NRC FORM 591M P	ART 1		U.S. NU	CLEAR REGULATORY	OMMISSION			
10 CFR 2.201 SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION								
1. LICENSEE/LOÇATION	ON INSPECTED:	2. NRC/REGIONAL OFFICE						
West Michigan (Janear Contor	Decise III						
West Michigan Cancer Center 200 North Park Street			Region III					
Kalamazoo, MI			U. S. Nuclear Regulatory Commission 2443 Warrenville Road, Suite 210					
Raidillazoo, MT 49007			Lisle, IL 60532-4352					
REPORT NUMBER(S) 2014-001								
3. DOCKET NUMBER(S		4. LICENSE NUMBER	R(S)	5. DATE(S) OF INSPECTIO	N			
030-36539		21-32501-01		APRIL 22	. 2014			
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	Previous violation(s) closed.							
The violations(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, to exercise								
discretion, were satisfied. Non-cited violation(s) were discussed involving the following requirement(s):								
During this inspection, certain of your activities, as described below and/or attached, were in violation of NRC requirements and are being cited in accordance with NRC Enforcement Policy. This form is a NOTICE OF VIOLATION, which may be subject to posting in accordance with 10 CFR 19.11.								
(Violation	s and Corrective Actions)							
į								
Statement of Corrective Actions								
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	The large witten	SIGNATURE	and a speciment requirement	DATE			
LICENSEE'S REPRESENTATIVE								
NRC INSPECTOR	Ryan Craffey		DI Cola	<u></u>	4/22/14			
DDANCH CLUTT	Agron McCrow		4 July		(1)			
BRANCH CHIEF	Aaron McCraw			1/-	14129114			

NRC FORM 591M PART 1 (07-2012)

NRC FORM 591M PART 3				S. NUCLEAR REGULATORY COMMISSION				
(07-2012) 10 CFR 2.201 Docket File Information								
SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION								
1. LICENSEE/LOCATION INSPECT	fED:		2. NRC/REGIONAL OFFIC	2. NRC/REGIONAL OFFICE				
West Michigan Cancer C	lenter		Region III					
200 North Park Street	Cittoi		U. S. Nuclear Regulatory Commission					
Kalamazoo, MI 49007			2443 Warrenville Road, Suite 210					
The state of the s			Lisle, IL 60532					
REPORT NUMBER(S) 2014-	.001							
3. DOCKET NUMBER(S)		4. LICENSE NUMBER(S)	5. DATE(S) OF INSPECTION				
030-36539		21-32501-01		April 22, 2014				
6. INSPECTION PROCEDURES US	SED	7. INSPECTION FOCU	S AREAS					
87132		All						
	SUF	PPLEMENTAL INSPECT	ION INFORMATIO	N ,				
1. PROGRAM CODE(S)	2. PRIORITY	3. LICENSEE CONTAC		4. TELEPHONE NUMBER				
02230	2	Paul Jursinic, Ph	D - RSO	(269) 373-7408				
✓ Main Office Inspe	ction	Next Inspection	Date: Api	ril 2016				
V Wall Chico hispo		Next mopodior	Todie.	AND THE STATE OF T				
Field Office Inspe	ction							
Temporary Job Si	ita Inspection		1140 1140 1140 1140 1140 1140 1140 1140					
Temporary 500 Or	le mapeonon			January Maries and Mar				
		PROGRAM SO	COPE					
This was a routine inspe-	ction of a canc	er treatment center in Ka	lamzaoo, Michigan	, with authorization to conduct high				
dose rate (HDR) remote afterloading brachytherapy under 10 CFR 35.600, and to possess and use sealed sources for								
survey instrument calibration. At the time of the inspection, three authorized users, two medical physicists, and a staff								
of dosimetrists performe	d approximate	ly 3-4 gynecological trea	tments per week, w	vith five fractions per treatment.				
PERFORMANCE OBSI	DDUATIONS							
PERPURIVIANCE ODSI	2KVA11ON3							
The inspector observed t	the conduct of	daily snot checks of the I	IDR unit and assoc	ciated equipment as well as the first				
				ing medical physicist) verify that the				
				an. The inspector interviewed the				
•		-		nt checks, HDR source exchanges,				
and leak testing. The RSO demonstrated adequate knowledge of radiation protection principles and NRC requirements.								
The increator reviewed	e rapresantativ	e calcation of written dire	sativae alana with t	the respective treatment plans and				
The inspector reviewed a representative selection of written directives, along with the respective treatment plans and								
treatment records, and verified that the licensee's procedures provided high confidence that the patient's identity was verified before each treatment, and that each was conducted in accordance with the written directive. The inspector								
also reviewed a selection of licensee records for daily equipment checks, source exchanges including full equipment								
checks, dosimetry, training, and leak tests of the calibration sources.								
No violations of NRC requirements were identified as a result of this inspection.								