

**SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION**

<b>1. LICENSEE/LOCATION INSPECTED:</b> <i>Michigan Physicians Group, P.C.</i> <i>Berkley, MI 48072</i>  <b>REPORT NUMBER(S)</b> <i>2009-001</i>	<b>2. NRC/REGIONAL OFFICE</b>  <b>U.S. Nuclear Regulatory Commission</b> <b>Region III</b> <b>2443 Warrenville Road</b> <b>Suite 210</b> <b>Lisle, Illinois 60532-4351</b>
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<b>3. DOCKET NUMBER(S)</b> <i>030-34867</i>	<b>4. LICENSEE NUMBER(S)</b> <i>21-32135-01</i>	<b>5. DATE(S) OF INSPECTION</b> <i>Aug. 17, 2009</i>
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**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	Deborah A. Piskura	<i>Deborah A. Piskura</i>	8/17/09

*DAP*

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1. LICENSEE Michigan Physician's Group REPORT NUMBER(S) 2009-001		2. NRC/REGIONAL OFFICE <b>Region III</b> 2443 Warrenville Road, Suite 210 Lisle, IL 60532	
3. DOCKET NUMBER(S) 030-34867	4. LICENSE NUMBER(S) 21-32135-01	5. DATE(S) OF INSPECTION Aug. 17, 2009	
6. INSPECTION PROCEDURES USED 87130	7. INSPECTION FOCUS AREAS 03.01 – 03.08		

**SUPPLEMENTAL INSPECTION INFORMATION**

1. PROGRAM CODE(S) 02201	2. PRIORITY 5	3. LICENSEE CONTACT Alka Shah, M.D., RSO	4. TELEPHONE NUMBER 248-541-0770
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Main Office Inspection      Next Inspection Date: Aug. 2014

Field Office \_\_\_\_\_

Temporary Job Site Inspection \_\_\_\_\_

**PROGRAM SCOPE**

This licensee was a small cardiac diagnostic office with two locations of use and authorized to use licensed material permitted by Sections 35.100 and 35.200. This inspection reviewed the activities at the Berkley, Michigan clinic. The Berkley clinic was open daily except on Thursdays. The licensee's activities were limited to cardiovascular procedures. The nuclear medicine department was staffed with 1 technologist who performed approximately 60 diagnostic cardiac procedures monthly. The licensee received unit doses from a licensed radiopharmacy. The licensee's consultant audited the radiation safety program on a quarterly basis

This inspection consisted of interviews with licensee personnel, a review of selected records, tour of the nuclear medicine department, and independent measurements. The inspection included observations of dose calibrator QA checks, security of licensed material, package return surveys, and use of personnel monitoring.