

FAX

To: Penny Lanzisera From: Catherine Perham

Fax: 610-337-5269 Pages: 3 including this cover

Phone: 610-337-5169 Date: 2.27.2009

Re: Rad Onc Written Directive CC:

Urgent For Review Please Comment Please Reply Please Recycle

Comments:

Dear Ms. Lanzisera,

I am faxing a copy of the original written directive because I believe that you were incorrect in saying that it did not contain the isotope or the intended dose. As they used a Written Directive from another procedure, the isotope was already on the document in several places. As far as the original intended dose, it was typed in and I will admit that I did not see it, either, at first inspection of the document. They way it was typed, into the middle of a line and without being underlined itself, it gives the impression that there are two blank spaces that were not filled in. Instead, it is one space that was filled in with a typed number (100). The intended dose was 100 gray, confirmed by CT.

I am sorry that this piece of paper got misfiled and is not filled out in its entirety. We we already brainstorming other ways to handle this procedure as in hindsight it does not seem to be a good idea to take the original Written Directive into the operating room, when a copy should suffice. If it had become contaminated with blood or fluid, it would have been lost to us entirely.

I am sending this copy of the document so that you can take a closer look, as I did after our exit interview. I think you will reconsider the statement that the Written Directive did not specify the isotope or intended dose. I have included the Medical Physicist's report, which contains a description of corrective actions taken.

Thank you for your kind consideration of this document.

Sincerely,

Catherine S. Perham ARSO, University of Virginia Environmental Health and Safety Office

2.27.2009



UNIVERSITY OF VIRGINIA HEALTH SYSTEM

WRITTEN DIRECTIVE FOR I-125 *isotope*

~~LUNG~~ BRACHYTHERAPY PROCEDURE

PELVIC SIDEWALL

Patient Name: [redacted] MRN: [redacted] Date: 4-10-08

RP #: [redacted]

Patient Double ID performed by OR staff: YES NO

Pre-implantation

Treatment Site: LEFT PELVIC SIDEWALL RT LT Lung

intended dose confirmed by CT

Prescribed Dose: 100 Gy Treatment Site: ~~Resection Suture Line~~ - margin

Radioisotope: Iodine-125 (Sealed Sources in a Strand) # of Strands _____

Method: Mesh, using 0.4 to 0.6 mCi seeds (5 mm margin)

isotope

~~Double suture using 0.7 - 0.8 mCi seeds (7 mm margin)~~

Pre-implant seed count: _____

AU Signature: [Signature]

Date: 4-10-08

OR Post-implantation

of Seeds in each Strand _____ Strand Separation (pre-inflation) _____ mm

Source Strength per Seed (mCi): _____ Total Source Strength (mCi): _____

Implanted seed count _____ Seeds for disposal _____

Time of implant: _____ Exposure Time Permanent Implant

*Benny
I have removed patient information. I have added pertinent information. Thank you.
Sincerely,
Cathy*

Report on Written Directive for Patient A:

On April 9, 2008, the following seeds were logged **into** the inventory in the Department of Radiation Oncology spread sheet:

50 (fifty) I-125 seeds at 0.529 mCi/seed activity
1 (one) **calibrated** I-125 seed at 0.529 mCi activity
20 (twenty) I-125 seeds at **0.623 mCi/seed** activity

We have a written copy of the order of **Oncura** in **the** patient's record.

On April 21, 2008, the following seeds were **removed from** the inventory in the Department of Radiation Oncology spread sheet:

1 (one) calibrated I-125 seed at 0.529 mCi/seed
22 (twenty two) **I-125** seeds at **0.529 mCi/seed** activity
6 (six) **I-125** seeds at 0.623 mCi/seed activity

Making use of the **inventory** data, 42 seeds **with** a total activity of 23.534 mCi were implanted into the pelvic sidewall of Patient A.

The written directive that was located for Patient A shows the isotope (I-125) was implanted, with a prescribed dose of 100 Gy. **It was missing** the total activity **used**, which **was** determined to be 23.534 mCi, along with the total seeds used. The directive was also missing patient radiation survey information.

A post implant CT was **performed** so that the dose to the implant could be **determined**. The **number** of seeds in the post plan **corresponds** to the number of **seeds** that were implanted. The physician reviewed and signed the post plan, which is also part of the patient record.

Corrective Action:

This treatment occurred immediately before the Department of Radiation Oncology began scanning **all brachytherapy** treatment records into the Record and **Verify** system. In the **future**, the records will be reviewed by a radiation physicist in a timely manner, scanned, and then reviewed by a radiation physicist to ensure completeness of the record. A checklist **will** be developed to ensure that all pertinent records have been **scanned**.