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Naugatuck Valley Radiological Associates  
Union Square Plaza Bldg #1  
385 Main Street South  
Southbury CT 06488

May 18<sup>th</sup>, 2012

USNRC Region I  
475 Allendale Rd  
King of Prussia PA 19406

License number 06-30265-01

Greetings:

03034024

With reference to our byproduct materials license no. 06-30265-01.

We are submitting this amendment request to change the Radiation Safety Officer for this facility/licensee:

- ∴ Michael Malin M.D. currently an authorized user for this facility/license will be designated Radiation Safety Officer for this license. Robert M. Lehman M.D. the current Radiation Safety Officer will remain an Authorized User on this license.

Please contact us if you require additional information.

Sincerely,



Robert M. Lehman M.D.  
Naugatuck Valley Radiological Associates  
Owner

2012 MAY 30 AM 7:32

RECEIVED  
REGION 1

577675  
NMSS/RGN1 MATERIALS-002

**RADIATION SAFETY OFFICER TRAINING AND EXPERIENCE  
AND PRECEPTOR ATTESTATION**  
[10 CFR 35.50]APPROVED BY OMB: NO. 3150-0120  
EXPIRES: 3/31/2012

Name of Proposed Radiation Safety Officer

MICHAEL KEVIN MALIN M.D.

Requested Authorization(s) The license authorizes the following medical uses (check all that apply):

☒ 35.100    ☒ 35.200    ☐ 35.300    ☐ 35.400    ☐ 35.500    ☐ 35.600 (remote afterloader)  
☐ 35.600 (teletherapy)    ☐ 35.600 (gamma stereotactic radiosurgery)    ☐ 35.1000 ( )

**PART I -- TRAINING AND EXPERIENCE**  
(Select one of the four methods below)

\*Training and Experience, including board certification, must have been obtained within the 7 years preceding the date of application or the individual must have obtained related continuing education and experience since the required training and experience was completed. Provide dates, duration, and description of continuing education and experience related to the uses checked above.

**1. Board Certification**

- Provide a copy of the board certification.
- Use Table 3.c. to describe training in radiation safety, regulatory issues, and emergency procedures for all types of medical use on the license.
- Skip to and complete Part II Preceptor Attestation.

OR

**2. Current Radiation Safety Officer Seeking Authorization to Be Recognized as a Radiation Safety Officer for the Additional Medical Uses Checked Above**

- Use the table in section 3.c. to describe training in radiation safety, regulatory issues, and emergency procedures for the additional types of medical use for which recognition as RSO is sought.
- Skip to and complete Part II Preceptor Attestation.

OR

**3. Structured Educational Program for Proposed Radiation Safety Officer****a. Classroom and Laboratory Training**

Description of Training	Location of Training	Clock Hours	Dates of Training*
Radiation physics and instrumentation			
Radiation protection			
Mathematics pertaining to the use and measurement of radioactivity			
Radiation biology			
Radiation dosimetry			

Total Hours of Training:

**RADIATION SAFETY OFFICER TRAINING AND EXPERIENCE AND PRECEPTOR ATTESTATION (continued)**

**3. Structured Educational Program for Proposed Radiation Safety Officer (continued)**

**b. Supervised Radiation Safety Experience**

*(If more than one supervising individual is necessary to document supervised work experience, provide multiple copies of this section.)*

Description of Experience	Location of Training/ License or Permit Number of Facility	Dates of Training*
Shipping, receiving, and performing related radiation surveys		
Using and performing checks for proper operation of instruments used to determine the activity of dosages, survey meters, and instruments used to measure radionuclides		
Securing and controlling byproduct material		
Using administrative controls to avoid mistakes in administration of byproduct material		
Using procedures to prevent or minimize radioactive contamination and using proper decontamination procedures		
Using emergency procedures to control byproduct material		
Disposing of byproduct material		

Licensed Material Used (e.g., 35.100, 35.200, etc.)+

\* Choose all applicable sections of 10 CFR Part 35 to describe radioisotopes and quantities used: 35.100, 35.200, 35.300, 35.400, 35.500, 35.600 remote afterloader units, 35.600 teletherapy units, 35.600 gamma stereotactic radiosurgery units, emerging technologies (provide list of devices).

