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: | 2. NRC/REGIONAL OFFICE |
|---|---|
| Madison County Cancer Care Center, LLC<br>1340 North Madison Avenue<br>Anderson, Indiana 46011<br><br>REPORT NUMBER(S) 2009-001 | **Region III**<br>**U.S. Nuclear Regulatory Commission**<br>**2443 Warrenville Road, Suite 210**<br>**Lisle, Illinois 60532-4351** |

| 3. DOCKET NUMBER(S) | 4. LICENSEE NUMBER(S) | 5. DATE(S) OF INSPECTION |
|---|---|---|
| 030-36525 | 13-32500-01 | April 2, 2009 |

**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:

- [x] 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 | Geoffrey M. Warren | [signature] | 4/2/09 |

**NRC FORM 591M PART 3**
(10-2003) 10 CFR 2.201

**Docket File Information**

**U.S. NUCLEAR REGULATORY COMMISSION**

# SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

| 1. LICENSEE | 2. NRC/REGIONAL OFFICE |
|---|---|
| Madison County Cancer Care Center, LLC<br>REPORT NUMBER(S) 2009-001 | **NRC Region III**<br>**2443 Warrenville Road, Suite 210**<br>**Lisle, Illinois 60532-4351** |

| 3. DOCKET NUMBER(S) | 4. LICENSE NUMBER(S) | 5. DATE(S) OF INSPECTION |
|---|---|---|
| 030-36525 | 13-32500-01 | April 2, 2009 |

| 6. INSPECTION PROCEDURES USED | 7. INSPECTION FOCUS AREAS |
|---|---|
| 87132 | 03.01 – 03.08 |

**SUPPLEMENTAL INSPECTION INFORMATION**

| 1. PROGRAM CODE(S) | 2. PRIORITY | 3. LICENSEE CONTACT | 4. TELEPHONE NUMBER |
|---|---|---|---|
| 02230 | 2 | James Currier, M.D., RSO | 765-622-7600 |

[X] Main Office Inspection — Next Inspection Date: April 2011

[ ] Field Office

[ ] Temporary Job Site Inspection

**PROGRAM SCOPE**

The licensee was a radiation oncology service which performed therapy using a High Dose Rate (HDR) remote afterloader system as described on the license. The system was used for approximately 10 mammosite therapies (ten fractions each) and 20 prostate therapies (two fractions each) annually. Occasional GYN therapies (three fractions) were performed, but none had been done since the previous inspection. The HDR program included one oncologist/authorized user and one physicist/dosimetrist.

## Performance Observations

No HDR procedures were performed the day of the inspection. Licensee personnel demonstrated daily HDR safety checks, treatment planning and survey meter QC, and described monthly checks and source exchange procedures, and the inspector noted no issues with the activities. The inspector reviewed written directives and identified no concerns. Interviews with licensee personnel indicated adequate knowledge of radiation safety concepts and procedures. The inspector performed independent and confirmatory radiation measurements which indicated results consistent with licensee survey records and postings.