

**SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION**

1. LICENSEE/LOCATION INSPECTED:  Evansville Cancer Center/Vantage Oncology 700 North Burkhardt Road Evansville, IN 47715  REPORT NUMBER(S)                      2010-001		2. NRC/REGIONAL OFFICE  U.S. Nuclear Regulatory Commission Region III 2443 Warrenville Road Suite 210 Lisle, Illinois 60532-4351	
3. DOCKET NUMBER(S) 030-30712	4. LICENSEE NUMBER(S) 13-25945-01	5. DATE(S) OF INSPECTION July / , 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:

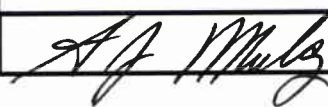
- ☒ 1. Based on the inspection findings, no violations were identified.
- ☐ 2. Previous violation(s) closed.
- ☐ 3. The violation(s), specifically described to you by the inspector as non-cited violations, are not being cited because they were self-identified, non-repetitive, and corrective action was 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		7/8/10



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AND COMPLIANCE INSPECTION

1. LICENSEE <b>Evansville Cancer Center/Vantage Oncology</b>		2. NRC/REGIONAL OFFICE <b>Region III 2443 Warrenville Road, Suite 210 Lisle, IL 60532</b>	
REPORT NUMBER(S) <b>2010-001</b>			
3. DOCKET NUMBER(S) <b>030-30712</b>	4. LICENSE NUMBER(S) <b>13-25945-01</b>	5. DATE(S) OF INSPECTION <b>July 1, 2010</b>	
6. INSPECTION PROCEDURES USED <b>87132</b>		7. INSPECTION FOCUS AREAS <b>03.01-03.07</b>	
<b>SUPPLEMENTAL INSPECTION INFORMATION</b>			
1. PROGRAM <b>2230</b>	2. PRIORITY <b>2</b>	3. LICENSEE CONTACT <b>Yinghui Zhang, Ph.D., RSO</b>	4. TELEPHONE NUMBER <b>812-474-1110</b>

<input checked="" type="checkbox"/> <b>Main Office Inspection</b>	<b>Next Inspection Date: July 2012</b>
<input type="checkbox"/> <b>Field Office</b>	
<input type="checkbox"/> <b>Temporary Job Site Inspection</b>	

## PROGRAM SCOPE

This active medical clinic performs approximately 15 fractionated treatments per month utilizing a GammaMed Plus High Dose Rate Afterloader (HDR) unit containing iridium-192 as authorized. Primary procedures involve prostate, breast and gynecological. Three authorized users, one physicist and one dosimetrist are involved with the program. Although authorized to perform radioiodine treatments at this location, the licensee refers the 10 CFR 35.300 procedures to St. Mary's Hospital, Evansville, IN. The licensee possesses one Sr-90 eye applicator that is stored in a locked safe in a storage cabinet, which has not been used since at least the last inspection.

## 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. Two patient treatments for prostate therapy were observed during the inspection which included a review of final written directive, treatment planning, patient administration and proper surveys of the patient and device at the conclusion of treatment. Both administrations were delivered without incident.

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. Personal dosimetry results for the period 2009 and YTD 2010 did not approach 10 CFR 20 limits.

The device manufacturer installed the current HDR in December 2009 in accordance with the licensee's letter dated December 30, 2009. A review of the installation documentation indicated that all required device and area surveys were performed with no issues noted.

*Jep*