

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED: Radiation Therapy Associates, P.C. 6255 North Inkster Road Suite 7 Garden City, MI 48135 REPORT NUMBER(S) 13-01		2. NRC/REGIONAL OFFICE Region III U. S. Nuclear Regulatory Commission 2443 Warrenville Road, Suite 210 Lisle, IL 60532-4352
3. DOCKET NUMBER(S) 030-33353	4. LICENSE NUMBER(S) 21-26536-01	5. DATE(S) OF INSPECTION April 24, 2013

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.

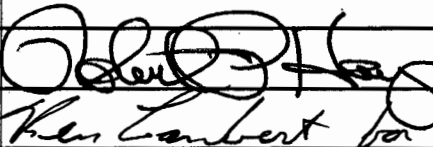

3. The violation(s), specifically described to you by the inspector as non-cited violations, are not being cited because they were self-identified, non-repetitive, and corrective action was or is being taken, and the remaining criteria in the NRC Enforcement Policy, to exercise discretion, were satisfied.

_____ Non-cited violation(s) were discussed involving the following requirement(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 in accordance with NRC Enforcement Policy. This form is a NOTICE OF VIOLATION, which may be subject to posting in accordance with 10 CFR 19.11.
(Violations and Corrective Actions)

Statement of Corrective Actions

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		4/24/13
BRANCH CHIEF	Tamara E. Bloomer		5/13/13

Docket File Information

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6. INSPECTION PROCEDURES USED 87131	7. INSPECTION FOCUS AREAS 03.01-03.07
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SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM CODE(S) 02200	2. PRIORITY 3	3. LICENSEE CONTACT R.C. Lustic, D.O., RSO	4. TELEPHONE NUMBER (734) 522-8540
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Main Office Inspection Next Inspection Date: 04/22/2016

Field Office Inspection _____

Temporary Job Site Inspection _____

PROGRAM SCOPE

The licensee was a cancer treatment clinic authorized by the license to use any byproduct materials permitted by 10 CFR 35.300, and 35.400, using iridium-192 seeds encased in nylon ribbon.

The licensee administers an average of 1-2 iodine-131 administrations annually for carcinoma therapy with patients released following 10 CFR 35.75. All dosages are administered by the one authorized user. The licensee has not used Ir-192 seeds since the previous inspection. The licensee receives iodine-131 capsules from a local nuclear pharmacy as ordered using the assay activity provided by the nuclear pharmacy and then decay-calculated to the administered activity prior to administration. No other therapy radiopharmaceuticals are administered by the authorized user.

The licensee staff also perform temporary cesium-137 implant procedures using cesium-137 tubes stored at Garden City Osteopathic Hospital authorized by NRC license, 21-04072-01. No cesium-137 procedures were performed from 2008 to 2011. Three implant patient cases were performed in 2012, each using a Wang applicator.

Performance Observations

During the inspection, the licensee's medical physicist demonstrated/discussed: (1) package receipt and check-in procedures; (2) surveys and wipe test counting; (3) I-131 procedures, written directives, and 10 CFR 35.75 requirements; (4) implant procedures and written directives; (5) waste handling (normally none); (6) radiation safety program audit results; and (7) dosimetry (< 10% of regulatory limits).