

(10-2003)  
10 CFR 2.201

## SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

|   |                                      |   |  |
|---|--------------------------------------|---|--|
| 1. LICENSEE/LOCATION INSPECTED:<br>Progressive Medical Imaging<br>830 North Theatre Drive<br>Marion, Indiana 46952<br><br>REPORT 2006-001 |                                      | 2. NRC/REGIONAL OFFICE<br><br>REGION III<br>US NUCLEAR REGULATORY COMMISSION<br>2443 WARRENVILLE ROAD, SUITE 210<br>LISLE, ILLINOIS 60532 |  |
| 3. DOCKET NUMBER(S)<br>030-35907  | 4. LICENSEE NUMBER(S)<br>13-32352-01 | 5. DATE(S) OF INSPECTION<br>February 3, 2006  |  |

## 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.
- ☐ 3. 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) was/were discussed involving the following requirement(s) and Corrective Action(s):

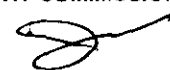
- ☐ 4. During this inspection certain of your activities, as described below and/or attached, were in violation of NRC requirements and are being cited. This form is a NOTICE OF VIOLATION, which may be subject to posting in accordance with 10 CFR 19.11.

(Violations and Corrective Actions)

## 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 Name       | Signature  | Date   |
|---------------------------|--------------------|--|--------|
| LICENSEE'S REPRESENTATIVE |                    |  |        |
| NRC INSPECTOR             | Geoffrey M. Warren |  | 2/3/06 |

**Docket File Information  
SAFETY INSPECTION REPORT  
AND COMPLIANCE INSPECTION**

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|--|--|--|--|
| 1. LICENSEE<br><b>Progressive Medical Imaging</b><br>REPORT NUMBER(S) 2006-001 |  | 2. NRC/REGIONAL OFFICE<br><b>Region III</b>  |  |
| 3. DOCKET NUMBER(S)<br>030-35907   | 4. LICENSE NUMBER(S)<br>13-32352           | 5. DATE(S) OF INSPECTION<br>February 3, 2006 |  |
| 6. INSPECTION PROCEDURES USED<br>87131   | 7. INSPECTION FOCUS AREAS<br>03.01 - 03.07 |  |  |

**SUPPLEMENTAL INSPECTION INFORMATION**

|                             |                  |  |                                     |
|-----------------------------|------------------|--|-------------------------------------|
| 1. PROGRAM CODE(S)<br>02120 | 2. PRIORITY<br>3 | 3. LICENSEE CONTACT<br>Keith Rockey, M.D., RSO | 4. TELEPHONE NUMBER<br>765-673-0370 |
|-----------------------------|------------------|--|-------------------------------------|

|  |  |
|--|--|
| <input checked="" type="checkbox"/> Main Office Inspection | Next Inspection Date: <b>February 2009</b> |
| <input type="checkbox"/> Field Office _____                |  |
| <input type="checkbox"/> Temporary Job Site _____          |  |

**PROGRAM SCOPE**

The licensee was a nuclear medicine clinic which served the local county. Licensee had authorization to use byproduct materials under Sections 35.100, 35.200, and 35.300, excluding generators and xenon-133. Licensed activities were conducted only at the facility indicated on the license.

The nuclear medicine department was staffed with one full-time nuclear medicine technologist and one assistant who helped as needed. The licensee's nuclear medicine staff typically performed 80 diagnostic procedures monthly in the nuclear medicine area. Doses were primarily technetium-99m for bone, liver, and other studies. In addition, licensee occasionally performed studies using iodine-123. Doses were received as unit doses from a licensed radiopharmacy. Licensee performed around three iodine-131 treatments annually, including hyperthyroid treatments and thyroid ablations, with the iodine-131 in capsule form. Therapies which would require hospitalization were referred to local hospitals. All waste was returned to the radiopharmacy or held for decay-in-storage.

**Performance Observations**

The inspector was unable to observe any diagnostic administrations of licensed material. Licensee personnel demonstrated dose preparation, administration and disposal procedures, as well as survey meter checks, package receipt, dose calibrator constancy tests, and meter survey procedures, and explained procedures for daily and weekly contamination surveys. The inspector found no concerns with these activities. The inspector reviewed written directives for radiopharmaceutical therapies and found no issues. Interviews with licensee staff indicated adequate knowledge of radiation safety procedures. Radiation surveys indicated radiation levels consistent with licensee survey records.