State of Tennessee
Health Facilities Commission
502 Deaderick Street, Andrew Jackson Building, 9th Floor, Nashville, TN 37243
www.tn.gov/hfc Phone: 615-741-2364 hsda.staff@tn.gov

INITIAL APPLICATION FOR LICENSE OF SERVICES FOR HOSPITAL OR OUTPATIENT DIAGNOSTIC CENTER

1. NAME AND PHYSICIAL ADDRESS OF FACILITY OF SERVICE

Provider Type (Check One): ☐ **Hospital** ☒ **Outpatient Diagnostic Center (ODC)**

Middle Tennessee Imaging, LLC DBA Premier Radiology Cool Springs		
Name		
3310 Aspen Grove Drive Ste 201		
Address		
Franklin	TN	37067
City	**State**	**ZIP**
8		
License Number:		

2. CEO/ADMINISTRATOR OF PROVIDER

Jim Drumwright	CEO
Name	**Title**
jim.drumwright@radpartners.com	
Email Address	
Middle Tennessee Imaging, LLC	
Company Name	
28 White Bridge Rd. Ste 111	
Address	

Nashville	TN	37205
City	**State**	**ZIP**
615-356-3999		
Phone Number		

3. **BILLING INFORMATION FOR FACILITY**

Natalie Davis	Director of Procurement	
Name	**Title**	
natalie.davis@premierradiology.net		
Email Address		
Middle Tennessee Imaging, LLC		
Company Name		
28 White Bridge Rd. Ste 111		
Address		
Nashville	TN	37205
City	**State**	**ZIP**
615-356-3999		
Phone Number		

On the following items, check all appropriate services to be licensed.

Have any of the following services been changed since the last occupancy approval or have had a Plans Review related to that service since the last approval? ☐ Yes ☒ No

If yes, what were the changes and date of changes?:	N/A

☐ **ESTABLISHMENT OF A BURN UNIT:**

Physical Address of Service: _____

Number of Beds _____

What Age Group Will Be Served/Licensed?: ☐ Pediatric ☐ Adult ☐ Both

Will the Burn Unit be Verified by ABA?: ☐ Yes ☐ No (Please attach documentation of verification.)

If no, why:	

☒ **ESTABLISHING MRI UNIT/SERVICE:** *(If more than one unit, use ATTACHMENT – A.)*

Physical Address of Service: 3310 Aspen Grove Drive Ste 201

Name Brand of Unit Philips

Tesla 1.5T

Type (i.e. Close, Short Bore, etc.) Closed Bore

Unit's Serial Number 8130

Will the MRI Unit be Accredited?: ☒ **Yes** ☐ **No**

If MRI Unit will be Accredited, is it ☐ **PENDING** ☒ **ACCREDITED**

If ACCREDITED, What Organization? ACR
(Attach certificate or proof of accreditation.)

If no, why:

The MRI unit will be registered with the Health Facilities Commission. ☒ **Yes** ☐ **No**

☐ **ESTABLISHING PET UNIT/SERVICE:** *(If more than one unit, use ATTACHMENT – A.)*

Physical Address of Service:

Name Brand of Unit

Type (i.e. PET Only, PET/CT, PET/MRI)

Unit's Serial Number

Will the PET Unit be Accredited?: ☐ **Yes** ☐ **No**

If PET Unit will be Accredited, is it ☐ **PENDING** ☐ **ACCREDITED**

If ACCREDITED, What Organization?
(Attach certificate or proof of accreditation.)

If no, why:

The PET unit will be registered with the Health Facilities Commission. ☐ **Yes** ☐ **No**

□ **ESTABLISHING NEONATAL INTENSIVE CARE UNIT (NICU):**

Physical Address of Service: _____

Choose Designation Type: □ **First Time Self Designation/Initial NICU License**

□ **Designation at Different Level**

What is the Current License Level of Care? _____

What is the Requested Level? _____

□ **Ownership/Physical Location Change**

Number of Beds by Each Level

Level II _____
Level III _____
Level III with Surgery _____
Level IV _____

Have you been evaluated by AAP?: □ **Yes** □ **No**
If yes, please provide documentation.

