NRC FORM 591M PART 1
(07-2012)
10 CFR 2.201

U.S. NUCLEAR REGULATORY COMMISSION

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED:	2. NRC/REGIONAL OFFICE
Ste. Genevieve County Memorial Hospital P.O. Box 468 Ste. Genevieve, MO 63670 REPORT NUMBER(S) 15-001	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
030-37003	24-32589-01	06/26/2015

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. The violations(s), specifically described to you by the inspector as non-cited violations, are not being cited because they were self-identified, non-repetitive, and corrective action was or is being taken, and the remaining criteria in the NRC Enforcement Policy, to exercise discretion, were satisfied.

Non-cited violation(s) were discussed involving the following requirement(s):

☐ 4. During this inspection, certain of your activities, as described below and/or attached, were in violation of NRC requirements and 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	DATE
LICENSEE'S REPRESENTATIVE			
NRC INSPECTOR	Deborah Piskura/Edward Harvey	Deborah A. Piskura / Edward Harvey	6/26/15
BRANCH CHIEF	Jamie T. McCear		7/1/15

NRC FORM 591M PART 3
(07-2012)
10 CFR 2.201

U.S. NUCLEAR REGULATORY COMMISSION

Docket File Information

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6. INSPECTION PROCEDURES USED	7. INSPECTION FOCUS AREAS
87131	3.01 - 3.08

SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM CODE(S)	2. PRIORITY	3. LICENSEE CONTACT	4. TELEPHONE NUMBER
02120	3	Kenneth L. Miller, Ph.D.	(573) 883-2751

☑ Main Office Inspection Next Inspection Date: 06/2018

☐ Field Office Inspection _____

☐ Temporary Job Site Inspection _____

PROGRAM SCOPE

This was a routine inspection of a 47-bed county hospital with authorization to use byproduct material permitted under 10 CFR 35.100, 35.200 and 35.300. The licensee's nuclear medicine department was staffed by one full-time nuclear medicine technologist and two part-time cross-trained technologists who administered approximately 25 diagnostic doses per month for cardiac and and additional 25 per month combined for bone, HIDA, and lung scans. The licensee had not conducted any administrations of1-131 since receiving authorization for activities under 10 CFR 35.300. Patient procedures were performed Monday through Friday. The licensee obtained its unit doses from Triad Nuclear Pharmacy and did not use bulk doses or molybdenum/technetium generators.

PERFORMANCE OBSERVATIONS

The inspectors observed a part time technologist demonstrate package receipt and surveying procedures, daily dose calibrator constancy checks, daily surveys, and waste disposal procedures. The inspectors then confirmed the performance of these activities by reviewing the records since the previous inspection. The licensee contracted Rad Protection Services to perform quarterly program audits and equipment calibrations. These activities were confirmed by review of the physicist's reports. The inspectors also confirm that all sources listed on the source inventory were on site and accounted for.

The technologist demonstrated adequate knowledge of emergency procedures in the event of a spill, or hot package through interview with the inspectors. All material was adequately labeled and secured in the hot lab, which remained closed and locked when not under the surveillance of authorized personnel.

The inspectors reviewed the forms and procedures for I-131 administrations, although there were no therapies since obtaining authorization on the license.

No violations were identified during this inspection.