**RADIATION SAFETY OFFICER TRAINING AND EXPERIENCE AND PRECEPTOR ATTESTATION (continued)**

**3. Structured Educational Program for Proposed Radiation Safety Officer (continued)**

**b. Supervised Radiation Safety Experience (continued)**

*(If more than one supervising individual is necessary to document supervised work experience, provide multiple copies of this section.)*

Supervising Individual

License/Permit Number listing supervising individual as a Radiation Safety Officer

This license authorizes the following medical uses:

35.100	35.200	35.300	35.400
35.500	35.600 (remote afterloader)		35.600 (teletherapy)
35.600 (gamma stereotactic radiosurgery)			35.1000 ( )

**c. Describe training in radiation safety, regulatory issues, and emergency procedures for all types of medical use on the license.**

Description of Training	Training Provided By	Dates of Training*
Radiation safety, regulatory issues, and emergency procedures for 35.100, 35.200, and 35.500 uses	FELLOW SOJIM AFRICA 1994 APRIL BOARD REG TO COMM CMT Winkay NVCA CONNECTICUT	1990-1994 7/96 Present
Radiation safety, regulatory issues, and emergency procedures for 35.300 uses		
Radiation safety, regulatory issues, and emergency procedures for 35.400 uses		
Radiation safety, regulatory issues, and emergency procedures for 35.600 - teletherapy uses		
Radiation safety, regulatory issues, and emergency procedures for 35.600 - remote afterloader uses		
Radiation safety, regulatory issues, and emergency procedures for 35.600 - gamma stereotactic radiosurgery uses		
Radiation safety, regulatory issues, and emergency procedures for 35.1000, specify use(s):		

**RADIATION SAFETY OFFICER TRAINING AND EXPERIENCE AND PRECEPTOR ATTESTATION (continued)**

**3. Structured Educational Program for Proposed Radiation Safety Officer (continued)**

- c. Training in radiation safety, regulatory issues, and emergency procedures for all types of medical use on the license (continued)

Supervising Individual *If training was provided by supervising RSO, AU, AMP, or ANP (if more than one supervising individual is necessary to document supervised training, provide multiple copies of this page.)* License/Permit Number listing supervising individual

License/Permit lists supervising individual as:

☐ Radiation Safety Officer      ☐ Authorized User      ☐ Authorized Nuclear Pharmacist  
☐ Authorized Medical Physicist

Authorized as RSO, AU, ANP, or AMP for the following medical uses:

☐ 35.100      ☐ 35.200      ☐ 35.300      ☐ 35.400  
☐ 35.500      ☐ 35.600 (remote afterloader)      ☐ 35.600 (teletherapy)  
☐ 35.600 (gamma stereotactic radiosurgery)      ☐ 35.1000 (      )

- d. Skip to and complete Part II Preceptor Attestation.

**OR**

**4. Authorized User, Authorized Medical Physicist, or Authorized Nuclear Pharmacist identified on the licensee's license**

- a. Provide license number.  
b. Use the table in section 3.c. to describe training in radiation safety, regulatory issues, and emergency procedures for all types of medical use on the license.  
c. Skip to and complete Part II Preceptor Attestation.

**PART II – PRECEPTOR ATTESTATION**

**Note:** This part must be completed by the individual's preceptor. The preceptor does not have to be the supervising individual as long as the preceptor provides, directs, or verifies training and experience required. If more than one preceptor is necessary to document experience, obtain a separate preceptor statement from each.

**First Section**

**Check one of the following:**

**1. Board Certification**

I attest that \_\_\_\_\_ has satisfactorily completed the requirements in  
Name of Proposed Radiation Safety Officer

10 CFR 35.50(a)(1)(i) and (a)(1)(ii); or 35.50 (a)(2)(i) and (a)(2)(ii); or 35.50(c)(1).

**OR**

**2. Structured Educational Program for Proposed Radiation Safety Officers**

I attest that \_\_\_\_\_ has satisfactorily completed a structural educational  
Name of Proposed Radiation Safety Officer

program consisting of both 200 hours of classroom and laboratory training and one year of full-time radiation safety experience as required by 10 CFR 35.50(b)(1).

