NRC FORM 591M	-4AN REQUI		U.S. NU	CLEAR REGULATORY COMMISSION					
(04-2022)	(04-2022)								
Materials Inspection Report									
1. Licensee/Locatio	on Inspected:		2. NRC/Regional Office						
Evansville Cancer Center/Vantage Oncology 700 N. Burkhardt Rd. Evansville, IN 47715			Region III U. S. Nuclear Regulatory Commission 2443 Warrenville Road, Suite 210 Lisle, IL 60532-4352						
Report Number(s) 3. Docket Number(s) 4. License N			umber(s) 5. Date(s) of Inspection						
		13-25945-		a/11/23					
			9/14/2>						
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. During this inspection, certain of your activities, as described below and/or attached, were in violation of NRC requirements, and were assessed at Severity Level IV, in accordance with the NRC Enforcement Policy.									
A. 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, corrective action was or is being taken, and the remaining criteria in the NRC Enforcement Policy were satisfied. (Non-cited violation(s) was/were discussed involving the following requirement(s)									
B. The following violation(s) is/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. (Violations and Corrective Actions)									
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		SIGNATURE	JRE AND DATE					
LICENSEE'S REPRESENTATIVE			0 1						
NRC INSPECTOR	Michelle R. Simmon	فر	Mchello Ju	~					
BRANCH CHIEF	Rhex A. Edwards		Digitally signed by Rhex A. Edwards Date: 2023.10.11 08:47:15 -05'00'						
Add Continuation Page Page 1 of 1									

NRC FORM 592M (10-04-2022)					U.S. N	UCLEAR REGULATORY COMMISSION			
Materials Inspection Record									
1. Licensee Name: 2. E			. Docket Number(s):			3. License Number(s)			
Evansville Cancer Center/Vanta	030-30712	030-30712		13-25	13-25945-01				
4. Report Number(s):			5. Date(s) of Inspection:	Į				
2023001				September 14, 2023					
6. Inspector(s):		7. Program Code(s): 8.		8. Priority:	9. Inspection Guidance Used:				
Michelle R. Simmons	02230			2	IP 87132				
10. Licensee Contact Name(s):	11. Licensee E	1. Licensee E-mail Address:			12. Licensee	Telephone Number(s):			
James Duce, M.S., RSO	James.Du	James.Duce@McKesso		m	502-554-)2-554-2215			
13. Inspection Type: Initial 14.	Locations Inspe	cted: Hybrid 15. Next Inspection Date			Date (MM/DD/Y	e (MM/DD/YYYY):			
			d Office	09/14	/2025	✓ Normal Extended			
Non-Routine Unannounced	Temporary Job	Site Rem	note	09/14/202 ote		Reduced No change			
16. Location(s) Inspected List: 700 N. Burkhardt Road, Evansville, IN 47715									
17. Scope and Observations: This was an announced routine inspection of an outpatient cancer treatment center authorized to use byproduct material in a high dose-rate remote afterloader brachytherapy (HDR) unit at its facility. There are 3 authorized users and four authorized medical physicists (AMP) authorized on the license. However, Dr. Taylor is primarily the physician working at this facility. The RSO is available at the facility twice a week. This facility only performs therapy for prostate cancer. The facility treats approximately 20 patients a month. Each patient receives two fractionated treatments a week. All patient files are electronic. The inspectors reviewed several written directives and treatment plans to verify that the treatments were performed in accordance with the written directives. The inspector observed the nurse and authorized medical physicists demonstrate the device security, device control, safety procedures, safety precautions, and daily spot checks. Spot checks are reviewed and signed by the AMP within 15 days. The RSO gives radiation safety training annually. The emergency procedures dry run is completed annually. The source is exchanged every four months.									
No violations identified. A clear	591 was lef	t in the field	Ι.						
Signature and Date - Branch Chief				• • •		hex A. Edwards :46:21 -05'00'			

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