

RI - DNMS Licensee Event Report Disposition

Licensee:

St Peter's Medical Center

Event Description:

License No:

29-07566-03

Docket No:

030

00359

MLER-RI:

2005-051

Event Date:

7-15-05

Report Date:

7-28-05

HQ Ops Event #:

1. REPORTING REQUIREMENT

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input checked="" type="checkbox"/>

10 CFR 20.1906 Package Contamination

10 CFR 20.2201 Theft or Loss

10 CFR 20.2203 30 Day Report

Other None

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

10 CFR 30.50 Report

10 CFR 35.3045 Medical Event

License Condition

2. REGION I RESPONSE

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input checked="" type="checkbox"/>
<input type="checkbox"/>

Immediate Site Inspection

Special Inspection

Telephone Inquiry

Preliminary Notification/Report

Information Entered in RI Log

Report Referred To:

Inspector/Date

Inspector/Date

Inspector/Date

☒ Daily Report

☒ Review at Next Inspection

3. REPORT EVALUATION

-- report is State of NJ inspection report

<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>

Description of Event

Levels of RAM Involved

Cause of Event

<input checked="" type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

Corrective Actions

Calculations Adequate

Additional Information Requested from Licensee

4. MANAGEMENT DIRECTIVE 8.3 EVALUATION

N/A

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

Release w/Exposure > Limits

Repeated Inadequate Control

Exposure 5x Limits

Potential Fatality

If any of the above are involved:

☐ Considered Need for IIT

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

Deliberate Misuse w/Exposure > Limits

Pkging Failure > 10 rads/hr or Contamination > 1000x Limits

Large# Indivs w/Exp > Limits or Medical Deterministic Effects

Unique Circumstances or Safeguards Concerns

Decision/Made By/Date:

5. MANAGEMENT DIRECTIVE 8.10 EVALUATION (additional evaluation for medical events only)

N/A

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

Timeliness - Inspection Meets Requirements (5 days for overdose / 10 days for underdose)

Medical Consultant Used-Name of Consultant/Date of Report:

Medical Consultant Determined Event Directly Contributed to Fatality

Device Failure with Possible Adverse Generic Implications

HQ or Contractor Support Required to Evaluate Consequences

6. SPECIAL INSTRUCTIONS OR COMMENTS

inspection report provided by State of NJ regarding inadequate survey of RI-RII

☒ Public

Inspector Signature:

Pandra Patrick

Date:

8-15-05

☐ Non-Public

Branch Chief Initials:

PL

Date:

8-15-05



State of New Jersey

Department of Environmental Protection

Division of Environmental Safety & Health
Radiation Protection & Release Prevention Element
Bureau of Environmental Radiation
Radioactive Materials Section
PO Box 415
Trenton, NJ 08625-0415
Phone (609)-984-5462
Fax (609)-633-2210

Richard J. Codey
Acting Governor

Bradley M. Campbell
Commissioner

July 28, 2005

Anthony Costabile
St. Peter's Medical Center
254 Easton Avenue
New Brunswick, NJ 08903

Dear Mr. Costabile:

SUBJECT: Inspection Report

This letter is in reference to the inspection conducted on July 15, 2005 by Mr. James T. McCullough of the Department of Environmental Protection's Bureau of Environmental Radiation of activities authorized by New Jersey State Radioactive Materials License **70069/01** and to the discussion of the inspection findings with Ms. Michelle Wall, Ms. Karen J. Plesher, and Mr. Robert J. Tokarz at the conclusion of the inspection.

The inspection was an examination of activities conducted under your license as they relate to radiation safety and compliance with NJSA Title 26:2D, the Radiation Protection Act, NJAC 7:28, the Radiation Protection Code and to conditions of your State Radioactive Materials License. The inspection consisted of selective examinations of procedures, representative records, interviews with personnel and measurements and observations made by the inspector.

During the inspection, one item of noncompliance regarding failures to confine possession and use of radioactive material to the locations authorized by your State radioactive material license was noted. Correspondence regarding this matter will follow under separate cover.

RECEIVED
REGION 1
2005 JUL 28 PM 1:48

In addition to the items of noncompliance regarding the use of New Jersey licensed radioactive materials, activities involving radioactive material not licensed by the State of New Jersey appeared not to be in full compliance with your facility's Radiation Safety Program. Specifically, contamination emanating 7.0 mR/hr, as measured with your own survey meter (Biodex 14-C, serial number 123159), near contact with the right side of the cardiac stress treadmill was found prior to any administrations being performed in that room. Records of area surveys performed at the end of the prior day showed no levels elevated above background. A discussion with Nuclear Medicine staff revealed that Technetium-99m is the sole isotope used in the stress treadmill room and it was presumed to be the nature of the contaminant. The inspector demonstrated the exposure rates to the chief technologist to show that the contamination should have been identified during an adequate end-of-day area survey. The contaminated area was cleaned, covered with lead shielding and surveyed by another nuclear medicine technologist. The lead sheet offered enough shielding to allow use of the room to continue. This incident should stress the importance of conducting thorough end-of-day area surveys. Appropriate survey methods should have identified the spill.

No reply to this report is required. A copy of this letter is being forwarded to the United States Nuclear Regulatory Commission (USNRC). If you should have any questions concerning this inspection or any related matter, please contact this office at (609) 984-5462.

Sincerely,

A handwritten signature in black ink, appearing to read "William P. Csaszar". The signature is fluid and cursive, with the first name "William" and last name "Csaszar" clearly distinguishable.

William Csaszar, License Administrator
Radioactive Materials Section

c: NRC Region I