

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED:

Great Falls Clinic  
3000 15<sup>th</sup> Avenue South  
Great Falls, Montana 59405

REPORT NO: 2010-001

2. NRC/REGIONAL OFFICE

U.S. Nuclear Regulatory Commission  
Region IV, 612 East Lamar Blvd, Suite 400  
Arlington, Texas 76011-4125

3. DOCKET NUMBER

030-35944

4. LICENSE NUMBER

25-27721-01

5. DATE OF INSPECTION

June 16 - July 19, 2010

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 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.

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

Lawrence Donovan

*Lawrence Donovan*

7 / 20 / 2010

TRANSMISSION VERIFICATION REPORT

TIME : 07/20/2010 07:39  
NAME : USNRC RIV  
FAX : 8178608263  
TEL :  
SER.# : BROL2J847623

DATE, TIME  
FAX NO./NAME  
DURATION  
PAGE(S)

07/20 07:39  
714067713021  
00:00:26  
02  
COVERPAGE  
OK  
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ECM

RESULT  
MODE



UNITED STATES  
NUCLEAR REGULATORY COMMISSION  
REGION IV  
612 EAST LAMAR BLVD, SUITE 400  
ARLINGTON, TEXAS 76011-4125

# DIVISION OF NUCLEAR MATERIALS SAFETY

DATE / TIME:

7/20/10

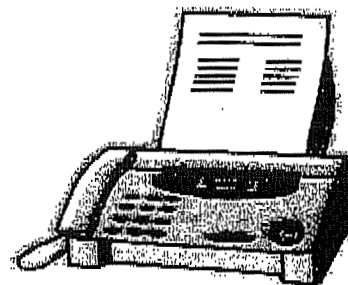
PRIORITY:

IMMEDIATELY

1-HOUR

2-4 HOUR

☒  
☐  
☐



MESSAGE TO:

PAT HERMANSON, CEO

MESSAGE FROM:

Larry DONOVAN, NRC

NUMBER OF PAGES

1 PLUS TRANSMITTAL SHEET

TELECOPY NUMBER:

406 771-3021

VERIFICATION NUMBER:

CONTACT:

## SPECIAL INSTRUCTIONS / ATTACHMENTS:

CLEAR INSPECTION. NO NEED TO SIGN. POST  
AS Required PURSUANT TO 10 CFR 19.11