NRC FORM 591M
(04-2022)

U.S. NUCLEAR REGULATORY COMMISSION

Materials Inspection Report

1. Licensee/Location Inspected:	2. NRC/Regional Office
SSM Health DePaul Hospital - St. Louis Dept. of Nuclear Medicine 12303 DePaul Dr. Bridgeton, Missouri 63044 Report Number(s) 2022001	Region III U. S. Nuclear Regulatory Commission 2443 Warrenville Road, Suite 210 Lisle, IL 60532-4352

3. Docket Number(s)	4. License Number(s)	5. Date(s) of Inspection
030-02308	24-02490-03	August 1-2, 2022

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:

- [x] 1. Based on the inspection findings, no violations were identified.
- [ ] 2. Previous violation(s) closed.
- [ ] 3. During this inspection, certain of your activities, as described below and/or attached, were in violation of NRC requirements, and were assessed at Severity Level IV, in accordance with the NRC Enforcement Policy.

A. 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, corrective action was or is being taken, and the remaining criteria in the NRC Enforcement Policy were satisfied.
(Non-cited violation(s) was/were discussed involving the following requirement(s)

B. The following violation(s) is/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 AND DATE
LICENSEE'S REPRESENTATIVE		
NRC INSPECTOR	Geoffrey M. Warren, Sr. HP	Geoffrey M. Warren Digitally signed by Geoffrey M. Warren Date: 2022.08.31 15:17:26 -05'00'
BRANCH CHIEF	Michael A. Kunowski	Michael Kunowski 9/1/2022

Add Continuation Page

NRC FORM 592M
(10-2020)

U.S. NUCLEAR REGULATORY COMMISSION

Materials Inspection Record

1. Licensee Name:	2. Docket Number(s):	3. License Number(s)
SSM Health DePaul Hospital - St. Louis	030-02308	24-02490-03

4. Report Number(s):	5. Date(s) of Inspection:
2022001	August 2-3, 2022

6. Inspector(s):	7. Program Code(s):	8. Priority:	9. Inspection Guidance Used:
Geoffrey Warren, Sr. HP	02230	2	IP 87130, 87132

10. Licensee Contact Name(s):	11. Licensee E-mail Address:	12. Licensee Telephone Number(s):
Wallace Fuhrman, RSO	wally.fuhrman@ssmhealth.com	314-989-2219 office 314-795-0891 cell

13. Inspection Type:	14. Locations Inspected:	15. Next Inspection Date (MM/DD/YYYY):
☐ Initial ☑ Routine ☑ Announced ☐ Non-Routine ☐ Unannounced	☑ Main Office ☑ Field Office ☐ Temporary Job Site ☐ Remote	08/01/2024 ☑ Normal ☐ Extended ☐ Reduced ☐ No change

16. Scope and Observations:

This was an announced routine inspection. The licensee's primary location was a 500-bed hospital located in Bridgeton, Missouri, with authorization to perform diagnostic and therapeutic nuclear medicine procedures as well as High Dose Rate (HDR) remote afterloader therapy procedures; brachytherapy procedures were performed at St. Joseph West Hospital under this license. While authorized to perform procedures using yttrium-90 microspheres at the main hospital, the licensee had not yet started performing such procedures and had no plans to start in the near future. Locations inspected included the main hospital (12303 DePaul Dr., Bridgeton MO) and St. Joseph West (100 Medical Plaza, Lake St. Louis MO).

The nuclear medicine department at the main hospital was staffed with one full-time nuclear medicine technologist and one technologist on a short-term contract. The nuclear cardiology area was inactive due to staffing shortages, so cardiac procedures were performed in the main nuclear medicine area. The licensee's nuclear medicine staff typically administered 200 diagnostic doses monthly. While therapy procedures using iodine-131 (I-131) capsules (less than 30 mCi) and radium-223 dichloride were performed in the nuclear medicine area, none had been performed since 2021. Diagnostic procedures included a wide spectrum of imaging procedures using technetium-99m (Tc-99m) and iodine-125 (I-125); lung scans were performed using Tc-99m aerosols. The department received daily unit doses from a licensed nuclear pharmacy.

The radiation oncology department at the main hospital (Bridgeton) was staffed with one physician authorized user and one physicist; physicists from other associated facilities filled in when needed. The radiation therapy staff had performed approximately 25 HDR fractions (limited to gynecological procedures) and 16 I-131 thyroid ablations since the last inspection.

The radiation oncology department at St. Joseph West (a 200-bed hospital) was staffed with one physician authorized user and two physicists. The radiation therapy staff at this facility performed two or three prostate implant procedures monthly using I-125 seeds. Seeds were stored as authorized in the nuclear medicine area; nuclear medicine procedures at this site were performed under NRC License No. 24-15159-01. Records of implant procedures were maintained at the radiation oncology department at this hospital.

Performance Observations: During the inspection, the inspector toured nuclear medicine and radiation oncology areas at both hospitals and observed two diagnostic administrations of licensed materials including dose preparation and disposal, package receipt surveys, and I-125 seed package receipt and verification. Licensee personnel demonstrated daily checks in nuclear medicine and HDR areas, and daily and weekly contamination surveys, and

Warren, Geoffrey

From: Warren, Geoffrey
Sent: Thursday, September 1, 2022 1:11 PM
To: Fuhrman, Wally
Subject: NRC Inspection Report - SSM Health DePaul Hospital - St. Louis
Attachments: SSM Health DePaul Hosp SL - 591M_sigMK.pdf

Enclosed is the report for the NRC's inspection performed August 2-3, 2022, at SSM Health DePaul Hospital in St. Louis, Missouri, as we discussed by telephone this morning. No violations above minor safety significance were identified as a result of this inspection. No response is required to the report or to this message.

In accordance with 10 CFR 2.390 of the NRC's "Rules of Practice," a copy of this message and its attachment will be available electronically for public inspection in the NRC's Public Document Room or from the NRC's Agencywide Documents Access and Management System (ADAMS), accessible from the NRC's website at http://www.nrc.gov/reading-rm/adams.html.

Please feel free to contact me if you have any questions regarding this correspondence.

--
Geoffrey Warren
Senior Health Physicist (Inspector)
NRC Region III, Lisle, IL
630-829-9742

Materials Inspection Record (Continued)

described the administration of HDR procedures, prostate implant procedures, radiopharmaceutical therapies, and a variety of diagnostic procedures, as well as quarterly HDR checks, waste tracking and disposal, and other procedures. The inspector reviewed written directives for radiopharmaceutical therapies, HDR treatments, and brachytherapy procedures and identified no concerns. Interviews with licensee personnel indicated adequate knowledge of radiation safety concepts and procedures. Review of radiation dosimetry records indicated no exposures of concern. Review of Radiation Safety Committee and minutes indicated good attendance and discussion of appropriate topics. The inspector performed independent and confirmatory radiation measurements that were consistent with licensee survey records and postings.

No violations above minor safety significance were identified as a result of this inspection.