

**SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION**

<p>1. LICENSEE/LOCATION INSPECTED:</p> <p>ARK Cardiovascular &amp; Arrhythmia Center, PLC 6050 Greenfield Road Suite 101 Dearborn, MI 48126</p> <p>REPORT NUMBER(S) 17001</p>	<p>2. NRC/REGIONAL OFFICE</p> <p>Region III U. S. Nuclear Regulatory Commission 2443 Warrenville Road, Suite 210 Lisle, IL 60532-4352</p>	
<p>3. DOCKET NUMBER(S)</p> <p>030-38647</p>	<p>4. LICENSE NUMBER(S)</p> <p>21-35069-01</p>	<p>5. DATE(S) OF INSPECTION</p> <p>March 1, 2017</p>

**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. *IR 2014-001*
- 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	Zahid Sulaiman, Health Physicist	<i>Zahid Sulaiman</i>	3/11/2017
BRANCH CHIEF	Aaron T. McCraw, Chief, MIB	<i>[Signature]</i>	3/16/17

**Docket File Information**

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6. INSPECTION PROCEDURES USED  87130	7. INSPECTION FOCUS AREAS  03.01-03.07
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**SUPPLEMENTAL INSPECTION INFORMATION**

1. PROGRAM CODE(S)  02220	2. PRIORITY  3	3. LICENSEE CONTACT  Ray Carlson, RSO	4. TELEPHONE NUMBER  (734) 455-4730
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Main Office Inspection      Next Inspection Date: 03/01/2020  
 Field Office Inspection \_\_\_\_\_  
 Temporary Job Site Inspection \_\_\_\_\_

**PROGRAM SCOPE**

This was a routine inspection of a cardiac mobile nuclear medicine clinic authorized to use licensed materials for medical uses permitted by 10 CFR 35.200. The licensee had not conducted mobile nuclear medicine as of this inspection. The nuclear medicine department was staffed with one full-time nuclear medicine technologist (NMT) who performed approximately 80 cardiac stress tests and occasionally MUGA procedures monthly. The licensed activities were conducted from Monday-Thursday, 8:00am to 5:00pm. At the time of inspection, the Phoenix Cardiac clinic located at Southfield, MI, was closed, and the licensee had not conducted the licensed activities at this location for over a year. The licensee is planning to remove the Southfield, MI location from the license and will submit the amendment request to NRC.

**Performance Observations**

At the time of inspection, no licensed activities were conducted. Interviews of available staff revealed an adequate level of understanding of emergency and material handling procedures and techniques. The inspector: (1) observed the NMT conduct a physical inventory of sealed sources and all sources were accounted for; (2) had the NMT demonstrate the dose calibrator constancy check, package receiving and check-in procedures, the end of the day daily area surveys and weekly wipe tests, and proper handling of radioactive waste and disposal procedures. The inspector reviewed quarterly program audits conducted by an outside consultant and leak test report, with no issues noted. The inspector reviewed dosimetry records for 2014, 2015, and 2016, indicating the maximum annual dose to be 415 mrem - DDE, and 1670 mrem - SDE, and performed independent radiation measurements of the hot lab, imaging, and stress room areas that were consistent with the licensee's survey results and within regulatory limits.

The inspector reviewed the corrective action to one SLIV violation of 10 CFR 20.1501, 10 CFR 20.1906 and License Condition 14, for not converting the measured counts per minute results to DPM for removable contamination surveys for received package and weekly area removable contamination surveys. The inspector reviewed the survey results and verified the licensee were converting the measured counts per minute result to DPM for removable contamination surveys results and closed the violation.

No violations of NRC requirements were identified during this inspection.