

## SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

## 1. LICENSEE/LOCATION INSPECTED:

Michael Lala, M.D., P.C.  
South Allen Radiology  
3815 Pine Harbor Drive  
West Bloomfield, MI 48323

REPORT NUMBER(S) 16-001

## 2. NRC/REGIONAL OFFICE

Region III  
U. S. Nuclear Regulatory Commission  
2443 Warrenville Rd, Suite 210  
Lisle, IL 60532

## 3. DOCKET NUMBER(S)

030-18558

## 4. LICENSE NUMBER(S)

21-24380-01

## 5. DATE(S) OF INSPECTION

March / , 2016

## 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:

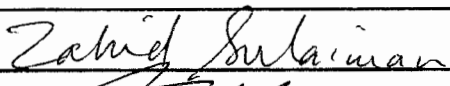
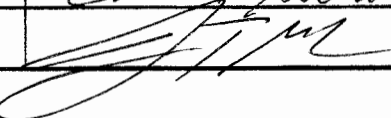
- ☒ 1. Based on the inspection findings, no violations were identified.
- ☐ 2. Previous violation(s) closed.
- ☐ 3. The violation(s), specifically described to you by the inspector as non-cited violations, are not being cited because they were self-identified, non-repetitive, and corrective action was 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	Zahid Sulaiman, Health Physicist		3/11/16
BRANCH CHIEF	Aaron T. McCraw, Chief, MIB		3/22/16

*Docket File Information*

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March 1, 2016

6. INSPECTION PROCEDURES USED

87130 & 87131

7. INSPECTION FOCUS AREAS

03.01-03.07

**SUPPLEMENTAL INSPECTION INFORMATION**

1. PROGRAM CODE(S)

02200

2. PRIORITY

3

3. LICENSEE CONTACT

Michael Lala, M.D., RSO

4. TELEPHONE NUMBER

(248) 225-6909

☐ Main Office Inspection      Next Inspection Date: 03/01/2019

☒ Field Office Inspection      26699 West 12 Mile Road, Southfield, MI

☐ Temporary Job Site Inspection

**PROGRAM SCOPE**

This licensee was a private practice out-patient diagnostic clinic authorized under NRC license to use byproduct materials for medical uses permitted by 10 CFR 35.100, 35.200, and 35.300. The licensee operated two clinics in the suburban Detroit area. The licensee employed one part-time nuclear medicine technologists (NMT) who performed approximately 3-4 diagnostic cardiology procedures every other Tuesday at its Southfield location and approximately 2 diagnostic cardiology procedure per month at Livonia location. The work hours are from 8:00 AM to 2:00 PM. No I-131 therapy treatments were performed since the last inspection. The licensee received unit doses from a licensed radiopharmacy. The licensee retained the services of a consulting physicist who audited the radiation safety program on a quarterly basis.

**Performance Observations:**

This inspection consisted of interviews with licensee personnel, a review of selected records, a tour of the nuclear medicine department, and independent measurements. At the time of the inspection, no licensed activities were conducted. The inspector: (1) had the NMT demonstrate the dose calibrator constancy check, package receiving and check-in procedures, the end of the day daily and weekly area surveys, and proper handling of radioactive waste and disposal procedures; (2) observed the NMT conduct a physical inventory of sealed sources and all sources were accounted for. The inspector reviewed annual radiation safety program audits conducted by an outside consultant every quarter, with no findings. The inspector reviewed dosimetry records for 2014, and 2015, indicating the maximum annual dose to be Not Detected - DDE, and 250 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.

No violations of NRC requirements were identified during this inspection.