



Materials Inspection Report

1. Licensee/Location Inspected:

Arch Cancer Center
12855 N Forty Dr
Ground Level
St. Louis MO 63141

2. NRC/Regional Office

Region III
U. S. Nuclear Regulatory Commission
2443 Warrenville Road, Suite 210
Lisle, IL 60532-4352

Report Number(s) 2024-001

3. Docket Number(s)

030-39196

4. License Number(s)

24-35567-01

5. Date(s) of Inspection

6/28/2024

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. 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	Zahid Sulaiman, Health Physicist	Zahid M. Sulaiman <small>Digitally signed by Zahid M. Sulaiman Date: 2024.07.19 13:26:18 -05'00'</small>
BRANCH CHIEF	Rhex A. Edwards, Chief, MIB	 <small>Digitally signed by RHEX EDWARDS Date: 2024.07.22 11:37:18 -05'00'</small>



Materials Inspection Record

1. Licensee Name: Arch Cancer Center		2. Docket Number(s): 030-39196		3. License Number(s) 24-35567-01	
4. Report Number(s): 2024-001			5. Date(s) of Inspection: 6/28/2024		
6. Inspector(s): Zahid Sulaiman, Health Physicist		7. Program Code(s): 02200		8. Priority: 3	9. Inspection Guidance Used: 87131
10. Licensee Contact Name(s): William Dunn, MD, RSO Aimee Goudy, Manager Radiation Oncology		11. Licensee E-mail Address: wdunn@stlurology.com agoudy@stlurology.com		12. Licensee Telephone Number(s): 314-523-5423	
13. Inspection Type: <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Announced <input type="checkbox"/> Non-Routine <input checked="" type="checkbox"/> Unannounced		14. Locations Inspected: <input type="checkbox"/> Hybrid <input checked="" type="checkbox"/> Main Office <input type="checkbox"/> Temporary Job Site <input type="checkbox"/> Field Office <input type="checkbox"/> Remote		15. Next Inspection Date (MM/DD/YYYY): 06/28/2027 <input checked="" type="checkbox"/> Normal <input type="checkbox"/> Extended <input type="checkbox"/> Reduced <input type="checkbox"/> No change	
16. Location(s) Inspected List: 12855 N Forty Dr Ground Level St. Louis MO 63141					
17. Scope and Observations: This was an unannounced routine inspection of a cancer care clinic authorized to use radium-223 dichloride (Ra-223), Xofigo for medical purposes permitted by 10 CFR 35.300. The licensee was staffed with an authorized user who is also the RSO and a consultant physicist who also performs quarterly program audits. The licensee administers therapy doses one week a month. The licensee administered approximately six Ra-223, Xofigo annually. Licensee has not performed any Ra-223 therapy treatment since May 2023. PERFORMANCE OBSERVATIONS This inspection consisted of interviews with select licensee personnel, a review of select records, an observation of security of the materials, a tour of the hot lab, and independent measurements. The inspector observed the physicist conduct a physical inventory of sealed sources, and all sources were accounted for. The inspector had the physicist demonstrate/describe the Ra-223 administration process, dose calibrator constancy check, package receipt procedures, the area surveys, proper handling of radioactive waste, disposal procedures, and spill response with no issue noted. Through these demonstrations, observations, and discussions the inspector found the licensee staff knowledgeable of radiation protection principles, licensee procedures, and regulatory requirements. The inspector reviewed the following records: written directives and therapy procedures, annual audit, package receipts, waste disposal records, radiation safety training, linearity, and accuracy test of the dose calibrator, instrument calibration, sealed source leak tests and inventory, area surveys, wipe tests, and dosimetry record. No violations of NRC requirements were identified as a result of this inspection.					
Signature and Date - Branch Chief  Digitally signed by RHEX EDWARDS Date: 2024.07.22 11:36:54 -05'00'					