

**SAFETY INSPECTION REPORT
AND COMPLIANCE INSPECTION**

1. LICENSEE Mid-Michigan MRI, PET-CT		2. NRC/REGIONAL OFFICE Region III 2443 Warrenville Road, Suite 210 Lisle, IL 60532	
REPORT NUMBER(S) 2010-001			
3. DOCKET NUMBER(S) 030-38155	4. LICENSE NUMBER(S) 21-32767-01	5. DATE(S) OF INSPECTION September 17, 2010	
6. INSPECTION PROCEDURES USED 87130		7. INSPECTION FOCUS AREAS 03.01-03.07	

SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM CODE(S) 2121	2. PRIORITY G5	3. LICENSEE CONTACT Ashley Wezensky, Team Advisor	4. TELEPHONE NUMBER 517-364-2335
<input checked="" type="checkbox"/> Main Office Inspection		Next Inspection Date: September 2015	
<input type="checkbox"/> Field Office		_____	
<input type="checkbox"/> Temporary Job Site Inspection		_____	

PROGRAM SCOPE

This active facility is located within the Sparrow Hospital, Lansing, MI campus and performs about seven PET/CT imaging studies daily utilizing fluorine-18 (FDG) used in the diagnosis of active patient tumors and metastasis. Unit doses are received from an area nuclear pharmacy. The facility is staffed by nuclear medicine technologists on rotation from Sparrow Hospital. The licensee is operational Monday-Friday from 7:00 am-5:00pm.

Performance Observations

Interviews conducted with available staff revealed an adequate level of understanding of emergency and material handling procedures and techniques. Package surveys and wipes, dose calibrator constancy checks, area surveys and injection techniques were demonstrated and/or observed with no regulatory issues identified. Compliance audits are performed at least quarterly by a consultant (also the RSO) who appears to adequately oversee program activities.

Licensed material was observed well secured and/or under surveillance in the hot-lab area and was not readily accessible to members of the general public. Independent measurements taken in restricted and unrestricted areas of the hot-lab, imaging and injection areas did not indicate readings above expected. Side-by-side readings with the licensee's survey instrument revealed comparable results. YTD 2010 whole body and extremity dosimetry results did not approach 10 CFR Pt 20 limits. The inspector physically verified the licensee's sealed source inventory with no issues identified.

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED: <i>MID - MICHIGAN MRI PET-CT 1215 EAST MICHIGAN SUITE 101 LANSING, MI 48912</i>		2. NRC/REGIONAL OFFICE U.S. Nuclear Regulatory Commission Region III 2443 Warrenville Road Suite 210 Lisle, Illinois 60532-4351	
3. DOCKET NUMBER(S) <i>030-38155</i>	4. LICENSEE NUMBER(S) <i>21-32767-01</i>	5. DATE(S) OF INSPECTION <i>SEPTEMBER 17, 2010</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) 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			
NRC INSPECTOR	<i>S. J. MURRAY</i>	<i>[Signature]</i>	<i>9/17/10</i>

[Handwritten initials]