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

**Docket File Information**

U.S. NUCLEAR REGULATORY COMMISSION

# SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

| 1. LICENSEE | 2. NRC/REGIONAL OFFICE |
|---|---|
| **St. Mary's Health Center**<br>REPORT NUMBER(S) **2008-001** | **Region III**<br>**2443 Warrenville Road, Suite 210**<br>**Lisle, IL 60532** |

| 3. DOCKET NUMBER(S) | 4. LICENSE NUMBER(S) | 5. DATE(S) OF INSPECTION |
|---|---|---|
| **030-12819** | **24-17477-01** | **May 20, 2008** |

| 6. INSPECTION PROCEDURES USED | 7. INSPECTION FOCUS AREAS |
|---|---|
| **87131** | **03.01-03.07** |

**SUPPLEMENTAL INSPECTION INFORMATION**

| 1. PROGRAM CODE(S) | 2. PRIORITY | 3. LICENSEE CONTACT | 4. TELEPHONE NUMBER |
|---|---|---|---|
| **2120** | **G3** | **Jerry Baraboo, Director, Med. Imaging** | **573-761-7091** |

[X] Main Office Inspection — Next Inspection Date: **May 2011**

[ ] Field Office

[ ] Temporary Job Site Inspection

## PROGRAM SCOPE

**This active medical program uses byproduct material as authorized in 10 CFR 35.100-300. In addition, the licensee is authorized 10 CFR 35. 400 for use in conventional brachytherapy, however, according to licensee representatives, this modality has not been active and is not performed at this facility.**

**The licensee performs approximately 150 diagnostic procedures monthly involving cardiac and other routine nuclear medicine procedures. The licensee employs three full-time and one part-time technologist(s). Generators are not received and all material is obtained from an area nuclear pharmacy in the form of unit doses. The licensee performs about 3 iodine-131 HTT procedures monthly and one treatment for iodine-131 thyroid ablation annually. Samerium-153 treatments are rarely performed. Quarterly audits are conducted by an outside consultant which appear to adequately oversee licensed activities.**

### Performance Observations

**Interviews conducted with available staff revealed an adequate level of understanding of emergency and material handling procedures and techniques. Daily area surveys, waste handling and disposal, dose calibrator constancy checks, package receipt procedures as well as injection techniques were successfully described or demonstrated. A random record review of the licensee's quality management program revealed patient written directives, identification and instruction were completed as required with no problems or issues identified with this program area.**

**Licensed material was observed adequately secured during the review and was not readily accessible to members of the general public. Independent measurements taken indicated a maximum reading of 1.5 mr/hr in the hot-lab area and essentially background (0.02mr/hr) in the imaging and unrestricted areas.**

**Personal dosimetry records reviewed indicated whole-body readings for 2007 of 34 mRem and 366 mRem extremity. YTD 2008 readings showed whole-body exposure of 48 mRem and extremity of 241 mRem. One declared pregnant worker was monitored with a dedicated fetal badge which indicated that readings did not exceed 500 mRem for the total gestation period.**

**The inspector identified a minor residual contamination in two trash containers in the treadmill area which read 0.8 mr/hr and 0.5 mr/hr due to placing injection tubing used for patient administration during stress testing in ordinary waste receptacles. The material was determined to be Tc99m. The liners were subsequently placed in waste storage for decay. Subsequent surveys of the empty containers did not indicate readings above background (0.02 mr/hr). The inspector reviewed previous daily survey records since January 2008 and identified one entry on 4/19/08 of 0.35 mr/hr in a waste container. According to the licensee, the bag was placed in waste storage for decay. All other documented readings were at background levels. The licensee committed to performing in-service with responsible staff in the proper disposal of tubing apparatus used for cardiac imaging and provide a dedicated receptacle for waste used for patient administrations in the treadmill area. The next inspection should verify the licensee's training and use of dedicated receptacles for injection apparatus disposal.**

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**<br>**100 St. Mary's Medical Plaza**<br>**Jefferson City, MO 65101**<br><br>**REPORT NUMBER(S) 2008-001** | **U.S. Nuclear Regulatory Commission**<br>**Region III**<br>**2443 Warrenville Road**<br>**Suite 210**<br>**Lisle, Illinois 60532-4351** |

| 3. DOCKET NUMBER(S) | 4. LICENSEE NUMBER(S) | 5. DATE(S) OF INSPECTION |
|---|---|---|
| **030-12819** | **24-17477-01** | May 20, 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.
(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 | **Sam Mulay** | Sam Mulay | 5/30/08 |

NRC FORM 591M PART 1 (10-2003)

TRANSMISSION VERIFICATION REPORT

TIME : 06/03/2008 11:30
NAME : USNRC REGION3 DNMS
FAX : 6305151259
TEL :
SER.# : 000A7J925770

| | |
|---|---|
| DATE,TIME | 06/03 11:29 |
| FAX NO./NAME | 15736598617 |
| DURATION | 00:00:34 |
| PAGE(S) | 02 |
| RESULT | OK |
| MODE | STANDARD ECM |

NRC FORM 366 (RIII)
(4-2004)

UNITED STATES
NUCLEAR REGULATORY COMMISSION
REGION III
2443 Warrenville Road, Suite 210
Lisle, Illinois 60532-4352

# TELEFAX TRANSMITTAL

DATE: 6/3/08

NUMBER OF PAGES: 2
*(including this page)*

SEND TO: Jerry Bolaboo, Diacom, Medical Imaging

LOCATION: St. Mary's Health Center, Jefferson City, MO

FAX NUMBER: 573 - 659 - 8617 ☐ ***VERIFY BY CALLING SENDER***

FROM: Sam Murray, U.S. NRC, Region 3
*(SENDER)*

TELEPHONE NUMBER: 630 - 829 - 9837 FAX NUMBER: 630 - 515 - 1259

If you do not receive the complete fax transmittal, please contact the sender as soon as possible at the telephone number provided above.

MESSAGE

Jerry, As Discussed Earlier Today.