



**Community**  
Health Network

**Community Hospital East**  
1500 North Ritter Avenue  
Indianapolis, Indiana 46219-3095  
317-355-1411 (tel)  
aCommunity.com

October 8, 2010

U.S. NRC Region III  
2443 Warrenville Road  
Suite 210  
Lisle, IL 60532-4352  
Attn: Darrel Wiedeman

Dear Mr. Wiedeman:

Per our conversation this morning concerning a possible medical event at Community Hospital East, we have notified the NRC Operations Center by telephone at 9:57 EDT.

This written report is to comply with 10 CFR 35.3045 (3)(d)(1).

**Licensee's Name:** Community Hospitals of Indiana, Inc.

**Prescribing Physician:** Jianan Graybill, M.D.

**Description of Event:** It was discovered after treating 8 fractions of a SAVI partial breast HDR brachytherapy that an error was made in the reconstruction of the catheters. This resulted in a small area receiving too much dose and a small area receiving too little dose. The physician was informed and fractions 9 and 10 were adjusted to compensate. Two additional fractions were given to compensate for the under dosed area. The result of all 12 fractions was determined to be within the criteria prescribed by the physician. The authorized user's written directive states that no more than 20cc of tissue should receive more than 200% of the prescribed dose, and only 19cc of tissue received more than 200%.

**Reason event occurred:** Treatment planning system default entry of catheter position not changed.

**Effect on individual:** Radiation Oncologist expects no adverse result to patient.

**Action taken to prevent recurrence:** Written procedure modified to add a check step in the planning process to verify that the catheters are reconstructed correctly.

**Individual notification:** The patient was notified of the error by the radiation oncologist and scheduled for the two additional treatments to correct the under dose.

As supporting documentation that even with the treatment planning error, the radiation dose was delivered in accordance with the written directive, a blank copy of the written directive form has been included with this letter. If you need more information, please contact me at (317) 355-5865 or Bill Howard at (317) 355-5347.

Sincerely,

A handwritten signature in cursive script, appearing to read "Andrea D. Browne".

Andrea D. Browne, Ph.D.  
Radiation Safety Officer



Radiation Oncology  
Community Hospital East  
Indianapolis, IN

Place Patient  
Sticker Here

SAVI  
Accelerated Partial  
Breast Irradiation  
HDR Brachytherapy Prescription

Written Directive				
Treatment Site	<input type="checkbox"/> Left Breast	<input type="checkbox"/> Right Breast	Isotope	Ir-192
Total HDR Dose (cGy)	3400	Dose per Fraction (cGy)	340	Number of Fractions
Prescription Point	1 cm from cavity			
Fractionation	Treat twice per day with 6 hrs minimum between fractions			
Comments	≤400 cGy/fx to dermal layer of skin ≤375 cGy/fx to ribs			
Signature (authorized user)			Date	

Applicator			
Device		Length x width (cm)	
<input type="checkbox"/>	6-1 Mini	5.0 x 2.4	
<input type="checkbox"/>	8-1	6.1 x 3.0	
<input type="checkbox"/>	8-1	6.7 x 4.0	
<input type="checkbox"/>	10-1	7.5 x 5.0	
Catheter 1 Reference Length	mm	Catheter 8 Reference Length	mm
Catheter 2 Reference Length	mm	Catheter 9 Reference Length	mm
Catheter 3 Reference Length	mm	Catheter 10 Reference Length	mm
Catheter 4 Reference Length	mm	Catheter 11 Reference Length	mm
Catheter 5 Reference Length	mm		
Catheter 6 Reference Length	mm	Distance from handle to skin	mm
Catheter 7 Reference Length	mm	Skin mark lines up with Catheter #	

Treatment Criteria and Planning Information		
	Criteria	Plan Data
Balloon to skin surface distance		mm
Maximum dose to dermal layer of skin	≤400 cGy/fx	cGy/fx
Maximum rib dose	≤375 cGy/fx	cGy/fx
Percent of PTV that is air or seroma	<10%	%
V150	≤50 cc	cc
V200	≤20 cc	cc