**OR**

**RADIATION SAFETY OFFICER TRAINING AND EXPERIENCE AND PRECEPTOR ATTESTATION (continued)**

**Preceptor Attestation** (continued)

**First Section** (continued)

Check one of the following:

☒ **3. Additional Authorization as Radiation Safety Officer**

☒ I attest that MICHAEL KEVIN MALIN is an  
Name of Proposed Radiation Safety Officer

☐ Authorized User

☐ Authorized Nuclear Pharmacist

☐ Authorized Medical Physicist

identified on the Licensees license and has experience with the radiation safety aspects of similar type of use of byproduct material for which the individual has Radiation Safety Officer responsibilities

-----  
**AND**

**Second Section**

Complete for all (check all that apply):

☒ I attest that MICHAEL KEVIN MALIN has training in the radiation safety, regulatory issues, and  
Name of Proposed Radiation Safety Officer

emergency procedures for the following types of use:

☒ 35.100

☒ 35.200

☐ 35.300 oral administration of less than or equal to 33 millicuries of sodium iodide I-131, for which a written directive is required

☐ 35.300 oral administration of greater than 33 millicuries of sodium iodide I-131

☐ 35.300 parenteral administration of any beta-emitter, or a photon-emitting radionuclide with a photon energy less than 150 keV for which a written directive is required

☐ 35.300 parenteral administration of any other radionuclide for which a written directive is required

☐ 35.400

☐ 35.500

☐ 35.600 remote afterloader units

☐ 35.600 teletherapy units

☐ 35.600 gamma stereotactic radiosurgery units

☐ 35.1000 emerging technologies, including:

3-2009

## RADIATION SAFETY OFFICER TRAINING AND EXPERIENCE AND PRECEPTOR ATTESTATION (continued)

AND

Third Section  
Complete for ALL

✓ I attest that MICHAEL KEVIN MALIN has achieved a level of radiation safety knowledge  
Name of Proposed Radiation Safety Officer  
sufficient to function independently as a Radiation Safety Officer for a medical use licensee

Fourth Section  
Complete the following for Preceptor Attestation and signature

I am the Radiation Safety Officer for

NAUGATUCK VALLEY RADIOLOGICAL ASSOC  
Name of Facility

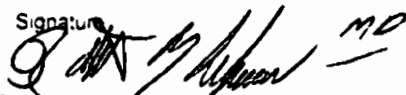
License/Permit Number

06 - 30265-01

Name of Preceptor

ROBERT M LEMMAN

Signature



Telephone Number

Date

203 267-33405/6/2012

# The American Board of Radiology

Organized through the cooperation of the  
American College of Radiology, the American Roentgen Ray Society,  
the American Radium Society, the Radiological Society of North America,  
the Section on Radiology of the American Medical Association,  
the American Society for Therapeutic Radiology and Oncology, the Association of  
University Radiologists, and American Association of Physicists in Medicine

Hereby certifies that

**Michael Kevin Malin, M.B., B.Ch.**

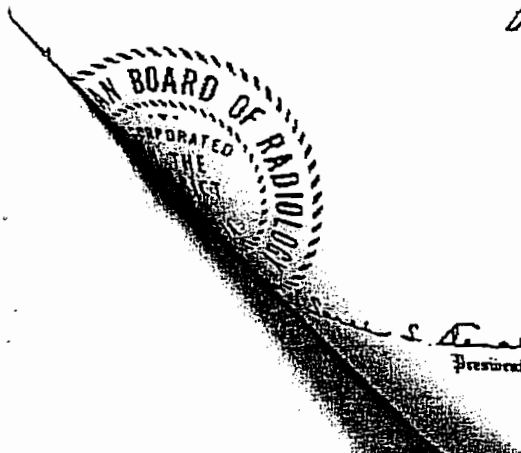
Has pursued an accepted course of graduate study  
and clinical work, has met certain standards and qualifications and  
has passed the examinations conducted under the authority of

*The American Board of Radiology*

On this twelfth day of June, 1996

Thereby demonstrating to the satisfaction of the Board  
that he is qualified to practice the specialty of

**Diagnostic Radiology**



President

Secretary-Treasurer

Executive Director

*Robert R. Heston, MD* *Paul Capp, M.D.*



## CURRICULUM VITAE

**MICHAEL KEVIN MALIN**  
[REDACTED]  
[REDACTED]

SS#

UPN#

G46286

CT License #

034220

Date of birth:

### **EDUCATION:**

1990-1994

University of Witwatersrand-Johannesburg, South Africa  
FF Rad (D)  
Fellow of The College of Medicine of South Africa (Diagnostic Radiology)  
(April 1994). Equivalent to Board Certification.

