



Arkansas Department of Health

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Fay W. Boozman, MD, MPH, Director
Mike Huckabee, Governor

August 21, 2002

Patricia M. Larkins, Team Leader
U.S. Nuclear Regulatory Commission
Office of State and Tribal Programs
11555 Rockville Pike
Rockville, Maryland 20852

STP
02 AUG 23 PM 3:02

Dear Ms. Larkins:

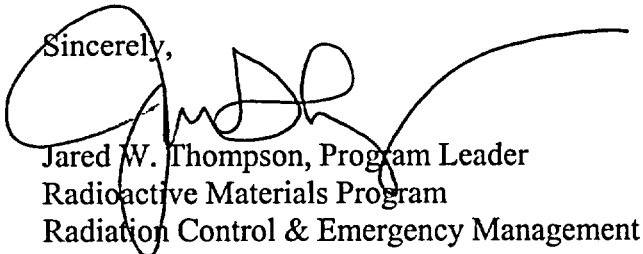
Enclosed is the completed IMPEP Questionnaire for the Nuclear Regulatory Commission (NRC) evaluation of Arkansas's Agreement State Program. This document has been submitted electronically, but one of the appendices could not be transmitted electronically. Appendix C, which is a list of the Program's radiation detection instrumentation, is enclosed as a hard copy with the questionnaire. If you have any questions related to the information contained within the questionnaire, please do not hesitate to contact me.

Please contact me regarding any licenses or files that the Team may want to review and they will be available. The "Materials Requested to Be Available for the Onsite Portion of an IMPEP Review" will be completed and available for your review.

An exit briefing has been scheduled with Jerry Hill, member of the Agency Leadership Team on September 13, 2002 at 10:00 a.m.

We look forward to seeing you and your Team on September 9, 2002. If you have any questions, or if we can assist you with local arrangements, please contact me at 501-661-2173.

Sincerely,



Jared W. Thompson, Program Leader
Radioactive Materials Program
Radiation Control & Emergency Management

Attachments

STP-DDL Template

RIDS DIST. SP08

Keeping Your Hometown Healthy

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INTEGRATED MATERIALS PERFORMANCE EVALUATION PROGRAM

QUESTIONNAIRE

Name of State/Regional Program: **ARKANSAS**
Reporting Period: **March 28, 1998 - September 9, 2002**

A. COMMON PERFORMANCE INDICATORS

I. Status of Materials Inspection Program

1. Please prepare a table identifying the licenses with inspections that are overdue by more than 25% of the scheduled frequency set out in NRC Inspection Manual Chapter 2800. The list should include initial inspections that are overdue.

<u>Licensee Name</u>	<u>Insp. Frequency (Years)</u>	<u>Due Date</u>	<u>Months O/D</u>
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None

2. Do you currently have an action plan for completing overdue inspections? If so, please describe the plan or provide a written copy with your response to this questionnaire.

Not Applicable

3. Please identify individual licensees or groups of licensees the State/Region is inspecting more or less frequently than called for in NRC Inspection Manual Chapter 2800 and state the reason for the change.

Inspection frequencies are identified in RAM-01.09 of the Program's Policies and Procedures. Inspection frequencies are comparable to USNRC Manual Chapter 2800.

¹ Estimated burden per response to comply with this voluntary collection request: 53 hours. Forward comments regarding burden estimate to the Records Management Branch (T-6 F33), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, and to the Paperwork Reduction Project (3150-0183), Office of Management and Budget, Washington, DC 20503. If an information collection does not display a currently valid OMB control number, NRC may not conduct or sponsor, and a person is not required to respond to, the information collection.

The escalated inspection frequency changes are addressed in RAM-01.12 of the Program's Policy and Procedures. A majority of these licensees identified in Appendix A are a result of poor compliance with the Regulations and/or License Conditions.

