

**SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION**

|                                                                                                                                               |                                                                                                                         |                                                  |
|-----------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------|
| 1. LICENSEE/LOCATION INSPECTED:<br><i>Visconti Imaging &amp; Vein Institute</i><br><i>1114 Charlevoix Avenue</i><br><i>Petoskey, MI 49770</i> | 2. NRC/REGIONAL OFFICE<br><br>REGION III<br>US NUCLEAR REGULATORY COMMISSION<br>2443 WARRENVILLE ROAD<br>LISLE IL 60532 |                                                  |
| REPORT NUMBER(S) <i>2009 00 1</i>                                                                                                             |                                                                                                                         |                                                  |
| 3. DOCKET NUMBER(S)<br><i>03037756</i>                                                                                                        | 4. LICENSE NUMBER(S)<br><i>21-32695-01</i>                                                                              | 5. DATE(S) OF INSPECTION<br><i>June 10, 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>[Signature]</i> | <i>6/10/09</i> |

*[Handwritten mark]*

(10-2003)  
10 CFR 2.201

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

|                                                                                                 |                                                 |                                                                                                       |  |
|-------------------------------------------------------------------------------------------------|-------------------------------------------------|-------------------------------------------------------------------------------------------------------|--|
| 1. LICENSEE<br><b>Visconti Imaging &amp; Vein Institute</b><br>REPORT NUMBER(S) <b>2009-001</b> |                                                 | 2. NRC/REGIONAL OFFICE<br><b>Region III</b><br><b>2443 Warrenville Road</b><br><b>Lisle, IL 60532</b> |  |
| 3. DOCKET NUMBER(S)<br><b>030-37756</b>                                                         | 4. LICENSE NUMBER(S)<br><b>21-32695-01</b>      | 5. DATE(S) OF INSPECTION<br><b>6/10/09</b>                                                            |  |
| 6. INSPECTION PROCEDURES USED<br><b>87130</b>                                                   | 7. INSPECTION FOCUS AREAS<br><b>03.01-03.07</b> |                                                                                                       |  |

**SUPPLEMENTAL INSPECTION INFORMATION**

|                                   |                         |                                                 |                                            |
|-----------------------------------|-------------------------|-------------------------------------------------|--------------------------------------------|
| 1. PROGRAM CODE(S)<br><b>2201</b> | 2. PRIORITY<br><b>5</b> | 3. LICENSEE CONTACT<br><b>Michelle Kritzman</b> | 4. TELEPHONE NUMBER<br><b>734/662-3197</b> |
|-----------------------------------|-------------------------|-------------------------------------------------|--------------------------------------------|

Main Office Inspection      Next Inspection Date: 6/10/2014

Field Office \_\_\_\_\_

Temporary Job Site \_\_\_\_\_

**PROGRAM SCOPE**

Licensee is a small cardiology clinic located in Petoskey, Michigan. Licensee has a medium sized nuclear medicine program conducting routine imaging and diagnostic procedures. The licensee has one tech who perform approximately 5 procedures per day. This clinic receives its radiopharmaceuticals in the form of unit doses from Cardinal Health. This licensee performs cardiac stress studies and no other work using licensed materials.

**Performance Observations**

The inspector toured the facilities and interviewed authorized users and staff members encountered. Each appeared knowledgeable in radiation safety and isotope handling techniques. Licensee personnel demonstrated package receipt procedures for the inspector. Staff members also demonstrated proper rad waste handling practices. Independent surveys by the inspector did not detect any abnormal reading and were within the expected range.

The inspector observed members of the nuclear medicine staff perform injections of radiopharmaceuticals. Techniques employed by the staff demonstrated good handling practices as well as adequate knowledge of radiation safety. During the course of the inspection, no abnormalities were noted.

*xcp*