

(10-2003)

10 CFR 2.201

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

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1. LICENSEE/LOCATION INSPECTED

Minneapolis Radiation Oncology
6401 France Ave South
Minneapolis, Mn 55435
REPORT 2005001

2. NRC/REGIONAL OFFICE

US NRC Reg 111
2443 Wornville Rd
Suite 210
Lisle, IL 60532

3. DOCKET NUMBER(S)

030-36983

4. LICENSEE NUMBER(S)

22-32583-01

5. DATE(S) OF INSPECTION

Nov 16, 2005

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 violation(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, NUREG-1600, to exercise discretion, were satisfied.

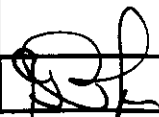
_____ Non-Cited Violation(s) was/were discussed involving the following requirement(s) and Corrective Action(s):

- ☐ 4. During this inspection certain of your activities, as described below and/or attached, were in violation of NRC requirements and are being cited. This form is a NOTICE OF VIOLATION, which may be subject to posting in accordance with 10 CFR 19.11.

(Violations and Corrective Actions)

Licensee's Statement of Corrective Actions for Item 4, above.

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	G. Fark		Nov 16, 2005

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Docket File Information
SAFETY INSPECTION REPORT
AND COMPLIANCE INSPECTION



1. LICENSEE Minneapolis Rad Onc REPORT NUMBER(S) 2005-001		2. NRC/REGIONAL OFFICE Region III 2443 Warrenville Road Lisle, IL 60532	
3. DOCKET NUMBER(S) 030-36983	4. LICENSE NUMBER(S) 22-32583-01	5. DATE(S) OF INSPECTION 11/16/05	
6. INSPECTION PROCEDURES USED 87133	7. INSPECTION FOCUS AREAS 03.01-03.07		
SUPPLEMENTAL INSPECTION INFORMATION			
1. PROGRAM CODE(S) 2230	2. PRIORITY 2	3. LICENSEE CONTACT Mary Fox	4. TELEPHONE NUMBER 612/900-8777
<input checked="" type="checkbox"/> Main Office Inspection		Next Inspection Date: 11/2007	
<input type="checkbox"/> Field Office			
<input type="checkbox"/> Temporary Job Site			

PROGRAM SCOPE

Licensee is a unit of a large hospital group located in Minneapolis, Minnesota. Licensee is a stand alone radiation oncology unit of Fairview Southdale Hospital conducting treatments using an HDR unit. The licensee plans on performing seven procedures per week using an HDR unit. This licensee owns one HDR unit which is currently stored with the manufacturer. Licensee does perform conventional brachytherapy under the main hospital license.

Performance Observations

The inspector toured the facilities and interviewed authorized users/staff members. Each appeared knowledgeable in radiation safety and isotope handling techniques. Package receipt procedures were demonstrated for the inspector as well as rad waste handling practices. Independent surveys by the inspector did not detect any abnormal reading and were within the expected range.

The inspector reviewed the written directives for conventional brachytherapy under the main hospital license. No HDR treatments were reviewed as the unit is in storage at the manufacturer. No abnormalities were observed.