UNITED STATES
NUCLEAR REGULATORY COMMISSION
REGION III
2056 WESTINGS AVENUE, SUITE 400
NAPERVILLE, IL 60563-2657

January 14, 2026

EAF-RIII-2025-0170

Andrew Dawson
Vice President of Operations
Mercy Hospital – St. Louis
615 S New Ballas Rd.
St. Louis, MO 63141

SUBJECT: NOTICE OF VIOLATION; NRC ROUTINE AND REACTIVE INSPECTION REPORT NO. 03002283/2025001(DRSS) MERCY HOSPITAL – ST. LOUIS

Dear Andrew Dawson:

This letter refers to the inspection conducted remotely starting on April 23, 2025, and onsite at your facilities in the St. Louis metropolitan area May 12-15, 2025, with continued in-office review through September 18, 2025. The purpose of the inspection was to review activities performed under your NRC license to ensure that activities were being performed in accordance with NRC requirements. The purpose of the in-office review was to review information that was made available after the onsite inspection.

During the inspection, one apparent violation of NRC requirements was identified. The circumstances surrounding the apparent violation, the significance of the issue, and the need for lasting and effective corrective actions were discussed with you and your staff during an exit meeting on September 18, 2025. Inspection Report No. 03002283/2025001(DRSS) was issued on November 21, 2025, and can be found in the NRC's Agencywide Documents Access and Management System (ADAMS) at accession number ML25318A987. ADAMS is accessible from the NRC website at http://www.nrc.gov/reading-rm/adams.html.

In the letter transmitting the inspection report, we provided you with the opportunity to address the apparent violation identified in the report by either attending a predecisional enforcement conference or by providing a written response before we made our final enforcement decision. In a letter dated December 22, 2025, (ML26005A082) you provided a response to the apparent violation.

Based on the information developed during the inspection and the information that you provided in your response to the inspection report dated December 22, 2025, the NRC has determined that a violation of NRC requirements occurred. The violation is cited in the enclosed Notice of Violation (Notice) and the circumstances surrounding it are described in detail in the subject inspection report. The violation was associated with the failure to prepare written directives that were dated and signed by an authorized user (AU) before multiple administrations of iodine-131 sodium iodide greater than 1.11 megabecquerels (30 microcuries (μCi)) as required by Title 10 of the *Code of Federal Regulations* (10 CFR) Part 35.40(a). The failure to have written directives reviewed and signed by the AU before the administration of byproduct material is a

significant safety concern to the NRC because it increases the potential for incorrect administrations, which can result in unnecessary dose to patients. Therefore, this violation has been categorized in accordance with the NRC Enforcement Policy at Severity Level III.

In accordance with the NRC Enforcement Policy, a base civil penalty in the amount of $9,000 is considered for a Severity Level III violation.

Because your facility has not been the subject of escalated enforcement actions within the last two years or two inspections, the NRC considered whether credit was warranted for *Corrective Action* in accordance with the civil penalty assessment process in Section 2.3.4 of the Enforcement Policy. In your letter dated December 22, 2025, you identified several actions to correct and prevent recurrence of the violation, including: (1) reviewing and updating AUs on your license, (2) developing and administering training to staff on the requirement to have an AU sign written directives before administration of byproduct material, (3) updating the vendor radiopharmacy web-ordering platform to help ensure the correct AU is used for ordering radiopharmaceuticals, and (4) revising procedures to ensure written directives are signed and dated prior to administrations. Based on these actions, the NRC determined that credit was warranted for *Corrective Action*.

Therefore, to encourage comprehensive correction of violations and in recognition of the absence of previous escalated enforcement action, I have been authorized, after consultation with the Acting Director, Office of Enforcement, not to propose a civil penalty in this case. However, significant violations in the future could result in a civil penalty. In addition, issuance of this Severity Level III violation constitutes escalated enforcement action that may subject you to increased inspection effort.

The NRC has concluded that information regarding: (1) the reason for the violation; (2) the corrective actions that have been taken and the results achieved; and (3) the date when full compliance was achieved is already adequately addressed on the docket in Inspection Report No. 03002283/2025001(DRSS) and your letter dated December 22, 2025. Therefore, you are not required to respond to this letter unless the description therein does not accurately reflect your corrective actions or your position. In that case, or if you choose to provide additional information, you should follow the instructions specified in the enclosed Notice.

In accordance with 10 CFR 2.390 of the NRC's “Agency Rules of Practice and Procedure,” a copy of this letter, its enclosure, and your response if you choose to provide one will be made available electronically for public inspection in the NRC Public Document Room and in the NRC’s ADAMS, accessible from the NRC website at http://www.nrc.gov/reading-rm/adams.html. To the extent possible, your response should not include any personal privacy, proprietary, or safeguards information so that it can be made available to the public without redaction. If personal privacy or proprietary information is necessary to provide an acceptable response, please provide a bracketed copy of your response that identifies the information that should be protected and a redacted copy of your response that deletes such information. If you request withholding of such information, you must specifically identify the portions of your response that you seek to have withheld and provide in detail the bases for your claim of withholding (e.g., explain why the disclosure of information will create an unwarranted invasion of personal privacy or provide the information required by 10 CFR 2.390(b) to support a request for withholding confidential commercial or financial information). The NRC also includes significant enforcement actions on its website at https://www.nrc.gov/about-nrc/regulatory/enforcement/current.

