



Materials Inspection Report

1. Licensee/Location Inspected:

SSM Health DePaul Hospital- St. Louis
Department of Nuclear Medicine12303 DePaul Dr.
Bridgeton, MO 63044

Report Number(s) 2025001

2. NRC/Regional Office

Region III
U. S. Nuclear Regulatory Commission
2056 Westings Avenue, Suite 400
Naperville, IL 60563-2657

3. Docket Number(s)

030-02308

4. License Number(s)

24-02490-03

5. Date(s) of Inspection

February 25-26, 2025

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.


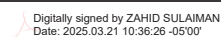

(Violations and Corrective Actions)

10 CFR 35.2092 states that a licensee shall maintain records of the disposal of licensed materials, as required by § 35.92, for 3 years. The record must include the date of the disposal, the survey instrument used, the background radiation level, the radiation level measured at the surface of each waste container, and the name of the individual who performed the survey.

See Continuation Page

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	Denise Peters	 Digitally signed by dpetey Date: 2025.03.24 15:52:29 -05'00'
NRC INSPECTOR	Zahid Sulaiman, Health Physicist	ZAHID SULAIMAN  Digitally signed by ZAHID SULAIMAN Date: 2025.03.21 10:36:26 -05'00'
BRANCH CHIEF	Rhex A. Edwards, Chief, MIB	 Digitally signed by RHEX EDWARDS Date: 2025.03.21 11:37:40 -05'00'

Materials Inspection Report (Continued)

Contrary to the above, since August 1, 2022, the licensee failed to maintain records of the disposal of licensed materials, as required by § 35.92, for 3 years. Specifically, since the last inspection on August 1, 2022, the licensee failed to maintain records of disposal of licensed materials as required by § 35.92.

This is a Severity Level IV violation (Enforcement Policy 6.3.d)

As corrective action, the licensee immediately created a new folder to document the disposal of decay-in-storage licensed materials as required by § 35.92.