



# City of St. Louis

DEPARTMENT OF HEALTH AND HOSPITALS

## HOSPITAL DIVISION

VINCENT C. SCHOEMEHL, JR.  
MAYOR

### SECTIONS:

- ST. LOUIS CITY HOSPITAL
- \*\* ~~(MAX C. STARKLOFF MEMORIAL)~~
- 1515 LAFAYETTE 63104
- HGP AMBULATORY CARE CENTER
- 2601 N. WHITTIER 63113
- HARRY S. TRUMAN
- RESTORATIVE CENTER
- 5700 ARSENAL STREET
- ST. LOUIS, MO. 63139
- ROBERT KOCH HOSPITAL
- 4101 KOCH ROAD
- KOCH, MISSOURI
- SNODGRAS LABORATORY
- 1605 GRATTAN 63104
- HOMER G. PHILLIPS LABORATORY
- 2601 N. WHITTIER 63113

September 2, 1982

30-2263

U.S. Nuclear Regulatory Commission  
Region III  
799 Roosevelt Road  
Glen Ellyn, Illinois 69137

Dear Mr. Miller:

In response to your letter of August 18, 1982, concerning inspection findings of July 28, 1982, consider the following:

#### APPENDIX B - Management Controls

The Appendix B information is almost identical to the system we have in place and execute. We hope that future inspections would acknowledge our system. For example, we do not differentiate the Radiation Safety Office from Nuclear Medicine, thus, official files, records and information is centralized in the latter. Only those records which pertain directly to nuclear medicine operations are housed in that area. All personnel have been cognizant since 1978, that for control purposes in a large teaching hospital program, central record responsibility and maintenance is in the Radiation Safety Office which is staffed on a full time basis by trained personnel. We were and are following ALARA guidelines in this regard.

#### APPENDIX A

1. Records of geometrical variation checks are on file in the Radiation Safety Office for each dose calibrator that we have used since the date of license issuance. In most cases, the test was performed by the manufacturer.
2. Wipe tests were not performed on the external surface of source containers, as we are exempt due Part 20.205. Further, the preamble of Appendix F confirms the exemption but nonetheless requires a plan which we adopted and adhere to, unless exempt, i.e. a radiopharmaceutical that is liquid, greater than one millicurie and a half life greater than thirty (30) days.

821025 0391

SEP 20 1982

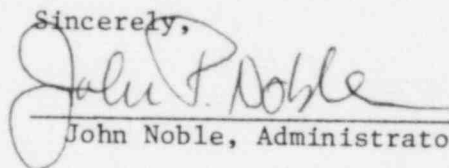
Further, this activity was reviewed during the August, 1979 inspection and deemed incompliance; NRC policy in 1978 condoned this approach and written evidence may be available to support same.

Nonetheless, we are aware that the current policy is different therefore, we will indeed implement wipe tests and seek relief via a license amendment.

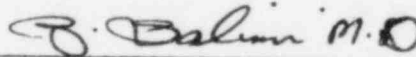
3. The requirement for daily survey of generator, preparation and injection sites was reiterated. Your inspection made discernible that the injection sites were not recorded contrary to policy. Future recording of surveys will be revised so the results of the three daily surveys are discernible.
4. Wipe tests were performed on barrels of waste and shipped according to records left by the waste contractor (ADCO). However, the post inspection made discernible that the results were recorded incorrectly and there is uncertainty as to how the measurements were conducted. Therefore, we will take the responsibility of wipe testing, measuring and recording wipe tests. In brief, barrels will be wiped, measured on appropriate instruments, results examined, and records maintained prior to the contractors pickup.
5. The post-inspection critique reveals that records of surveys of decayed waste are available. Discussion with personnel indicates that there was a problem in communication between our personnel and the inspector. However, we have made clear that these surveys are to be done according to the policy and procedure; further maintenance of records was reiterated.

In all cases, full compliance will be achieved not later than September 30, 1982.

Sincerely,



John Noble, Administrator



Zarrin Salimi, M.D.

Chairperson, Radiation Safety Committee