NRC FORM 591M PART (06-2010)	·1			U.S NUCLEAR RE	GULATORY COMMISSION
10 CFR 2.201					
SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION					
1. LICENSEE/LOCATION INSPECTED:			2. NRC/REGIONAL OFFICE		
VHS Harper-Hutzel Hospital, Inc. 3990 John R. Street			U.S. Nuclear Regulatory Commission, Region III 2443 Warrenville Road, Suite 210		
Detroit, MI 48201			Lisle, Illinois 60532		
REPORT NUMBER(S): 11-02					
3. DOCKET NUMBER(S) 030-02045		4. LICENSEE NUMBER(21-04127-02	S)	5. DATE(S) OF INS August 18, 2	
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.					
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) were discussed involving the following requirement(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					
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	ı	Printed Name	Sign	ature	Date
LICENSEE'S REPRESENTATIVE					
NRC INSPECTOR	Lester Tripp		IJ W.	_ for	09/13/2011
Branch Chief	Tamara E. Bloor	mer	Jana	Donn	09/13/2011 9/14/11