMBER(S) 030-08664	4. LICENSE NUMBER(S) 24-15159-01	5. DATE(S) OF INSPECTION Dec. 20, 2006	
6. INSPECTION PROCEDURES USED 87131	7. INSPECTION FOCUS AREAS 03.01, 03.03, 03.06, and 03.07		

SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM CODE(S) 02240	2. PRIORITY G 2	3. LICENSEE CONTACT Sidney D. Machefsky, M.D., RSO	4. TELEPHONE NUMBER 636.947.5000
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Main Office Inspection Next Inspection Date: January 2008 (unchanged)

Field _____

Temporary Job Site _____

PROGRAM SCOPE

This large hospital was authorized to use materials permitted in Sections 35.100, 35.200, 35.300, 35.400, and strontium-90 within an IVB unit.

This inspection was conducted in accordance with MC 2800 and limited to a review of the licensee's corrective actions in response to violations identified during the July 10-25, 2006 special inspection(EA-06-188). This follow up inspection included a review the licensee's policies and procedures for administering radiopharmaceuticals requiring a written directive, the licensee's supervision of nuclear medicine personnel, and training of nuclear medicine personnel.

The previous inspection was conducted in response to a July 3, 2006, telephonic notification of a medical event that occurred no June 28, 2006. The inspection identified three apparent violations for failures to: (1) prepare a written directive before administering to a patient more than 30 microcuries (uCi) of I-131 sodium iodide (10 CFR 35.40(a)); (2) follow the licensee's and physician authorized user's instructions (10 CFR 35.27(a)(2)); and (3) notify the NRC of the occurrence of a medical event no later than the next calendar day after discovering the event (10 CFR 35.3045(a)).

The inspector verified that the licensee satisfactorily implemented its corrective actions which included: (1) revising the protocol for the administrating I-131 requiring verification of the dosage from a second (2) requiring that staff technologists review the revised I-131 sodium iodide protocol during new employee orientation and during their annual competency assessment (3) requiring that another staff member observe the first time a new technologist performs an I-131 procedure; and (4) requiring all staff technologists to review the Quality Management Policy, which includes procedures for reporting medical events to the NRC, and to review the Quality Management Policy as a part of their annual competency assessment.