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
Evansville Cancer Center/Vantage Oncology 700 North Burkhardt Road Evansville, Indiana REPORT NUMBER(S) 2014-001	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
030-30712	13-25945-01	3/27/14, with in-office review through 3/31/14

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	Robert G. Gattone, Jr.	Robert D. Gattone, Jr.	4/2/14
BRANCH CHIEF	Aaron T. McCraw		4/3/14

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
87132	02.01, 02.02, 02.04, 02.05, 02.06, 02.07, and 02.08

SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM CODE(S)	2. PRIORITY	3. LICENSEE CONTACT	4. TELEPHONE NUMBER
02230	2	Saiyid Shah, Ph.D., RSO	(812) 205-6610

☑ Main Office Inspection Next Inspection Date: 03/27/2016

☐ Field Office Inspection

☐ Temporary Job Site Inspection

PROGRAM SCOPE

The licensee had not conducted 10 CFR 35.300 or 35.400 activities since the last NRC inspection. The only licensed activity conducted since the last inspection was about 3 HDR treatments per week at the authorized location of use. The HDR treatments included prostate, tandem and ovoid, vaginal cylinder, lung, and breast. The licensee's work hours were 8:00 am to 4:30 pm Mondays through Fridays. The licensee possessed a strontium-90 eye applicator that had not been used since about 2006. The licensee did not plan to use the strontium-90 eye applicator. The inspector discussed the benefits of proper transfer/disposal of sealed sources when there is no plan to use them. In addition, the inspector discussed options available for authorized transfer/disposal of the strontium-90 eye applicator. No HDR treatments were scheduled during the week of the inspection. The in-office review included receipt and review of HDR emergency training records that were unavailable during the onsite inspection.

Performance Observations

The inspector observed: (1) selected records of recent HDR treatments including, in part, written directives, treatment plans, dosimetry data over-layed with anatomical images, and treatment verification checklists; (2) records showing that the licensee conducted pre- and post-HDR treatment patient radiation surveys; (3) selected records showing that staff verified that treatments were administered per the written directives and treatment plans. (4) that the licensee conducted sealed source inventories as required; (5) University of Wisconsin's calibration record of the strontium-90 source in the eye applicator dated 9/28/09; (6) that the licensee possessed a Tracer Lab strontium-90 Model RA-1, Serial No. 874 strontium-90 eye applicator source; (7) that the licensee's measurement of a check source with its calibrated survey instrument was the same as the inspector's measurement taken with a calibrated, NRC-owned survey instrument; (8) a maximum of 3 milliroentgens per hour at the surface of the authorized HDR device based on his independent survey; (9) that the shipping paper, packaging, labeling, markings and ambient exposure rate measurements of the package were as required for the previous iridium-192 HDR source that was ready for transfer; (10) dosimetry badge results for 2012 through February 9, 2014, and the results were well below regulatory dose limits; (11) a radiation therapist and an authorized medical physicist demonstrate how they would respond to emergency HDR scenarios posed by the inspector; and (12) a radiation therapist demonstrate how she had done HDR spot checks.