NRC FORM 591M PART 1 (10-2003)		U.S. NUCLEAR REGULATORY COMMISSION		
10 CFR 2.201 SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION				
I. LICENSEE/LOCATION INSPECTED: The Heart Physicians 80 Mill River Street Stamford, Connecticut 06902 REPORT Nos 2008001		2. NRC/REGIONAL OFFICE U.S. Nuclear Regulatory Commission Region I, 475 Allendale Road King of Prussia, Pennsylvania 19406-1415		
3. DOCKET NUMBER(S) 03035382	4. LICENSE NUMBER( 06-30571-01	S)	5. DATE(S) OF INSPECT	ION
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: <ul> <li>Based on the inspection findings, no violations were identified.</li> <li>Previous violation(s) closed.</li> <li>The violation(s), specifically described to you by the inspector as nor-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.</li> <li>Non-Cited Violation(s) was/were discussed involving the following requirement(s) and Corrective Action(s):</li> </ul> <ul> <li>A. 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.</li> </ul>				
Licensee's I hereby state that, within 30 days, the actions of corrective actions is made in accordance with the date when full compliance will be achieved). I u	described by me to the insp he requirements of 10 CFR	2.201 (corrective steps alrea	the violations identified. Th ady taken, corrective steps v	which will be taken,
Title Pri	inted Name	Sig	gnature	Date
LICENSEE'S REPRESENTATIVE	CANDS_SN	~ hag a	200	0/8/20
NRC INSPECTOR Thomas K. Thom	pson	Thomas k.	Thomas	8/6/2008
NRC FORM 591M PART 1 (Rev. by RI 07/06)		C::(DNMS\Reference\Bla	nk Forms Word\Blank 591N	A-Part1 (2).doc

SUNSI Review Completed By: /RA/

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X Public

X Non-Sensitive