

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED:

Dickinson County Memorial Hospital
Iron Mountain, MI

REPORT NUMBER(S) 2008-002

2. NRC/REGIONAL OFFICE

U.S. Nuclear Regulatory Commission
Region III
2443 Warrenville Road
Suite 210
Lisle, Illinois 60532-4351

3. DOCKET NUMBER(S)

030-17318

4. LICENSEE NUMBER(S)

21-18885-01

5. DATE(S) OF INSPECTION

6/2/08

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:

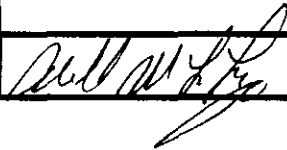
- ☒ 1. Based on the inspection findings, no violations were identified.
- ☒ 2. Previous violation(s) closed.
- ☐ 3. The violation(s), specifically described to you by the inspector as non-cited violations, are not being cited because they were self-identified, non-repetitive, and corrective action was 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	Michael M LaFrance		6/2/08

**SAFETY INSPECTION REPORT
AND COMPLIANCE INSPECTION**

1. LICENSEE Dickinson County Memorial Hospital REPORT NUMBER(S) 2008-002		2. NRC/REGIONAL OFFICE Region III 2443 Warrenville Road, Suite 210 Lisle, IL 60532	
3. DOCKET NUMBER(S) 030-17318	4. LICENSE NUMBER(S) 21-18889-01	5. DATE(S) OF INSPECTION 6/2/08	
6. INSPECTION PROCEDURES USED 87131	7. INSPECTION FOCUS AREAS 3.01		

SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM CODE(S) 3121	2. PRIORITY 3	3. LICENSEE CONTACT Dr. John To - RSO	4. TELEPHONE NUMBER 906-225-3777
----------------------------	------------------	--	-------------------------------------

<input checked="" type="checkbox"/> Main Office Inspection	Next Inspection Date: October 2010
<input type="checkbox"/> Field Office	
<input type="checkbox"/> Temporary Job Site Inspection	

PROGRAM SCOPE

This inspection was to follow up on corrective actions associated with a security violation identified on January 25, 2008. The corrective actions described by the licensee are documented in Report No. 030-17318/2008-001(DNMS) (EA-08-048).

Observations and Findings

The inspector noted that all corrective actions as documented in the above report were implemented and no additional security violations were identified. This document closes out the security inspection finding identified in January 2008. The next routine inspection date was based on the last routine safety inspection conducted in October 2007.