

(10-2003)  
10 CFR 2.201

## SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED:

Clinton Diagnostics, LLC  
43475 Dalcama, Suite 110  
Clinton Township, MI 48038

2. NRC/REGIONAL OFFICE

UNITED STATES  
NUCLEAR REGULATORY COMMISSION  
REGION III  
2443 WARRENVILLE ROAD, SUITE 210  
LISLE, IL 60532-4352

REPORT 2006-001

3. DOCKET NUMBER(S)

030-36580

4. LICENSEE NUMBER(S)

21-32514-01

5. DATE(S) OF INSPECTION

June 13, 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

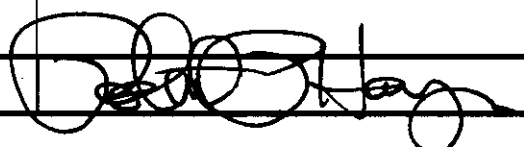
Date

LICENSEE'S

REPRESENTATIVE

NRC INSPECTOR

Robert P. Hays



6/13/06

RPH

(10-2003)  
10 CFR 2.201**Docket File Information**  
**SAFETY INSPECTION REPORT**  
**AND COMPLIANCE INSPECTION**

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|--|--|--|--|
| 1. LICENSEE<br><b>Clinton Diagnostics, LLC</b><br>REPORT NUMBER(S) <b>2006-001</b> |  | 2. NRC/REGIONAL OFFICE<br><b>Region III</b>      |  |
| 3. DOCKET NUMBER(S)<br><b>03036580</b>   | 4. LICENSE NUMBER(S)<br><b>21-32514-01</b>       | 5. DATE(S) OF INSPECTION<br><b>June 13, 2006</b> |  |
| 6. INSPECTION PROCEDURES USED<br><b>87130 (10/24/02)</b>                           | 7. INSPECTION FOCUS AREAS<br><b>03.01- 03.07</b> |  |  |
| <b>SUPPLEMENTAL INSPECTION INFORMATION</b>   |  |  |  |
| 1. PROGRAM CODE(S)<br><b>02201</b>   | 2. PRIORITY<br><b>5</b>                          | 3. LICENSEE CONTACT<br><b>Sharon Galetti</b>     | 4. TELEPHONE NUMBER<br><b>586/286-2350</b> |
| <input checked="checked" type="checkbox"/> Main Office Inspection                  |  | Next Inspection Date: <b>June 2007</b>           |  |
| <input type="checkbox"/> Field Office  |  |  |  |
| <input type="checkbox"/> Temporary Job Site  |  |  |  |

**PROGRAM SCOPE**

The licensee was a medical clinic authorized by the license to use any byproduct material permitted by 10 CFR 35.100, as needed for any uptake, dilution and excretion study permitted by 10 CFR 35.100, and 10 CFR 35.200, as needed (excluding greater than 30 microcuries of iodine-131) for any imaging and localization study permitted by 10 CFR 35.200 at the location specified on the license. Licensed activities have not been initiated since the license has been issued. Since licensed activities have not yet been initiated, the next inspection should be scheduled at one year from the current inspection date.