U.S. NUCLEAR REGULATORY COMMISSION (07-2012) 10 CFR 2.201 SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION						
1. LICENSEE/LOCATIO		· · · · · · · · · · · · · · · · · · ·	2. NRC/REGIONAL OFFICE			
Mercy Hospital Je						
		Region III				
P.O. Box 350 Crystal City, MO 63019		U. S. Nuclear Regulatory Commission 2443 Warrenville Road, Suite 210 Lisle, IL 60532-4352				
REPORT NUMBER(S) 17001		DISIC, IL 00332-4332			
3. DOCKET NUMBER(S)		4. LICENSE NUMBER	(S)	5. DATE(S) OF INSPECTI	ON	
030-14837		24-18315-01		July 28,201	7	
LICENSEE:		•				
Regulatory Commissi	n examination of the activities conduct on (NRC) rules and regulations and th sentative records, interviews with pers	e conditions of your	license. The inspection consiste	ed of selective examinat	ions of	
1. Based on	the inspection findings, no violations v	vere identified.		-		
2. Previous v	riolation(s) closed.					
non-repeti						
	Non-cited violation(s) were discus	sed involving the follo	owing requirement(s):			
 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) 						
I hereby state that, w	ithin 30 days, the actions described b	atement of Corre y me to the Inspector		ations identified. This st	atement of	
corrective actions is r date when full compli	nade in accordance with the requirem ance will be achieved). I understand	ents of 10 CFR 2.20	1 (corrective steps already taken response to NRC will be requir	n, corrective steps which	n will be taken, equested.	
TITLE LICENSEE'S	PRINTED NAME		SIGNATURE		DATE	
REPRESENTATIVE						
NRC INSPECTOR	Zahid Sulaiman, Health Physici	st Z	Pahid Sulaim	wr.	7/28/17	
BRANCH CHIEF	Aaron T. McCraw, Chief, MIB		ATAL		8 18 17	
NRC FORM 591M PART	1 (07-2012)	-			+ +	

NRC FORM	591M	PART	1	(07-2012
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NRC FORM 591M PART 3 (07-2012) 10 CFR 2.201		Docket File Info ION REPORT ANI		ICLEAR REGULATORY COMMISSION	
1. LICENSEE/LOCATION INS	PECTED:	ALL 1997	2. NRC/REGIONAL OFFICE		
Mercy Hospital Jefferson			Region III		
P.O. Box 350 Crystal City, MO 63019 REPORT NUMBER(S) 17001			U. S. Nuclear Regulat 2443 Warrenville Roa Lisle, IL 60532-4352	id, Suite 210	
3. DOCKET NUMBER(S)		4. LICENSE NUMBER	(S)	5. DATE(S) OF INSPECTION	
030-14837		24-18315-01		July 28, 2017	
6. INSPECTION PROCEDURES USED		7. INSPECTION FOCU	7. INSPECTION FOCUS AREAS		
87131, 87132		03.01-03.07	03.01-03.07		
	SUPP	LEMENTAL INSPECT			
1. PROGRAM CODE(S) 02120	2. PRIORITY 3		3. LICENSEE CONTACT4. TELEPHONE NUMBERBrian Johnson, Manager Imaging Svs(636) 933-1202		
✓ Main Office In	spection	Next Inspectio	n Date: 07/28/20	020	
Field Office In	spection				
Temporary Jo	b Site Inspection				
		PROGRAM S	COPE		

This was a routine unannounced inspection of a 191-bed regional hospital that was authorized to use licensed materials under 10 CFR 35.100, 35.200, 35.300, and 35.400. The nuclear medicine department was staffed with four full-time nuclear medicine technologists (NMT) and one PRN who performed approximately 200 diagnostic procedures monthly, primarily cardiac stress tests, HIDA, bone scans, lung scans using DTPA or MAA, gastric emptyings, and other diagnostic procedures. The licensee also performed approximately five iodine-131 (I-131) therapies annually, and three radium-223 (Ra-223) xofigo treatments since the last inspection (last treatment performed was 7 May, 2015). The licensee received unit doses, and I-131 in capsule form from a licensed radiopharmacy. The licensee also The Shared Imaging Mobile PET/CT company provided the Mobile PET/CT diagnostic procedures every Tuesday afternoon. The cancer center was staffed with an oncologist, a dosimetrist, and a part-time authorized medical physicist (AMP) who performed approximately 15 manual barchytherapy procedures using iodine-125 (I-125) for prostate seed implants annually. The licensee performed manual brachytherapy prostate seed implant procedures on Tuesdays. The licensee was building a new cancer center facility at the main hospital and will relocate the cancer center to the new facility by end of this year. The licensee RSO and the AMP duties will be merged with the Mercy Hospital, St. Louis (Lic No. 24-00794-03). Licensee was in the process of submitting the license amendment request for the new transition. Performance Observations

The inspection consisted of interviews with select licensee personnel; review of select records; tours of the nuclear medicine department and cancer center; and independent measurements. At the time of the inspection, no licensed activities were conducted. The inspector: (1) observed the NMT conduct a physical inventory of sealed sources, and all sources were accounted for; (2) had the NMT demonstrate the dose calibrator constancy check, package receipt and check-in procedures, the end of the day daily area surveys and weekly wipe test, and proper handling of radioactive waste and disposal procedures. The inspector reviewed the written directives for I-131 cancer therapy and Ra-223 xofigo treatments, with no issues noted. The inspector also reviewed selected I-125 prostate seed implants written directives, and discussed pre and post treatment plans, and the medical event criteria with an authorized user.

Continued on next page.

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(Continued)

The inspector reviewed the following records: quarterly program audits conducted by an outside consultant, radiation safety committee minutes (last meeting was on November 16, 2016), package receipts, waste disposal records, daily surveys and weekly wipes test results, linearity and accuracy of the dose calibrator, sealed source inventory and leak tests, and DOT Hazmat training.

The inspector also reviewed the dosimetry records for 2016 and through April 30, 2017, indicating the maximum annual dose to be 161 mrem - DDE, and 1,827 mrem - SDE. The inspector performed independent radiation measurements in each functional area that were consistent with licensee survey records and within regulatory limits.

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