NRC FORM 591M PAR	RT 1			U.S. NUCLEA	AR REGULATORY COMMISSION
(4-2008) 10 CFR 2.201					
SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION					
1. LICENSEE/LOCATION INSPECTED: Anchorage Radiation Oncology 2841 Debarr Road Anchorage, Alaska REPORT NO.: 2019-002			2. NRC/REGIONAL OFFICE U.S. Nuclear Regulatory Commission Region IV, 1600 East Lamar Blvd Arlington, Texas 76011-4511		
3. DOCKET NUMBER		4. LICENSE NUMBER		5. DATE(S) OF INSPECTION
030-38646		50-35068-01			December 10, 2019
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: Image: the inspection findings, no violations were identified. Previous violation(s) closed. Image: the inspection findings, no violations were identified. Image: 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 to exercise discretion, were satisfied. Image: the violation(s) was/were discussed involving the following requirement(s) and Corrective Action(s): Image: the form is a NOTICE OF VIOLATION, which may be subject to posting in accordance with 10 CFR 19.11.					
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		/	γ		
NRC INSPECTOR	James L. Th	ompson	fur A	fn	12/10/2019 2/9/2020
BRANCH CHIEF	Patricial	1. Silla R	XAA	7	2/9/2020
NRC FORM 591M PART 1 Non-Public	Sensitive – Sec	curity-Related	[X Public	X Non-Sensitive