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SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED: Cancer Care Group, P.C. 1340 North Madison Avenue Anderson, IN 46011	2. NRC/REGIONAL OFFICE U.S. Nuclear Regulatory Commission Region III 2443 Warrenville Road Suite 210 Lisle, Illinois 60532-4351
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REPORT 2007-001

3. DOCKET NUMBER(S) 030-36525	4. LICENSEE NUMBER(S) 13-32500-01	5. DATE(S) OF INSPECTION June 8, 2007
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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	Deborah A. Piskura	<i>Deborah A. Piskura</i>	6/8/2007

Docket File Information
SAFETY INSPECTION REPORT
AND COMPLIANCE INSPECTION

1. LICENSEE Cancer Care Group, P.C. REPORT 2007-001	2. NRC/REGIONAL OFFICE Region III 2443 Warrenville Road, Suite 210 Lisle, IL 60532
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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
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SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM CODE(S) 02230	2. PRIORITY G 2	3. LICENSEE CONTACT James Currier, M.D., RSO	4. TELEPHONE NUMBER 317-925-7730
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Main Office Inspection Next Inspection Date: June 2009

Field _____

Temporary Job Site _____

PROGRAM SCOPE

This licensee was private multi-speciality out-patient cancer care clinic. The licensee was authorized use Ir-192 in an HDR unit. The radiation therapy department was staffed with 2 medical physicists, 2 physicians (authorized users) and 6 therapy technologists. The licensee administered approximately 1-2 patient treatment series monthly using its HDR unit; these treatments were for prostate and gynecological cancers. All HDR patient treatments were administered by the attending radiation oncologist and the medical physicist (therapy technologists did not operate the controls to the HDR unit). Source exchange, maintenance, and repairs on the HDR unit were performed by the manufacturer.

This inspection consisted of interviews with selected licensee personnel, a review of selected records, tour of the radiation oncology department, and independent measurements. The inspector observed one HDR brachytherapy treatment. The inspector reviewed the written directive for the procedure; observed the licensee performing daily QA checks and treatment planning; and observed the patient treatment and patient surveys at the conclusion of the treatment. The inspector also interviewed the physician authorized user and the nurse who attended the patient.