

**SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION**

1. LICENSEE/CERTIFICATE HOLDER  Location Inspected: <b>Forest Park Hospital 6150 Oakland Avenue St. Louis, Missouri 63139</b>		2. REGIONAL OFFICE <b>US Nuclear Regulatory Commission Region III 2443 Warrenville Road, Suite 210 Lisle, IL 60532</b>	
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REPORT NUMBER(S) 2008- 01

3. DOCKET NUMBER(S) <b>030-02282</b>	4. LICENSE/CERTIFICATE NUMBER(S) <b>24-00752-01</b>	5. DATE(S) OF INSPECTION <b>6/4/2008</b>
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Inspection Procedures Used: <b>87130, 87131 &amp; 87132</b>	Inspection Focus Areas: <b>1 through 7</b>
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**LICENSEE/CERTIFICATE HOLDER:**  
The inspection was an examination of the activities conducted under your license/certificate as they relate to radiation safety and to compliance with the Nuclear Regulatory Commission (NRC) rules and regulations and the conditions of your license/certificate. 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) were discussed involving the following requirement(s):

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- 4. During this inspection certain of your activities, as described in the 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.

**STATEMENT OF CORRECTIVE ACTIONS**

I hereby state that, within 30 days, the actions described by me to the inspector and as described in the attachment 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/ CERTIFICATE HOLDER	David Englehart, MS, RSO		6/ /2008
NRC INSPECTOR	Darrel G. Wiedeman/Ed Kulzer		6/4 /2007

NRC FORM 591X PART 3 (11-2001) 10 CFR 2.201		<i>Docket File Information</i>		U.S. NUCLEAR REGULATORY COMMISSION	
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1. LICENSEE/CERTIFICATE HOLDER <b>Forest Park Hospital</b>			2. REGIONAL OFFICE <b>Region III, Lisle, IL 60532</b>		
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## Supplemental Inspection Information

Program Code(s): <b>02230</b>	Priority: <b>2</b>	Licensee Contact: <b>Andy Zhu, Ph.D, RSO</b>	Telephone No. : <b>(314 ) 768-3068</b>
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 Main Office InspectionNext Inspection Date: **6/2010**

Field Office

 Temporary Job Site**Program Scope**

**This licensee is a 400 bed privately owned and operated general hospital. Under this license the licensee oversees the nuclear medicine, radiopharmaceutical and limited high dose rate (HDR) remote afterloader brachytherapy program.**

**Nuclear Medicine and Radiopharmaceutical Therapy**

**The licensee employs two full time nuclear medicine technologist and the department is staffed with nine rotating authorized users (physicians). The licensee receives unit doses and one single bulk dose of Tc99m/daily supplied by a local nuclear pharmacy. The workload consists of the following: 50 diagnostic scans per month, 50% cardiac scans, 30% bone scans, 15% gall bladder/liver scans and 15% thyroid scans. The licensee does not use P-32, Sr-89 or Au-198 for cancer therapy. The licensee conducts approximately one hyper thyroid treatment/year and for the past several years has not performed any iodine-131 thyroid cancer treatments.**

**This inspection consisted of an in-depth review of the licensee's medical programs. According to the licensee staff that were interviewed, there have been no fires, explosions, fatalities (involving radioactive material) , medical events, recordable events or over exposures to radiation since the last NRC inspection. The inspectors did not identify anything contrary to the above statements made by licensee staff. The highest whole body exposure for CY 2008 was <100 mrem/month and the highest extremity exposure was 800 mrem. The inspectors concluded that no worker or member of the public received a dose of radiation in excess of the limits specified in 10 CFR 20.1201 or 20.1301. The inspectors interviewed the nuclear medicine technologists and discussed their procedures for determining doses for patients undergoing iodine-131 hyper thyroid therapy. The inspectors reviewed two written directives for iodine-131 hyper thyroid therapy. No deficiencies were identified. The inspectors observed the licensee conduct a physical inventory of their calibration and brachytherapy sources. All sources were accounted for.**

**HDR Brachytherapy and Conventional Brachytherapy Programs**

**At the time of this inspection the licensee's conventional and HDR brachytherapy programs were inactive. The licensee is authorized for three (3) HDR units; however, the inspectors learned that the licensee has never owned an HDR unit. Currently, the licensee has an agreement with Midwest Brachytherapy Services, NRC License No. 34-32280-01 to provide "mobile" HDR services to the hospital if and when needed. No HDR treatments have taken place for the past several years and the brachytherapy programs are inactive. The inspectors observed the licensee conduct a physical inventory of all brachytherapy sources in storage. All sources were accounted for.**

**No violations of NRC requirements were identified.**