NRC FORM 591M PART 1 (07-2012)* 10 CFR 2.201 - SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION					
LICENSEE/LOCATION INSPECTS Howard University Hospital 2041 Georgia Ave, NW Washington, DC 20060 REPORT NUMBER 2017-	2. NRC/REGIONAL OFFICE U.S. Nuclear Regulatory Commission Region I, 2100 Renaissance Blvd, Suite 100 King of Prussia, Pennsylvania 19406-2713				
REPORT NUMBER 2017-001 3. DOCKET NUMBER 4. LICENSE NUMBI		L	T ₅	. DATES OF INSPECTIO	N.
030-01321		08-03075-07		June 26-27, 2017	
LICENSEE:	00 00010 01				
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					
Non-cited violation(s) 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 in accordance with the NRC Enforcement Policy. This form is a NOTICE OF VIOLATION, which may be subject to posting in accordance with 10 CFR 19.11. (Violations and Corrective Actions)					
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	Printed Name		s	ignature	Date
LICENSEE'S REPRESENTATIVE					
NRC INSPECTOR	Shawn W. Seeley				7-24-17
BRANCH CHIEF	James P. Dwyer				7/25/17
*NRC FORM 591M PART 1 (07-2012) (RI Rev. 09/12/2013) G:\WordDocs\Current\Insp Record\R08-03075-07.2017001.591M-Parts 1 and 2.doc					
SUNSI Review Completed By:	SSeeley SUS			X Public X	Non-Sensitive