NRC FORM 591M PART 1 U.S. NUCLEAR REGULATORY COMMISSION (07-2012) 10 CFR 2.201 SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION						
1. LICENSEE/LOCATIO	ON INSPECTED:		2. I	NRC/REGIONAL OFFICE		
NorthStar Medica 1800 Gateway Bo Beloit, WI 5351 Location inspecte REPORT NUMBER(S	IN	Region III U. S. Nuclear Regulato 2443 Warrenville Road Lisle, IL 60532-4352		•		
3. DOCKET NUMBER(S)		4. LICENSE NUMBER(S)			5. DATE(S) OF INSPECT	ION
150-00048		GL per 150.20(a) / WI-025-2038-02		/ WI-025-2038-02	January 24, 2022 Exit January 31, 2	2022
LICENSE: 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:						tions of Ilows: re self-identified, ercise and are being
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			SIGNATURE		DATE
LICENSEE'S REPRESENTATIVE						
NRC INSPECTOR	Ryan Craffey					
BRANCH CHIEF	Michael Kunowski					