

**SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION**

1. LICENSEE/LOCATION INSPECTED:

Barnes-Jewish St. Peter's Hospital  
Department of Radiology  
10 Hospital Drive  
St. Peters, MO 63376

REPORT NUMBER(S) 2016001

2. NRC/REGIONAL OFFICE

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

3. DOCKET NUMBER(S)

030-17414

4. LICENSE NUMBER(S)

24-18968-01

5. DATE(S) OF INSPECTION

April 2<sup>nd</sup> 2016

**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:

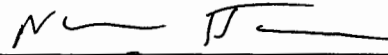
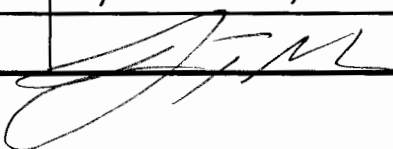
- ☒ 1. Based on the inspection findings, no violations were identified.
- ☐ 2. Previous violation(s) closed.
- ☐ 3. The violations(s), specifically described to you by the inspector as non-cited violations, are not being cited because they were self-identified, non-repetitive, and corrective action was 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             | Navid Tehrani |  | 4/17/16 |
| BRANCH CHIEF              | Aaron McCraw  |  | 5/9/16  |

**Docket File Information**

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|   |  |   |  |
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| 3. DOCKET NUMBER(S)<br><br>030-17414  | 4. LICENSE NUMBER(S)<br><br>24-18968-01      | 5. DATE(S) OF INSPECTION<br><br>April 20, 2016  |  |
| 6. INSPECTION PROCEDURES USED<br><br>87130, 87131, 87132  | 7. INSPECTION FOCUS AREAS<br><br>03.01-03.07 |   |  |

**SUPPLEMENTAL INSPECTION INFORMATION**

|  |                      |  |   |
|--|----------------------|--|---|
| 1. PROGRAM CODE(S)<br><br>02120  | 2. PRIORITY<br><br>3 | 3. LICENSEE CONTACT<br><br>Constance Courtois, M.D., RSO | 4. TELEPHONE NUMBER<br><br>(314) 495-3438 |
| <input checked="" type="checkbox"/> Main Office Inspection      Next Inspection Date: 04/20/2019 |                      |  |   |
| <input type="checkbox"/> Field Office Inspection   |                      |  |   |
| <input type="checkbox"/> Temporary Job Site Inspection   |                      |  |   |

**PROGRAM SCOPE**

This was an unannounced routine inspection of a small hospital authorized to use licensed material permitted by Section 35.100, 35.200, 35.300, and 35.400. The nuclear medicine department was staffed with three full-time technologists who performed approximately ten diagnostic procedures a day which included a full spectrum of studies. The licensee administered approximately twenty I-131 treatments for hyperthyroidism and Graves Disease annually (capsule form only). The hospital retained the services of a consulting physicist who audited the radiation safety program on a quarterly basis. The licensee's radiation therapy activities were limited to permanent prostate implants using I-125. The patient treatments were performed by one authorized user supported by one medical physicist. The licensee administered approximately twelve I-125 permanent prostate implants each year.

No administrations of licensed material were performed during this inspection. Interviews of available staff revealed an adequate level of understanding of emergency and material handling procedures and techniques. Dose calibrator constancy checks, package receipt, daily surveys, and waste handling and disposal procedures were successfully demonstrated. The inspector reviewed the post-treatment plans for two implants with physics personnel (neither post-treatment plan exceeded 20% of the prescribed dose). An outside consultant performed quarterly program audits that were adequate to oversee the program. Licensed material was adequately secured and not readily accessible to members of the general public. The licensee possessed a radiation survey meter that was calibrated, operational, and performed well in side-by-side comparison with an NRC instrument.

Independent measurements did not indicate readings in excess of Title 10 of the Code of Federal Regulations (10 CFR) Part 20 limits in restricted or unrestricted areas. Personal whole body and extremity dosimetry were observed worn by the staff during the inspection, and records did not indicate doses in excess of 10 CFR Part 20 limits.

No violations of NRC requirements were identified during this inspection.