

### SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED: <b>Premier Diagnostic Imaging, LLC 135 McCallister Drive Terre Haute, IN 47802</b>	2. NRC/REGIONAL OFFICE <b>U.S. Nuclear Regulatory Commission Region III 2443 Warrenville Road Lisle, Illinois 60532-4351</b>
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REPORT 2006-001

3. DOCKET NUMBER(S) <b>030-36874</b>	4. LICENSEE NUMBER(S) <b>13-32556-01</b>	5. DATE(S) OF INSPECTION <i>January 10, 2006</i>
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**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. 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, NUREG-1600, to exercise discretion, were satisfied.

\_\_\_\_\_ Non-Cited Violation(s) was/were discussed involving the following requirement(s) and Corrective Action(s):

- 4. During this inspection certain of your activities, as described below and/or attached, were in violation of NRC requirements and are being cited. This form is a NOTICE OF VIOLATION, which may be subject to posting in accordance with 10 CFR 19.11.

(Violations and Corrective Actions)

**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	<b>S. J. Mulay</b>	<i>S. J. Mulay</i>	<i>1/10/06</i>

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**Docket File Information**  
**SAFETY INSPECTION REPORT  
AND COMPLIANCE INSPECTION**

1. LICENSEE <b>Premier Diagnostic Imaging, LLC</b>		2. NRC/REGIONAL OFFICE <b>Region III 2443 Warrenville Road Lisle, IL 60532</b>	
REPORT                    2006-001			
3. DOCKET NUMBER(S) <b>030-36874</b>	4. LICENSE NUMBER(S) <b>13-32556-01</b>	5. DATE(S) OF INSPECTION <b>January 10, 2006</b>	
6. INSPECTION PROCEDURES USED <b>87131</b>	7. INSPECTION FOCUS AREAS <b>03.01-03.07</b>		
<b>SUPPLEMENTAL INSPECTION INFORMATION</b>			
1. PROGRAM <b>2200</b>	2. PRIORITY <b>G3</b>	3. LICENSEE CONTACT <b>J. Konijeti, MD, RSO</b>	4. TELEPHONE NUMBER <b>812-478-3900</b>
<input checked="" type="checkbox"/> Main Office Inspection		Next Inspection Date: <b>January 2009</b>	
<input type="checkbox"/> Field			
<input type="checkbox"/> Temporary Job Site			

**PROGRAM SCOPE**

This active clinic performs approximately 20 diagnostic procedures monthly, primarily bone and HIDA imaging. One full-time technologist currently performs all patient procedures. Generators are not received and all material is obtained from an area nuclear pharmacy in the form of unit doses. An outside consultant performs semi-annual program audits which appears to adequately maintain program compliance. The licensee is operational Monday-Friday, 8:00am-4:30pm or as determined by number of patients. Iodine-131 treatments are authorized, however, that modality has not as yet been performed. The licensee began licensed activities in June 2005.

**Performance Observations**

Interviews conducted with the technologist revealed an adequate level of understanding of emergency and material handling procedures and techniques. Dose calibrator constancy checks, daily surveys, waste handling and disposal and injection technique were successfully demonstrated or observed.

Licensed material was observed adequately secured during the review and was not readily accessible to members of the general public. According to the technologist, the hot-lab/imaging area is locked when not under direct surveillance. Additionally, the overall building is electronically alarmed after hours.

Independent measurements taken indicated a maximum reading of 0.7 mr/hr in the hot-lab area and essentially background (0.02mr/hr) in the imaging and unrestricted areas. It should be noted that a Co-57 flood source is stored against a wall adjacent to a patient dressing area. Readings at the surface of the dressing room wall revealed 0.2 mr/hr. The licensee agreed to place lead aprons over both sides of the flood source to minimize exposure in the hot-lab as well as to the patient dressing area.

Personal dosimetry records reviewed indicated whole-body and extremity readings for 2005 of 58 mRem and 30 mRem respectively.