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
Radiation Oncology Associates **7910 W. Jefferson Blvd., Suite 110** **Fort Wayne, IN 46804** REPORT NUMBER(S) **2010-001**	**U.S. Nuclear Regulatory Commission** **Region III** **2443 Warrenville Road** **Suite 210** **Lisle, Illinois 60532-4351**

3. DOCKET NUMBER(S)	4. LICENSEE NUMBER(S)	5. DATE(S) OF INSPECTION
030-36814	**13-32551-01**	**January 6 , 2010**

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	**S. J. Mulay**	S. J. Mulay	1/6/10

NRC FORM 591M PART 1 (10-2003)

JES

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

Docket File Information

U.S. NUCLEAR REGULATORY COMMISSION

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AND COMPLIANCE INSPECTION

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Radiation Oncology Associates REPORT NUMBER(S) 2010-001	**Region III** **2443 Warrenville Road, Suite 210** **Lisle, IL 60532**

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6. INSPECTION PROCEDURES USED	7. INSPECTION FOCUS AREAS
87132	03.01-03.07

SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM	2. PRIORITY	3. LICENSEE CONTACT	4. TELEPHONE NUMBER
2230	2	Carmen Kmety-Stevenson, Ph.D.	260-4364116

[X] Main Office Inspection — Next Inspection Date: January 2012

[ ] Field Office

[ ] Temporary Job Site Inspection

PROGRAM SCOPE

This active oncology program performs approximately 70 fractionated treatments per month utilizing a GammaMed HDR unit containing iridium-192 as boost from the licensee's on-site LINAC as authorized. Primary procedures involve breast and gynecological. Three authorized users, two physicists and two dosimitrists are involved with the program.

Performance Observations

A daily operations check was performed during the review and included: source retract upon attempted entry, source condition lights, operability of the CCTV and intercom, availability of emergency handling equipment, and source timer accuracy checks with no problems noted.

A random review of patient treatment files and contained procedure written directives to include treatment site and prescribed dose.

Independent measurements taken at the unit surface indicated 0.5 mr/hr. Readings at about three feet indicated 0.04mr/hr. Readings in adjacent areas with the source exposed did not indicate results above expected.

Emergency procedures were observed posted at the console. Overall security of the device and treatment room was adequately maintained and the unit was not readily accessible to members of the general public. The licensee exchanges dosimetry badges quarterly. Personal dosimetry results for the period 2008 and 2009 did not approach 10 CFR 20 limits.

The device manufacturer performed a source exchange on 10/15/09. A review of this documentation indicated that all required device and area surveys were performed.