NRC FORM 591M PART 1 U.S. NUCLEAR REGULATORY COMMISSION				
SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION				
LICENSEE/LOCATION INSPECTED: CentraState Healthcare System, Inc. 901 West Main Street Freehold, New Jersey 07728		NRC/REGIONAL OFFICE U.S. Nuclear Regulatory Commission Region I, 475 Allendale Road		
		King of Prussia, Pennsylvania 19406-1415		
REPORT 2008001 3. DOCKET NUMBER(S)	4. LICENSE NUMBER(S)	5. DATE(S) OF INSPECTION		
030-08340	29-14966-01	February 29, 2008		
The Inspection was an examination of the activities conducted under your license as they relate to rediation 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 inspection. 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 GFR 19.11.				
10 CFR 35.633(b)(5) require, in part, that full calibration measurement must include determination of timer accuracy and linearity over the typical range of use. Contrary to the above, as of February 29, 2008, the licensee did not determine timer accuracy and linearity over the range of use for the high dose rate remote afterloading (HDR) unit. Specifically, the licensee treated patients up to a treatment shot duration of approximately 10 minutes, however timer accuracy and linearity measurements were performed for a maximum duration of 40 seconds. The licensee updated its procedures to include determination of timer accuracy and linearity over the range of use of the HDR unit				
Licensee's Statement of Corrective Actions for Item 4, above.				
I hereby state that, within 30 days, the ections 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				
LICENSEE'S REPRESENTATIVE JOIN D	ragotta	pm On	ugot	3/4/08
NRC INSPECTOR Shirley Xu		1 & hours	32	3/4/2006
NRC FORM 591M PART 1 (Rev. by RI 07/09) G:\Docs\Current\unity \nu \text{Record\R29-14986-01,2008-001.591P1.wpd} SUNS! Review Completed By: /RA/ S Xu X Public X Non-Sensitive				

TOTAL P.001