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NRC FORM 591 PART 1			U.S. NUCLEAR REG	ULATORY COMMISSION	
10 CFR 2.201	SAFETY INSPECTION				
				Page 1 of	
Regional Oncology Center of Williams Co. 524W. High street 43506		2. REGIONAL OFFICE REGION III U. S. NUCLEAR REGULATORY COMMISSION 801 WARRENVILLE ROAD LISLE IL 60532-4351			
3. DOCKET NUMBER(S) 030 - 33345	4. LICENSE NUMBER(5. DATE OF INSPECTION 5/19/97		
LICENSEE: The inspection was an examination of the act Regulatory Commission (NRC) rules and regulatory commission (NRC) rules and representative records, intervisellows:	lations and the condition	as of your license. The in	spection consisted of selective	examinations of	
1. Within the scope of this inspection, 2. The inspector also verified the steps questions on those actions at this ti 3. During this inspec. In certain of you NOTICE OF VICEARS which is re	s you have taken to corre me. ur activities, as described	of the violations identified below or attached, were	in violation of NRC requirement		
indicate the presence of a			was not properly 10 CFR 20.203 of sealed source	3(b),(c),(d),(e) or 34.42.	
performed at the proper frequ	iencies 10 CFR	or Liones		s were not	
C. Records of	10 0111	UI CICETIS			
			were not prope	erly maintained.	
D. Documents were not properly				1	
	Reports or notification of were not made in accordance with 10 CFR or License Condition Number				
F					
I hereby state that, within 30 days, the actions above. This statement of corrective actions is unless required by the NRC.	described by me to the made in accordance with	inspector will be taken to the requirements of 10	o correct the violations identified CFR 2.201. No further respons	d in the items checked se will be submitted	
SIGNATURE - LICENSEE 9707080010 970519 PDR ADDCK 03033345 C PDR	DATE	SIGNATURE NRC IN	SPECTOR	DATE \$ /19/4	

NRC FORM 591 Part 1 (7-91)