

INSPECTION RECORD

Region III
License No. 24-01570-03

Inspection Report No. 030-02305/2010-001
Docket No. 030-02305

Licensee (Name and Address):

St. Luke's Hospital
Radiology Department
232 South Woods Mill Road
Chesterfield, Missouri 63017

Licensee Contact: Christopher Durbin, Ph.D.
Telephone No. 314-205-6218

Priority: 2
Program Code: 2240

Date of Last Inspection: 7/23-24/2009

Date of This Inspection: March 19 and 30 with continuing NRC review through May 3, 2010

Type of Inspection: () Initial (X) Announced () Unannounced

Next Inspection Date: NA () Normal () Reduced

Justification for reducing the routine inspection interval:

The inspection was focused on the licensee's brachytherapy program which did not change the next inspection date.

Summary of Findings and Actions:

- (X) No violations cited, clear U.S. Nuclear Regulatory Commission (NRC) Form 591 or regional letter issued
- () Non-cited violations (NCVs)
- () Violation(s), Form 591 issued
- () Violation(s), regional letter issued
- () Followup on previous violations

Inspector *Michael LaFranzo*
Michael LaFranzo, Health Physicist, MIB

Date 5/5/10

Approved *Tamara E. Bloomer*
Tamara E. Bloomer, Chief, MIB

Date 5/6/10

MU01310505

PART I-LICENSE, INSPECTION, INCIDENT/EVENT, AND ENFORCEMENT HISTORY

1. AMENDMENTS AND PROGRAM CHANGES:

Amendment No. Date Subject

NA – Not applicable for this inspection

2. INSPECTION AND ENFORCEMENT HISTORY:

July 23-24, 2009 (030-02305/2009-001(DNMS)) – One violation of NRC requirements was identified regarding the failure to properly calibrate a dose calibrator.

July 26, 2007 (030-02305/2007-001(DNMS)) – no violations identified

3. INCIDENT/EVENT HISTORY:

None

PART II - INSPECTION DOCUMENTATION

1. ORGANIZATION AND SCOPE OF PROGRAM:

Jan Hess – Vice President, Quality and Marketing
Rod Henning – Director of Cancer Services
Christopher Durbin, Ph.D. – Radiation Safety Officer

The inspection focused on the licensee's brachytherapy permanent seed implant program for the years of 2000, 2003 and 2006. The licensee performed between 80-120 cases per year. Approximately 50% of the administrations were implanting seeds containing I-125 and the other 50% of the administrations were implanting seeds containing Pd-103. The licensee has two medical physicists and two authorized users whom implement the program.

2. SCOPE OF INSPECTION:

The NRC performed an inspection at the licensee's facility to determine if brachytherapy permanent seed implant therapies were performed in accordance with NRC requirements. The inspector reviewed 10 cases for the years of 2000, 2003 and 2006 (for a total of 30 cases). The inspection consisted of selected record reviews and interviews with licensee staff knowledgeable regarding the brachytherapy permanent seed implant program.

3. INDEPENDENT AND CONFIRMATORY MEASUREMENTS:

N/A. The inspection did not require independent or confirmatory radiation measurements.

4. VIOLATIONS, NCVs, AND OTHER SAFETY ISSUES:

The NRC did not identify any violations.

5. **PARTIAL LIST OF PERSONNEL CONTACTED:**

- # Jan Hess – Vice President, Quality and Marketing
- #* Rod Henning – Director of Cancer Services
- #*& Dr. Christopher Durbin – Radiation Safety Officer
- #* Abel Cheng – Medical Physicist
- #* William Harms, Sr. – Medical Physicist

Use the following identification symbols:

- # Individual(s) present at entrance meeting
- * Individual(s) present at site exit meeting
- & Individual present during telephonic exit meeting

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