

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

<p>1. LICENSEE/LOCATION INSPECTED:</p> <p>St. Anthony's Medical Center 10010 Kennerly Road St. Louis, MO 63128</p> <p>REPORT NUMBER(S) 2015-001</p>	<p>2. NRC/REGIONAL OFFICE</p> <p>Region III U. S. Nuclear Regulatory Commission 2443 Warrenville Road, Suite 210 Lisle, IL 60532-4352</p>	
<p>3. DOCKET NUMBER(S)</p> <p>030-10108</p>	<p>4. LICENSE NUMBER(S)</p> <p>24-01041-04</p>	<p>5. DATE(S) OF INSPECTION</p> <p>3/4-5/15, with in-office review through 3/24/15</p>

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:

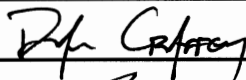
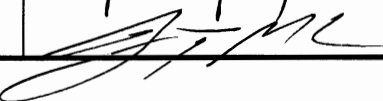
- 1. Based on the inspection findings, no violations were identified.
- 2. Previous violation(s) closed.
- 3. The violation(s), specifically described to you by the inspector as non-cited violations, are not being cited because they were self-identified, non-repetitive, and corrective action was or is being taken, and the remaining criteria in the NRC Enforcement Policy, to exercise discretion, were satisfied.

Non-cited violation(s) were discussed involving the following requirement(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 in accordance with NRC Enforcement Policy. This form is a NOTICE OF VIOLATION, which may be subject to posting in accordance with 10 CFR 19.11.
(Violations and Corrective Actions)

Statement of Corrective Actions

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	Ryan Craffey		3/24/15
BRANCH CHIEF	Aaron McCraw		3/24/15

Docket File Information

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6. INSPECTION PROCEDURES USED 87131 / 87132	7. INSPECTION FOCUS AREAS All
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SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM CODE(S) 02240	2. PRIORITY 2	3. LICENSEE CONTACT James Monroe, PhD - RSO	4. TELEPHONE NUMBER (314) 525-4064
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- Main Office Inspection Next Inspection Date: March 2017
- Field Office Inspection 10012 Kennerly Road, St. Louis, MO
- Temporary Job Site Inspection _____

PROGRAM SCOPE

This was a routine, unannounced inspection of a 767-bed regional hospital authorized to use sealed and unsealed byproduct material for medical purposes at three locations at its main campus in St. Louis, Missouri, and at one off-site location in southwestern St. Louis. At the time of the inspection, the licensee performed a full spectrum of approximately 400 diagnostic procedures monthly at 10010 Kennerly Road, and 250 diagnostic cardiac procedures monthly at 10012 Kennerly Road. The licensee's radiation oncology department at the main facility performed 22 therapeutic administrations using I-131 capsules in 2014, as well as seven Y-90 microsphere treatments to date. The radiation oncology department also performed Ra-223 Xofigo injections, along with occasional HDR treatments and prostate seed implants. The licensee no longer possessed any seeds for temporary implant brachytherapy.

PERFORMANCE OBSERVATIONS

The inspector toured the facilities on Kennerly Road to evaluate the licensee's measures for materials security, hazard communication and exposure control. The inspector conducted independent and confirmatory surveys of these facilities and found no residual contamination or exposures to members of the public in excess of regulatory limits. The inspector observed the administration of one Xofigo injection, four cardiac stress tests, one MUGA scan, and the full calibration and spot check of the licensee's HDR unit following a source exchange. The licensee's nuclear medicine staff demonstrated the implementation of procedures for package receipt, area surveys, waste handling and spill response. The licensee's radiation oncology staff demonstrated implementation of procedures for microsphere, HDR and prostate seed treatment planning, as well as the preparation and administration of microsphere injections.

The inspector reviewed a selection of the licensee's records for administrations requiring a written directive while on-site, including a selection of I-131 therapies, microsphere injections, HDR fractions, and prostate seed implants. The inspector conducted additional in-office review through 3/24/15 to verify that a prostate seed implant on 1/6/15 did not meet the current criteria for a medical event. The inspector also reviewed a selection of nuclear medicine records, personnel dosimetry, and Radiation Safety Committee meeting minutes.

No violations of NRC requirements were identified as a result of this inspection.