NRC FORM 591M P		U.S. NUCLEAR REGULATORY COMMISSION							
10 CFR 2.201 SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION									
1. LICENSEE/LOCATION INSPECTED: 2. NRC/REGIONAL OFFICE									
Diagnostic Health Center of Anchorage, LLC			2	2. MICHEGIONAL OFFICE					
A wholly owned subsidiary of Alliance HealthCare				U.S. Nuclear Regulatory Commission					
Services				Region IV, 1600 East Lamar Blvd					
4100 Lake Otis Parkway, Suite 102, Anchorage, AK				Arlington, Texas 76011-4511					
REPORT NO.: 2018-001									
3. DOCKET NUMBE						5. DATE(S	5. DATE(S) OF INSPECTION		
03	030-20372 50			214-01		October 25, 2018			
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:									
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.									
License Condition 15.A of NRC Materials License 50-23214-01, Amendment No. 23, dated September 19, 2016,									
requires, in part, that the licensee conduct its program in accordance with the statements, representations, and procedures contained in the documents, including any enclosures, contained in the application dated October 20, 2014.									
The application dated October 20, 2014, requires, in part, that the licensee conducts weekly wipes in select locations where licensed material is used and stored.									
Contrary to the above, from March 17, 2017, through October 12, 2018, the licensee failed to conduct weekly wipes in									
select locations where licensed material is used and stored. Specifically, on at least 30 occasions between the above dates, the licensee failed to conduct wipes of use and storage locations, and licensed material was used, including weeks when therapeutic quantities of I-131 were used.									
weeks when the apeutic qualitities of 1-131 were used.									
To correct the above non-compliance, the licensee RSO reviewed the requirements with the on-site CNMT, committed to future reviews via a third-party consultants, and editing the information system NMIS to change the way the automated reminder is generated to eliminate an identified loophole in the current system.									
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 Na			Signatu				Date	
LICENSEE'S REPRESENTATIVE	Kay Kassel, M.S., 0	JNM1, RSU	kkasse com	DN		ed by usa.com el@ahcsusa.com L12 08:56:44 -05'00'	11/1	2/18	
NRC INSPECTOR J. vonEhr				live (WEN 11/09/2018				
BRANCH CHIEF	James Tho	mpson		Jour	1/2		16	/16/2018	
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