NRC FORM 591M PART 1 (10-2003) 10 CFR 2.201			U.S. NUCLEAR REGULATORY COMMISSION			
SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION						
1. LICENSEE/LOCATION INSPECTED:			2. NRC/REGIONAL OFFICE			
medical ferous	es broug	>	U.S. Nuclear Regulatory Commission			
Medical Jesoures thoup St. Clain Shores, Michigan			Region III 2443 Warrenville Road			
			Suite 210 Lisle, Illinois 60532-4351			
3. DOCKET NUMBER(S)	1008-001	4. LICENSEE NUM		5. DATE(S) OF INS	PECTION	
030-36056		4. LICENSEE NOW	• •	June 4, 200		
LICENSEE:		ar 32907-0		June 7, 200	8	
 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 cited. This form is a NO (Violations and Corr :	TICE OF VIOLAT	activities, as described bøl FION, which may be subjec	ow and/or attached, were in	n violation of NRC requirem with 10 CFR 19.11.	nents and are being	
	Liconco	o's Statement of Corres	tive Actions for Item 4		100	
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 De	eborah A. Pisl	kura	Debarel	Nortene	6/4/08	

NRC FORM 591M PART 1 (10-2003)

NRC FORM 591M PART 3 (10-2003) 10 CFR 2.201	Docket File	Information	U.S. NUCLEAR REGULATORY COMMISSION			
SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION						
1. LICENSEE Medical Resources Group, REPORT 2008-001 NUMBER(S)		2. NRC/REGIONAL OF Region III 2443 Warreny Lisle, IL 605	/ille Road, Suite 210			
3. DOCKET NUMBER(S) 030-36056	4. LICENSE NUMBER(S) 21-32409-01	·	5. DATE(S) OF INSPECTION June 4, 2008			
6. INSPECTION PROCEDURES USED 7. INSPECTION FOCUS AREAS 87130 03.01 - 03.08						
	SUPPLEMENTAL INSP	ECTION INFORMA	TION			
1. PROGRAM CODE(S) 2. PRIORITY 02201 5	3. LICE Stanley Halprin, I	NSEE CONTACT D.O., RSO	4. TELEPHONE NUMBER 586-447-5513			
Field Office						
PROGRAM SCOPE						
 studies (majority of studies were doses from a licensed radiophation on a quarterly basis. This inspection consisted of internet nuclear medicine department, a security of byproduct material, 	es each month. The li re cardiac, bone, and s armacy. The licensee erviews with licensee and independent mea use of personnel mon nspector observed lice	censee performe gall bladder imag 's consultant aud personnel, a rev surements. The itoring, dose call ensee personnel	ed a full spectrum of diagnostic ging). The licensee received unit dited the radiation safety program view of select records, tour of the inspection included observations of ibrator QA checks, and area and I prepare, assay, and administer			