NRC FORM 591M PART 1 (4-2008) 10 (CEP 2 201		U.	S. NUCLEAR REGULATORY COMMISSION
10 CFR 2.201 SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION			
1. LICENSEE/LOCATION INSPECTED: Idaho Equine Hospital, PA 16080 Equine Drive Nampa, Idaho 83687 Location: 16080 Equine Dr. Nampa, ID REPORT NO: 2011-001		 NRC/REGIONAL OFFICE U.S. Nuclear Regulatory Commission Region IV, 612 East Lamar Blvd, Suite 400 Arlington, Texas 76011-4125 	
3. DOCKET NUMBER		LT	
3. DOCKET NUMBER 030-35698	4. LICENSE NUMBER 11-27700-01		5. DATE OF INSPECTION April 26, 2011
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: X 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 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 de corrective actions is made in accordance with the date when full compliance will be achieved). I unc	requirements of 10 CFR	2.201 (corrective steps alread ritten response to NRC will be	dy taken, corrective steps which will be taken, required, unless specifically requested.
Title Printed Name		Signature	Date
REPRESENTATIVE NRC INSPECTOR R. Rick Muñoz	:	f. find M ning	04/26/2011
NRC FORM 591M PART 1 (Rev. by RIV 3/09)			
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