



## Materials Inspection Report

<b>1. Licensee/Location Inspected:</b>  Nuclear Cardiology Associates, P.C. 8564 Broadway Merrillville, Indiana 46410  <b>Report Number(s)</b> 2023001	<b>2. NRC/Regional Office</b>  Region III U. S. Nuclear Regulatory Commission 2443 Warrenville Road, Suite 210 Lisle, IL 60532-4352	
<b>3. Docket Number(s)</b> 03036546	<b>4. License Number(s)</b> 13-32503-01	<b>5. Date(s) of Inspection</b> 6/15/2023

**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. During this inspection, certain of your activities, as described below and/or attached, were in violation of NRC requirements, and were assessed at Severity Level IV, in accordance with the NRC Enforcement Policy.
  - A. 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, corrective action was or is being taken, and the remaining criteria in the NRC Enforcement Policy were satisfied.  
 (Non-cited violation(s) was/were discussed involving the following requirement(s))
  - B. The following violation(s) is/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 AND DATE
LICENSEE'S REPRESENTATIVE		
NRC INSPECTOR	Elizabeth Tindle-Engelmann	Elizabeth D. Tindle-Engelmann <small>Digitally signed by Elizabeth D. Tindle-Engelmann Date: 2023.06.16 12:05:30 -05'00'</small>
BRANCH CHIEF	Rhex Edwards	 <small>Digitally signed by Rhex A. Edwards Date: 2023.06.30 11:26:57 -05'00'</small>



### Materials Inspection Record

<b>1. Licensee Name:</b> Nuclear Cardiology Associates, P.C.		<b>2. Docket Number(s):</b> 03036546		<b>3. License Number(s)</b> 13-32503-01	
<b>4. Report Number(s):</b> 2023001			<b>5. Date(s) of Inspection:</b> 6/15/2023		
<b>6. Inspector(s):</b> Elizabeth Tindle-Engelmann, Carol Dye		<b>7. Program Code(s):</b> 02201	<b>8. Priority:</b> 5	<b>9. Inspection Guidance Used:</b> 87130	
<b>10. Licensee Contact Name(s):</b> Arshad Malik, M.D., RSO		<b>11. Licensee E-mail Address:</b> apmalikmd@yahoo.com		<b>12. Licensee Telephone Number(s):</b> 219-769-1622	

<b>13. Inspection Type:</b> <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Announced <input type="checkbox"/> Non-Routine <input checked="" type="checkbox"/> Unannounced		<b>14. Locations Inspected:</b> <input type="checkbox"/> Hybrid <input checked="" type="checkbox"/> Main Office <input type="checkbox"/> Temporary Job Site <input type="checkbox"/> Field Office <input type="checkbox"/> Remote		<b>15. Next Inspection Date (MM/DD/YYYY):</b> 6/15/2028 <input checked="" type="checkbox"/> Normal <input type="checkbox"/> Extended <input type="checkbox"/> Reduced <input type="checkbox"/> No change	
---	--	---	--	---	--

**16. Location(s) Inspected List:**  
8564 Broadway, Merrillville, Indiana 46410

**17. Scope and Observations:**  
 The licensee was a medical facility with authorization for diagnostic uses of byproduct material pursuant to 10 CFR 35.200. The licensee's radiation safety officer was an Authorized User who was onsite daily. The licensee utilized an external consultant to perform program reviews and equipment calibrations. The licensee had one full-time nuclear medicine technologist (NMT). The licensee administered approximately 4 SPECT doses per day. The department received unit doses of primarily technetium-99m from a licensed radiopharmacy.

The inspectors observed dose preparation and administration. The licensee's staff demonstrated decay in storage procedures, package receipt, and spill response. Interviews with licensee personnel indicated adequate knowledge of radiation safety and security concepts and procedures. The inspectors reviewed the following records: area surveys, dose calibrator calibrations, dosimetry, package receipt, package return, program reviews, sealed source inventory and leak tests, spill reports, training, and waste logs.

The inspectors observed the NMT wearing dosimetry. Through interviews, the inspectors determined that the NMT kept their dosimetry onsite in a storage area outside of the hot lab and always wore it while working with licensed material. Dosimetry results were consistent with anticipated exposure for the licensee's patient case load. This closes the violation from IR 03036546/2018001 for the licensee's failure to wear dosimetry in accordance with their license conditions.

Independent surveys were performed using a RadEye G (SN: 30653; calibration due: 5/9/2024). Results were consistent with the licensee's survey records and postings.  
 No violations were identified as a result of this inspection

Materials Inspection Record (Continued)

Signature and Date - Branch Chief

A handwritten signature in black ink, appearing to be 'R. Edwards', with a long horizontal line extending to the right.

Digitally signed by Rhex A. Edwards  
Date: 2023.06.30 11:26:15 -05'00'