NRC FORM 591M PART 1 (10-2003)			U.S. NUCLEAR REGULATORY COMMISSION		
10 CFR 2.201 SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION					
1. LICENSEE/LOCATION INSPECTED:			2. NRC/REGIONAL OFFICE		
Boise Heart Center/Treasure Valley Cardiology 520 South Eagle Road, Suite, 2205 Meridian, Idaho 83642			USNRC Region IV 611 Ryan Plaza Drive, Suite 400 Arlington, Texas 76011-4005		
REPORT NUMBER(S)	2005-01				
3. DOCKET NUMBER(S) 030-35356		4. LICENSEE NUMBER(S) 11-27662-01	5. DATE(S) OF IN	SPECTION 110/2005	
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: X					
cited. This form			d/or attached, were in violation of NRC requ posting in accordance with 10 CFR 19.11.	irements and are being	
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					
NRC INSPECTOR Rick Muñoz		Muñoz	/RA/	08/10/2005	