Decket File Information	U.S. NUCLEAR REGULATORY
	COMMISSION
AND COMPLIANCE INSPECTION	
2. NRC/REGIONAL OFFIC	CE
	le Road, Suite 210 2
4. LICENSE NUMBER(S) 21-03429-04	5. DATE(S) OF INSPECTION 6/24/10 through 8/2/2010
7. INSPECTION FOCUS AREAS 03.01-03.07	
SUPPLEMENTAL INSPECTION INFORMATION	
3. LICENSEE CONTACT Dr. David Petrella	4. TELEPHONE NUMBER 989-773-2081
X Main Office Inspection Next Inspection Date: 6/2013	
Field Office Temporary Job Site	
Inspection	
PROGRAM SCOPE The licensee is authorized to perform diagnostic and limited therapy activities permitted by 10 CFR 35.100, 35.200 and 35.300. The licensee has one full time nuclear medicine technician, one part time nuclear medicine technician, four authorized users which includes the radiation safety officer. The licensee uses unit doses but no bulk doses or the possession of moly-tech generators. The licensee was authorized for activities permitted by 10 CFR 35.300 and performs 3-4 treatments per year, each under 33 millicuries each. Observations and Findings The licensee demonstrated to the inspector the safe use and storage of licensed material; The licensee's radiation safety quipment was available and the radiation safety grapman adequately. The inspector interviewed licensee staff and determined that they were aware of radiation safety practices and were implementing the radiation safety program adequately. The inspector reviewed clocuments which include: dosimetry records, radiation safety committee meeting minutes, dose administration records, dose calibrator records and radiological surveys; no abnormal issues were identified. The inspector predict documents which include: dosimetry records and radiological surveys and did not identify an abnormal radiation or contamination levels. The Radiation Safety Officer was unavailable through 8/2/10. The inspection was completed after NRC interviewed the Radiation Safety Officer telephonically on 8/2/10.	
	2. NRC/REGIONAL OFFIC Region III 2443 Warrenvil Lisle, IL 60532 4. LICENSE NUMBER(S) 21-03429-04 7. INSPECTION FOCUS AREAS 03.01-03.07 SUPPLEMENTAL INSPECTION INFORMATI 3. LICENSEE CONTACT Dr. David Petrella on Next Inspection PROGRAM SCOPE form diagnostic and limited therapy act has one full time nuclear medicine tech hastint the possession of moly-tech generators

NRC FORM 591M PART 1 U.S. NUCLEAR REGULATORY COMMISSION (10-2003) 10 CFR 2.201 SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION LICENSEE/LOCATION INSPECTED: 2. NRC/REGIONAL OFFICE Gratiot Medical Center Alma, Michigan **U.S. Nuclear Regulatory Commission** Region III 2443 Warrenville Road Suite 210 2010-001 **REPORT NUMBER(S)** Lisle, Illinois 60532-4351 4. LICENSEE NUMBER(S) 5. DATE(S) OF INSPECTION DOCKET NUMBER(S) 21-03429-04 6/24/10 through 8/2/2010 030-13998 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: Х 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 selfidentified, 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) 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. (Violations and Corrective Actions) 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 8/2/2010 NRC INSPECTOR Michael LaFranzo NRC FORM 591M PART 1 (10-2003)