Designate Expiration Date: _____

Neonatal Program Manager

_____
Name **Title**

_____
Email Address

_____
Phone Number

Neonatal Medical Director

_____
Name **Title**

_____
Email Address

_____
Phone Number

Pursuant to Tennessee Rule of Civil Procedure 72, I hereby declare under perjury that the information provided in this application is true and correct. Signee for this application certifies that he or she is of responsible character and able to comply with the minimum standards and regulations established by Tennessee pertaining to the type of facility or services for which application for licensure is made and with the rules promulgated under Tennessee Code Annotated §68-11-201 and Rules 0720-.14, 0720-36, and 0720-47 adopted by the Commission effective December 1, 2025. Signee also certifies that a policy has been implemented to inform all employees of their obligation under TCA §71-6-103 to report incidents of abuse or neglect.

Natalie Davis — 11/25/25

Signature **Date**

Natalie Davis

Printed Name

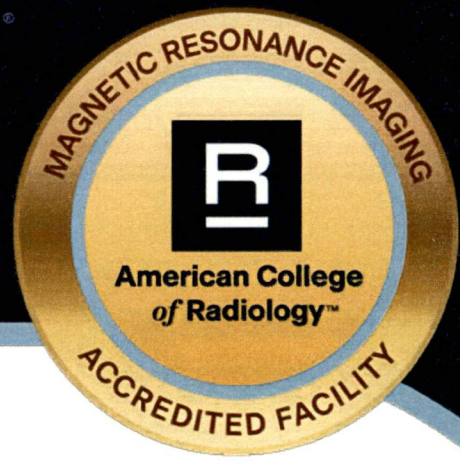
ATTACHMENT - A

MEDICAL EQUIPMENT INFORMATION

Equipment Type (i.e. MRI or PET)	Physical Address of Service	Brand Name	Type (i.e. Tesla/Short Bore; PET/CT)	Serial Number	Accredited (Yes/No/Pending)	Accreditation Organization	Unit Registered with HFC (Yes/No)
MRI	3310 Aspen Grove Drive Suite 201 Franklin, TN 37067	GE	1.5T Closed	2079063972	Yes	ACR	Yes

AMERICAN COLLEGE OF RADIOLOGY®

Certificate *of* Accreditation



Premier Radiology Cool Springs

3310 Aspen Grove Drive, Suite 101
Franklin, Tennessee 37067

was surveyed by the ACR® Committee on MRI
Accreditation of the Commission on Quality and Safety

The following magnet was approved

Philips Medical Systems Inc.
INTERA 1.5 2000

for

Body, Head, MSK, Spine

Accredited from
September 05, 2025 through December 27, 2030

Chair, Committee ON
MRI Accreditation

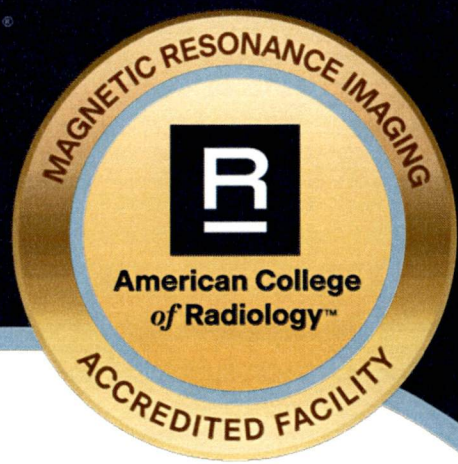
David B Larson

Chair, Commission on
Quality and Safety

MRAP# 03455-02

AMERICAN COLLEGE OF RADIOLOGY®

Certificate *of* Accreditation



Premier Radiology Cool Springs

3310 Aspen Grove Drive, Suite 101
Franklin, Tennessee 37067

was surveyed by the ACR® Committee on MRI
Accreditation of the Commission on Quality and Safety

