NRC FORM 591M PART 1
(06-2010)
10 CFR 2.201

U.S NUCLEAR REGULATORY COMMISSION

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED:	2. NRC/REGIONAL OFFICE
Oncology Hematology Associates of S.W. Indiana 3699 Epworth Road Newburgh, IN REPORT NUMBER(S): 11-01	U.S. Nuclear Regulatory Commission, Region III 2443 Warrenville Road, Suite 210 Lisle, Illinois 60532

3. DOCKET NUMBER(S)	4. LICENSEE NUMBER(S)	5. DATE(S) OF INSPECTION
030-37836	13-32700-01	8/4/11

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) 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. This form is a NOTICE OF VIOLATION, which may be subject to posting in accordance with 10 CFR 19.11

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	Ken Lambert	Ken Lambert	8/4/11
Branch Chief	Tamara E. Bloomer	T E Bloomer	9/8/11

NRC FORM 591M PART 3
(10-2010)
10 CFR 2.201

U.S. NUCLEAR REGULATORY COMMISSION

Docket File Information

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED:	2. NRC/REGIONAL OFFICE	
Oncology Hematology Associates of S.W. Indiana REPORT NUMBER(S) 11-01	Region III: 2443 Warrenville Rd., Ste. 210 Lisle, IL 60532-4352	
3. DOCKET NUMBER(S) 030-37836	4. LICENSE NUMBER(S) 13-32700-01	5. DATE(S) OF INSPECTION 08/04/2011
6. INSPECTION PROCEDURES USED 87132	7. INSPECTION FOCUS AREAS 03.01-03.07	

SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM CODE(S)	2. PRIORITY	3. LICENSEE CONTACT	4. TELEPHONE NUMBER
2230	2	Terri Wade, Radiation and Imaging Mngr	(812) 490-5748

☑ Main Office Inspection Next Inspection Date: August 2013

☐ Field Office Inspection

☐ Temporary Job Site Inspection

PROGRAM SCOPE

This active medical facility performs approximately 5 diagnostic PET/CT imaging studies daily utilizing flourine-18 (FDG) in whole body scans and approximately 30 high dose rate afterloader (HDR) treatments per year involving primarily mammosite and gynecological applications. The facility was new in November 2008.2008 and the number of HDR treatments have been increasing every year with 30 treatments as of August 4, 2011. The facility is staffed with two full time technologists and eight users authorized for 35.200. HDR treatments are performed by two authorized users and one medical physicist.

PERFORMANCE OBSERVATIONS

Interviews conducted with available staff revealed an adequate level of understanding of emergency and material handling procedures and techniques. PET administering technologists demonstrated/discussed proper package receipt and return surveys, daily constancy checks of dose calibrator, daily and weekly surveys, and inventory and leak tests. Licensed material was observed well secured and or under the surveillance of license staff and was not readily accessible to members of the public. Technologists were observed wearing appropriate dosimetry.

The inspector observed a daily spot check of the HDR unit and associated equipment with no issues identified. The daily checks included The inspector reviewed written directives and treatment plans for 6 treatments performed in 2010 and 7 treatments performed in 2011 with no issues identified. The HDR unit was observed properly secured in its storage cabinet when not is use.

Personal dosimetry records were reviewed and revealed that maximum exposure for staff were 975 millirem (mrem) whole body (WB) and 2190 mrem extremity for 2009; 1080 mrem WB and 4250 mrem extremity for 2010; and 460 mrem WB and 2190 mrem for 2011 through June. These exposures were for the the technologists responsible for PET imaging studies. Exposures for other technical staff were noted to be well below regulatory requirements.

Independent measurements take in restricted and unrestricted areas using a Ludlum Model 3403 survey meter coupled to a compensated Geiger-Mueller detector were as expected and comparable to the licensee measurements.

No violations of regulatory requirements were identified.