

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED: <i>Thoracic + Cardiovascular Institute 405 West Greenlawn - Suite 220 Lansing, MI 48910</i>		2. NRC/REGIONAL OFFICE REGION III US NUCLEAR REGULATORY COMMISSION 2443 WARRENVILLE ROAD LISLE IL 60532	
REPORT NUMBER(S) <i>2009-001</i>			
3. DOCKET NUMBER(S) <i>030-18237</i>	4. LICENSE NUMBER(S) <i>21-20313-01</i>	5. DATE(S) OF INSPECTION <i>May 11, 2009</i>	

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.

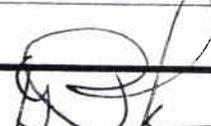
_____ non-cited violation(s) were discussed involving the following requirement(s):

- 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)

Statement of Corrective Actions

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			
NRC INSPECTOR	<i>G. Parker</i>		<i>5/11/09</i>

Docket File Information
SAFETY INSPECTION REPORT
AND COMPLIANCE INSPECTION

1. LICENSEE Thoracic & Cardiovascular Institute		2. NRC/REGIONAL OFFICE Region III 2443 Warrenville Road Lisle, IL 60532	
REPORT NUMBER(S) 2009-001			
3. DOCKET NUMBER(S) 030-18237	4. LICENSE NUMBER(S) 21-20313-01	5. DATE(S) OF INSPECTION 5/11/09	
6. INSPECTION PROCEDURES USED 87130	7. INSPECTION FOCUS AREAS 03.01-03.07		
SUPPLEMENTAL INSPECTION INFORMATION			
1. PROGRAM CODE(S) 2201	2. PRIORITY 5	3. LICENSEE CONTACT Daryl Melvin	4. TELEPHONE NUMBER 517/483-7551
<input checked="" type="checkbox"/> Main Office Inspection		Next Inspection Date: <u>5/2014</u>	
<input type="checkbox"/> Field Office _____			
<input type="checkbox"/> Temporary Job Site _____			

PROGRAM SCOPE

Licensee is a large private practice clinic located adjacent to a local hospital in Lansing, Michigan. Licensee has a very large nuclear medicine program conducting routine imaging and diagnostic procedures. The licensee has seven techs who performs approximately forty procedures per day. This facility receives its radiopharmaceuticals in the form of unit doses from Capitol Pharmacy.

Performance Observations

The inspector toured the facilities and interviewed authorized users/staff members. Each appeared knowledgeable in radiation safety and radiopharmaceutical handling techniques. Package receipt procedures were demonstrated for the inspector as well as rad waste handling practices. Independent surveys by the inspector did not detect any abnormal reading and were within the expected range. The inspector observed a number of injects by the staff. Proper technique was used by all.

KEL