The following magnet was approved

General Electric Co. (GE Medical Systems)
SIGNA Explorer 2004

for

Body, Head, MSK, Spine

Accredited from
July 08, 2024 through December 27, 2027

Chair, Committee ON
MRI Accreditation

David B Larson

Chair, Commission on
Quality and Safety

MRAP# 03455-03

From: HFC Service
To: Alecia L. Craighead
Subject: FW: MTI, LLC and NOL, LLC
Date: Wednesday, December 10, 2025 9:07:52 AM
Attachments: Outlook-media

From: Natalie Davis <natalie.davis@premierradiology.net>
Sent: Tuesday, December 9, 2025 2:43 PM
To: HFC Service <HFC.Service@tn.gov>
Subject: [EXTERNAL] MTI, LLC and NOL, LLC

Good Afternoon,

I have reviewed the serial numbers on each piece of equipment. Please use the serial numbers in red. Let me know if you have any other questions.

Premier Radiology Briarville:

- It appears the MRI registered and the MRI on the license are two different units based on SSN. Please double check and respond.
  Application has a GE with SSN of ZA207, and the Registry has a GE with SSN R199.

Premier Radiology Antioch:

- It appears the MRI registered and the MRI on the license are two different units based on SSN. Please double check and respond.
  Application has a GE with SSN of 5756356-2EN, and the Registry has a GE with SSN 1008.

Premier Radiology Brentwood:

- It appears the MRI registered and the MRI on the license are two different units based on SSN. Please double check and respond.
  Application has a Phillips with SSN 20023, and the Registry has a Phillips with SSN TB-150-1685.
  Application has a GE with SSN 615394BPMR, and the Registry has a GE with SSN 938.

Premier Radiology Gallatin:

- It appears the MRI registered and the MRI on the license are two different units

based on SSN. Please double check and respond.
Application has a GE with SSN R4528, and the Registry has a GE with SSN 971.

Premier Radiology Hermitage:

- It appears the MRI registered and the MRI on the license are two different units based on SSN. Please double check and respond.
  Application has a GE with SSN R2579, and the Registry has a GE with SSN 5925WH3.
  Application has a Phillips with SSN 37114, and the Registry has a Phillip with SSN 1026.

Premier Radiology Lebanon:

- No MRI is currently registered with the Medical Equipment Registry. Has this unit come online; thus a new unit to be registered? This unit has recently come online. Will need to be added to the 2025 registry.

Premier Radiology Midtown:

- It appears the MRI and the PET registered with the Medical Equipment Registry and those on the application are different units based on SSN. Please double check and respond.
  Application has a GE MRI 1.5T with SSN W046250-001, and the Registry has a GE MRI with SSN 26348MR4.
  Application has a GE MRI 3T with SSNW132, and the Registry has a GE MRI with SSN 266225MR2.
  Application has a GE PET/CT with SSN 479936PETHOG, and the Registry has a GE PETCT with SSN 446944HM1.

Premier Radiology New Salem:

- It appears the MRI registered and the MRI on the license are two different units based on SSN. Please double check and respond.
  Application has a GE with SSN R3254, and the Registry has a GE with SSN R3900.

Premier Radiology St. Thomas West:

- It appears the MRI registered and the MRI on the license are two different units based on SSN. Please double check and respond.
  Application has a Philips with SSN 34065, and the Registry has a Philip with SSN726927.

Clarksville Imaging Center

- It appears the MRI registered and the MRI on the license are two different units based on SSN. Please double check and respond.
  Application has a Siemens with SSN 931245, and the Registry has a Siemens Espree with SSN 30811.

Thank you,

Natalie Davis | Director of Procurement
28 White Bridge Pike, Suite 111 | Nashville, TN 37205
(615) 356-3999 (office) | 931-980-1474 (cell) | (615) 353-0462 (fax)
www.PremierRadiology.com