If you have any questions concerning this matter, please contact Diana Betancourt-Roldan, Enforcement Officer, at 630-810-4373.

Sincerely,

Signed by Shuaibi, Mohammed
on 01/14/26

Mohammed Shuaibi
Acting Regional Administrator

Docket No. 030-02283
License No. 24-00794-03

Enclosure: Notice of Violation

cc (w/encl): J. Eisenberg, RSO
State of Missouri

Letter to A. Dawson from M. Shuaibi dated January 14, 2026.

SUBJECT: NOTICE OF VIOLATION; NRC ROUTINE AND REACTIVE INSPECTION REPORT NO. 03002283/2025001(DRSS) MERCY HOSPITAL – ST. LOUIS

DISTRIBUTION w/encl:

RidsSecyMailCenter
OCADistribution
Michael King
Sabrina Atack
Bo Pham
June Cai
Juan Peralta
Carmen Rivera-Diaz
Mohammed Shuaibi
Daniel Collins
Julio Lara
John Monninger
Mauri Lemoncelli
Shelbie Lewman
Andrea Kock
Kevin Williams
Christian Einberg
Michele Burgess
Andy Miller
Logan Allen
Lauren Casey
Mark Kowal
Beth Alferink
Diana Betancourt-Roldan
Holly Harrington
Thomas Ashley
Meghan Blair
Jeffrey Hamman
Jared Heck
Rhex Edwards
MIB Inspectors
Deborah Piskura
Darren Piccirillo
Viktoria Mitlyng
Prema Chandrathil
Jason Draper
Sarah Bakhsh
RidsOemailCenter Resource

ADAMS Accession Number: ML26005A229
☒ Publicly Available ☐ Non-Publicly Available ☐ Sensitive ☒ Non-Sensitive

| OFFICE | RIII-EICS | | RIII-DRSS | | RIII-DRSS | | OE | |
|---|---|---|---|---|---|---|---|---|
| NAME | JDraper:ve | | REdwards | | JHeck | | CRivera-Diaz for JPeralta | |
| DATE | 1/6/2026 | | 1/6/2026 | | 1/6/2026 | | 1/6/2026 | |
| OFFICE | RIII-EICS | | RIII-ORA | | | | | |
| NAME | DBetancourt-Roldan | | MShuaibi | | | | | |
| DATE | 1/14/2026 | | 1/14/2026 | | | | | |

***OFFICIAL RECORD COPY***

NOTICE OF VIOLATION

Mercy Hospital – St. Louis
St. Louis, MO

Docket No. 030-02283
License No. 24-00794-03
EAF-RIII-2025-0170

During a U.S. Nuclear Regulatory Commission (NRC) inspection started remotely on April 23, 2025, conducted onsite May 12-15, 2025, and with continued in-office review through September 18, 2025, a violation of NRC requirements was identified. In accordance with the NRC Enforcement Policy, the violation is listed below:

> Title 10 CFR 35.40(a) requires, in part, that a written directive must be dated and signed by an authorized user before the administration of I-131 sodium iodide greater than 1.11 megabecquerels (MBq) (30 microcuries (µCi)).
>
> Contrary to the above, between July 12, 2023, and February 27, 2025, the Licensee failed to prepare written directives that were dated and signed by an authorized user before administration of iodine-131 sodium iodide greater than 1.11 megabecquerels (30 microcuries (µCi)). Specifically, seven patients received administrations of iodine-131 sodium iodide with an activity between 3 millicuries (111 megabecquerels) and 100 millicuries (3.7 gigabecquerels) without a written directive that was signed by an authorized user before the administration.

This is a Severity Level III violation (Section 6.3).

The NRC has concluded that information regarding the reason for the violation, the corrective actions taken and planned to correct the violation and prevent recurrence, and the date when full compliance was achieved, is already adequately addressed on the docket in Inspection Report No. 03002283/2025001(DRSS) and the letter from the Licensee dated December 22, 2025. However, the Licensee is required to submit a written statement or explanation pursuant to 10 CFR 2.201 if the description therein does not accurately reflect the Licensee's corrective actions or position. In that case, or if the Licensee chooses to respond, the Licensee should clearly mark its response as a "Reply to a Notice of Violation, (EAF-RIII-2025-0170)," and send it to the U.S. Nuclear Regulatory Commission, ATTN: Document Control Desk, Washington, DC 20555-0001 with a copy to the Regional Administrator, Region III, within 30 days of the date of the letter transmitting this Notice of Violation (Notice).

If the Licensee contests this enforcement action, the Licensee should also provide a copy of its response, with the basis for its denial, to the Director, Office of Enforcement, United States Nuclear Regulatory Commission, Washington, DC 20555-0001.

If you choose to respond, your response will be made available electronically for public inspection in the NRC Public Document Room or in the NRC's Agencywide Documents Access and Management System (ADAMS), accessible from the NRC website at http://www.nrc.gov/reading-rm/adams.html. Therefore, to the extent possible, the response should not include any personal privacy, proprietary, or safeguards information so that it can be made available to the public without redaction.

In accordance with 10 CFR 19.11, you may be required to post this Notice within two working days of receipt.

Dated this 14 day of January 2026.