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NRC FORM 591M PART 1
(10-2003)
10 CFR 2.201

U.S. NUCLEAR REGULATORY COMMISSION

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED: <i>Scott Radiological Group, Inc. Festus, mo 63028</i>		2. NRC REGIONAL OFFICE U.S. Nuclear Regulatory Commission Region III 2443 Warrenville Road Suite 210 Lisle, Illinois 60532-4351	
REPORT <i>2005-001</i>			
3. DOCKET NUMBER(S) <i>030-36097</i>	4. LICENSEE NUMBER(S) <i>24-32416-01</i>	5. DATE(S) OF INSPECTION <i>Sept. 28, 2005</i>	

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

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	Deborah A. Piskura	<i>D. A. Piskura</i>	9/28/05

Docket File Information
**SAFETY INSPECTION REPORT
AND COMPLIANCE INSPECTION**

1. LICENSEE Scott Radiological Group, Inc. REPORT NUMBER(S) 2005-001		2. NRC/REGIONAL OFFICE Region III 2443 Warrenville Road, Suite 210 Lisle, IL 60532	
3. DOCKET NUMBER(S) 030-36097		4. LICENSE NUMBER(S) 24-32416-01	5. DATE(S) OF INSPECTION Septmeber 28, 2005
6. INSPECTION PROCEDURES USED 87132		7. INSPECTION FOCUS AREAS 03.01, 03.02, 03.03, 03.04, 03.05, 03.06, 03.07, and 03.08	

SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM CODE(S) 02230	2. PRIORITY G 2	3. LICENSEE CONTACT Timothy R. O'Leary, M.D., RSO	4. TELEPHONE NUMBER 636.933.0303
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Main Office Inspection Next Inspection Date: Septmeber 2007

Field _____

Temporary Job Site _____

PROGRAM SCOPE

This licensee ^a ~~was~~ private multi-speciality out-patient cancer care clinic. The licensee was authorized to receive an HDR unit for clinic use from Midwest Brachytherapy (License No. 24-32280-07), a mobile HDR service licensee. Midwest Brachytherapy installed the unit and performed daily QA and safety checks each day the unit was located onsite. The licensee administered approximately 6 patient treatment series since the license was issued; these treatments were for gynecological cancers. All HDR patient treatments were administered by the attending oncologist and an authorized medical physicist (therapy technologists do not operate the controls to the HDR unit).

At the time of this inspection the HDR unit was not on site (entire week). This inspection consisted of interviews with licensee personnel, a review of select records, and tours of the department and treatment room.