NRC FORM 591M PAI (4-2010)	RT 1		U.S. NU	NRC FORM 591M PART 1 U.S. NUCLEAR REGULATORY COMMISSION					
10 CFR 2.201	SAFETY INSPECTION	REPORT	AND COMPLIANCE INS	SPECTION					
1. LICENSEE/LOCATION			2. NRC/REGIONAL OFFICE						
St. Anthony Memorial Health Centers			REGION III						
301 West Homer St., Michigan City, IN			US NUCLEAR REGULATORY COMMISSION 2443 WARRENVILLE ROAD STE 210						
REPORT NUMBER(S) 2010-001			LISLE IL 60532-4352						
3. DOCKET NUMBER(S)		4. LICENSE NUMBER(S)		5. DATE(S) OF INSPECTION					
03009928		13-13144-02		4/7 through 5/5/10					
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 violations(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.  1									
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	Robert G. Gattone, Jr.		Role of D. Hatter, In		5/10/10				
NRC INSPECTOR Robert G. Gattone, Jr.  Robert G. Gattone, Jr.  Robert G. Gattone, Jr.  S/10/10  12 Slave									