[REDACTED] University of South Africa-Pretoria, South Africa  
BSc  
Major Subjects: Computer Science and Operations Research  
(Quantitative Management)  
Graduated Cum Lauda

[REDACTED] University of Witwatersrand-Johannesburg, South Africa  
MBBCh (Bachelor of Medicine, Bachelor of Surgery.) MD  
Major Subjects: Internal Medicine, Surgery, Paediatrics, Obstetrics and Gynecology

ECFMG (Educational Commission for Foreign Medical Graduates-USA) 1986  
Basic Sciences Component 86  
Clinical Sciences Component 88

**PERSONAL INFORMATION WAS REMOVED  
BY NRC. NO COPY OF THIS INFORMATION  
WAS RETAINED BY THE NRC.**

FLEX (Foreign Licensing Examination) 1993  
Component I 84  
Component II 84

1995-1996      Board Eligible  
Passed written examination September 1995  
Radiology 92<sup>nd</sup> Percentile  
Physics 98<sup>th</sup> Percentile

June 1996      Board Certified- Diagnostic Radiology

**EXPERIENCE:**

7/96-Present      Naugatuck Valley Radiology, Radiologist

7/95-6/96      Hospital of Saint Raphael  
Fellowship, Cross Sectional Imaging-MRI (head and body), CT  
and ultrasound

7/94-6/95      Yale New Haven Hospital  
Fellowship, Nuclear Medicine

2/90-3/94      Johannesburg Hospital  
Resident, Department of Radiology

1/89-2/90      J.G. Strijdom Hospital  
Emergency Room Physician (Sessional)  
Information Services Management (formerly IBM South Africa)  
Systems Engineer

Rosebank Clinic  
Private Practice  
Assistant to Orthopedic Surgeons: Dr. C Barlin & Dr. B Barrow

1/88-6/88      Cardiology Department-University of Witwatersrand  
Research Fellow, Baragwaneth Hospital

1/87/12/87      Johannesburg Hospital and Hillbrow Hospital  
Senior House Officer  
Gastroenterology      6 months  
Endocrinology      6 months

1/86/12/86

Hillbrow Hospital

Intern

Internal Medicine 4 months

Surgery 4 months

Oncology 2 months

Obstetrics & Gynecology 2 months

**REGISTRATION:** Specialist, Diagnostic Radiology, South African Medical and Dental Council Medical Practitioner, General Medical Council of the United Kingdom  
Connecticut State License  
Permanent Resident of USA (Green Card)

**SOCIETIES:** Member of American Roentgen Ray Society  
Member of Radiological Society of North America

**SCHOLARSHIPS:** Academic scholarships from the University of South Africa 1987, 1988, 1989 and 1990

**INTRAMURAL:** Voluntary work at Muldersdrift, Riveriea and Alexander Clinics (Clinics established by medical students to provide basic health care to the underprivileged)

**REFERENCES:** Provided upon request

This is to acknowledge the receipt of your letter application dated

5/18/2012, and to inform you that the initial processing which includes an administrative review has been performed.

☒ Amendment (06-30265-01)  
There were no administrative omissions. Your application was assigned to a technical reviewer. Please note that the technical review may identify additional omissions or require additional information.

☐ Please provide to this office within 30 days of your receipt of this card

A copy of your action has been forwarded to our License Fee & Accounts Receivable Branch, who will contact you separately if there is a fee issue involved.

Your action has been assigned **Mail Control Number** 577675.  
When calling to inquire about this action, please refer to this control number.  
You may call us on (610) 337-5398, or 337-5260.