

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED:

Evansville Cancer Center/
Vantage Oncology
700 North Burkhardt Road
Evansville, IN 47715

REPORT NUMBER(S) 16-001

2. NRC/REGIONAL OFFICE

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

3. DOCKET NUMBER(S)

030-30712

4. LICENSE NUMBER(S)

13-25945-01

5. DATE(S) OF INSPECTION

May 11, 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 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, 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	Zahid Sulaiman, Health Physicist	<i>Zahid Sulaiman</i>	5/11/16
BRANCH CHIEF	Aaron T. McCraw, Chief, MIB	<i>[Signature]</i>	5/24/16

Docket File Information

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3. DOCKET NUMBER(S) 030-30712	4. LICENSE NUMBER(S) 13-25945-01	5. DATE(S) OF INSPECTION May 11, 2016
6. INSPECTION PROCEDURES USED 87132	7. INSPECTION FOCUS AREAS 03.01-03.07	

SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM CODE(S) 02230	2. PRIORITY 2	3. LICENSEE CONTACT Saiyid Shah, PhD, RSO	4. TELEPHONE NUMBER (812) 205-6610
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<input checked="" type="checkbox"/> Main Office Inspection	Next Inspection Date: 05/11/2018
<input type="checkbox"/> Field Office Inspection	
<input type="checkbox"/> Temporary Job Site Inspection	

PROGRAM SCOPE

This was a routine inspection of a cancer treatment facility authorized under NRC license to use byproduct materials in 10 CFR 35.600 using a GammaMed Plus iX remote afterloading brachytherapy device and 10 CFR 35.400 for storage incident to disposal at the location indicated on the license. No 10 CFR 35.400 procedures have been performed since the previous inspection. The licensee had a strontium-90 eye applicator properly packed and picked up for disposal on April 1, 2016 by an authorized disposal company. The licensee is waiting for final disposal certificate from the vendor to remove strontium-90 from the license. The oncology department was staffed with one oncologist, two authorized medical physicists (AMP), three radiation therapists and one dosimetrist. The licensee conducted approximately 120 high dose rate brachytherapy (HDR) patient treatments per year. The majority of treatments conducted were for prostate (97%) and infrequent vaginal cancer. The HDR source was exchanged quarterly, with the most recent source exchange on April 1, 2016.

Performance Observations:

The inspector observed one HDR prostate treatment procedure to a patient, with no issues noted. The inspection consisted of interviews with select licensee personnel; review of select records; tour of the cancer center facility and independent measurement. The inspector had the AMP and radiation therapist demonstrate the HDR unit's: (1) security of licensed material; (2) daily checks; (3) emergency equipment and procedures; (4) safety procedures and instructions; (5) door interlock system; and (6) radiation monitoring equipment. The inspector reviewed four HDR written directives and treatment plans, with no findings. The inspector performed independent and confirmatory radiation measurements, which indicated results consistent with licensee survey records and postings.

No violations of NRC requirements were identified during this inspection.