



Region I Office
Division of Radiological Safety and Security
475 Allendale Road, Suite 102
King of Prussia, PA 19406-1415
(610)337-5000

Telephone Conversation Record

Date: 04/04/2022

License No. 06-30657-01

Docket No.(no hyphens): 03035779

Mail Control/Report No. 629328

Licensee Name: Northeast Medical Group, Inc.

Participant(s) Name/Title: Robert L. Mitchell, Manager/ Practice Operations

Work Telephone No. 203-384-5109

Business Cellphone No.

NRC Representative Name/Title: Netra Patel, Health Physicist

Subject: Shelton Location Dose Calibrator.

Discussion:

The inspector called the licensee to ask if they had dose calibrator at their Shelton location. The licensee said they do and will send the details via email.

Action Required:

SUNSI REVIEW

Document Availability: ☒ Public or ☐ Non-Public

Document Sensitivity:

(select "1" value to the right)

- | | |
|--|--|
| <input checked="" type="checkbox"/> Non-Sensitive | <input checked="" type="checkbox"/> MD 3.4 Non-Public B.1 (Non-Sensitive) |
| <input type="checkbox"/> Non-Sensitive Copyright | <input type="checkbox"/> MD 3.4 Non-Public A.3 (Sensitive Security Related) |
| <input type="checkbox"/> Sensitive – Proprietary | <input type="checkbox"/> MD 3.4 Non-Public A.4 (Sensitive Proprietary) |
| <input type="checkbox"/> Sensitive – Privacy Act (includes Personally Identifiable Information (PII)) | <input type="checkbox"/> MD 3.4 Non-Public A.5 (Sensitive-Privacy Act) |
| <input type="checkbox"/> Sensitive – Internal, Periodic Review required (All Other Sensitive Internal Info.) | <input type="checkbox"/> MD 3.4 Non-Public A.6 (Sensitive-Federal, State, etc) |
| <input type="checkbox"/> Sensitive – Security-Related-Periodic Review Required | <input type="checkbox"/> MD 3.4 Non-Public A.7 (Internal) |

SUNSI Review Completed by: