

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED:

Christian Hospital
Dept. of Nuclear Medicine
11133 Dunn Rd.
St. Louis, MO 63136

REPORT NUMBER(S) 2018001

2. NRC/REGIONAL OFFICE

Region III
U. S. Nuclear Regulatory Commission
2443 Warrenville Rd, Suite 210
Lisle, IL 60532

3. DOCKET NUMBER(S)

030-02382

4. LICENSE NUMBER(S)

24-13383-01

5. DATE(S) OF INSPECTION

October 12, 2018

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	Zahid Sulaiman, Health Physicist	<i>Zahid Sulaiman</i>	10/12/18
BRANCH CHIEF	Aaron T. McCraw, Chief, MIB	<i>ATM</i> for ATM	10/26/18

Docket File Information
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3. DOCKET NUMBER(S) 030-02382	4. LICENSE NUMBER(S) 24-13383-01	5. DATE(S) OF INSPECTION October 12, 2018
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6. INSPECTION PROCEDURES USED 87131	7. INSPECTION FOCUS AREAS 03.01 - 03.07
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SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM CODE(S) 02120	2. PRIORITY 3	3. LICENSEE CONTACT Jerri Somraty, CNMT	4. TELEPHONE NUMBER (314) 653-4435
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Main Office Inspection Next Inspection Date: 10/12/2021

Field Office Inspection _____

Temporary Job Site Inspection _____

PROGRAM SCOPE

This was a routine, unannounced inspection of a community hospital authorized to use byproduct materials under 10 CFR Sections 35.100, 35.200, 35.300, and 35.400. The licensee's nuclear medicine department was staffed with two full-time, a part-time, and two PRNs nuclear medicine technologists (NMTs) who administered approximately 200 diagnostic doses monthly. The diagnostic procedures included a variety of imaging and uptake procedures using technetium-99m (Tc-99m), I-131, and xenon-133. Diagnostic doses were received as unit doses or prepared from bulk Tc-99m from a licensed radiopharmacy. Licensee performed approximately 12 iodine-131 (I-131) cancer therapy and approximately 15 hyperthyroid treatments annually. I-131 doses were received as capsules only. All waste was either held for decay-in-storage (DIS) or returned to the radiopharmacy. Licensee has not performed any manual brachytherapy procedures since 2010. Licensee is planning to remove the 35.400 authorization from the license.

Performance Observations:

The inspection consisted of interviews with select licensee personnel; a review of select records; and tours of the nuclear medicine department and waste storage area. The inspector observed preparation and administration of Tc-99m for diagnostic procedures to a patient. 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 package receipt surveys and wipes, dose calibrator constancy check, daily area surveys and weekly wipe tests, and proper handling of radioactive waste and disposal procedures. The inspector also reviewed select I-131 written directives and patient release criteria.

The inspector reviewed the following records: radiation safety committee minutes, quarterly program audits, package receipts, waste disposal records, DOT Hazmat training, linearity and accuracy of the dose calibrator, instrument calibration, sealed source leak tests, daily area surveys, and weekly wipe tests. The inspector reviewed the dosimetry records for 2017 and through August 31, 2018 indicating the maximum annual dose to be 339 mrem - DDE; and 2,227 mrem - SDE. The inspector conducted independent and confirmatory surveys and found no residual contamination or exposures to members of the public in excess of regulatory limits. Interviews with licensee personnel indicated adequate knowledge of radiation safety, emergency procedures, and NRC regulations.

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