See Appendix A

4. Please complete the following table for licensees granted reciprocity during the reporting period.

Priority	Number of Licensees Granted Reciprocity Permits Each Year			Number of Licensees Inspected Each Year		
Service Licensees performing teletherapy and irradiator source installations or changes	YR	1998		YR	1998	
	YR	1999	1	YR	1999	1
	YR	2000	1	YR	2000	1
	YR	2001	1	YR	2001	1
	YR	2002	1	YR	2002	1
1	YR	1998	9	YR	1998	7
	YR	1999	11	YR	1999	6
	YR	2000	9	YR	2000	5
	YR	2001	14	YR	2001	6
	YR	2002	7	YR	2002	4
2	YR	1998	3	YR	1998	1
	YR	1999	5	YR	1999	2
	YR	2000	9	YR	2000	6
	YR	2001	10	YR	2001	2
	YR	2002	6	YR	2002	3
3	YR	1998	14	YR	1998	9
	YR	1999	25	YR	1999	10
	YR	2000	18	YR	2000	4
	YR	2001	22	YR	2001	6
	YR	2002	13	YR	2002	5
4	NONE			NONE		
All Other	NONE			NONE		

The inspection frequency percentages are equivalent to those referenced in NRC Manual Chapter 1220, Appendix II. RAM-03.9 is the policy used to establish priority for inspection frequencies of reciprocity licensees working in Arkansas.

5. For NRC Regions, did you establish numerical goals for the number of inspections to be performed during this review period? If so, please describe your goals, the number of inspections actually performed, and the reasons for any differences between the goals and the actual number of inspections performed.

Not Applicable

II. Technical Quality of Inspections

6. What, if any, changes were made to your written inspection procedures during the reporting period?

The following Program Inspection Procedures were revised during the reporting period:

RAM-01.09 - "Assigning & Tracking Radioactive Material & Particle Accelerator Inspections" - 02/04/02

RAM-01.10 - "Inspection of Radioactive Materials & Particle Accelerator Licenses"- 02/04/02

RAM-01.11 - "Inspection Reports and Licensee Correspondence" - 02/04/02

RAM-01.12 - "Extension and Reduction of Inspection Frequencies" - 02/04/02

7. Prepare a table showing the number and types of supervisory accompaniments made during the review period. Include:

<u>Inspector</u>	<u>Supervisor</u>	<u>License Cat.</u>	<u>Date</u>
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See Appendix B

8. Describe internal procedures for conducting supervisory accompaniments of inspectors in the field.

Administrative Procedure; AD-06.010.0 is the internal procedure used for conducting supervisory accompaniments of inspectors in the field. Ideally each inspector is to be accompanied by a program leader/supervisor at least twice in a calendar year.

9. Describe or provide an update on your instrumentation and methods of calibration. Are all instruments properly calibrated at the present time? Were there sufficient calibrated instruments available through the review period?

Appendix C contains an updated list of radiation detection instrumentation that is available for use by the Program.

Some instrumentation is calibrated by the manufacturer or a consultant. The Health Physicists calibrate radiation detection equipment using the following procedures:

ES-01.3. "Calibration of Gamma Instruments (Dose Rate)"

ES-02.4. "Performing Operational Check of the Ludlum Model 43-5 Probe"

ES-02.5. "Performing Operational Check of the Ludlum Model 44-2 Probe"

ES-02.6. "Performing Operational Check of the Ludlum Model 44-9 Probe"

All instrumentation is calibrated at least annually or as specified by the manufacturer.

All instrumentation is properly calibrated at this time. A sufficient number of calibrated instrumentation was available to support the inspection program during the reporting period.

III. Technical Staffing and Training

10. Please provide a staffing plan, or complete a listing using the suggested format below, of the professional (technical) person-years of effort applied to the agreement or radioactive material program by individual. Include the name, position, and, for Agreement States, the fraction of time spent in the following areas: administration, materials licensing & compliance, emergency response, LLW, U-mills, other. If these regulatory responsibilities are divided between offices, the table should be consolidated to include all personnel contributing to the radioactive materials program. Include all vacancies and identify all senior personnel assigned to monitor work of junior personnel. If consultants were used to carry out the program's radioactive materials responsibilities, include their efforts. The table heading should be:

<u>Name</u>	<u>Position</u>	<u>Area of Effort</u>	<u>FTE%</u>
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See Appendix D

11. Please provide a listing of all new professional personnel hired since the last review, indicate the degree(s) they received, if applicable, and additional training and years of experience in health physics, or other disciplines, if appropriate.

A. ***Kim C. Wiebeck; B.S., Radiologic Technology, 32 hours completed, Master Level Courses in Nuclear Science (Louisiana State University 1989-1992). Five (5) years experience as a Radiation Therapist and Physicist at Cancer Treatment facilities. 8.5 years as a regulatory health physicist with the Arkansas Department of Health and Louisiana Department of Environmental Quality.***

B. ***Melinda C. Davis; Certificate in Radiologic Technology; 126 hours completed, B.S. in Radiologic Technology (University of Arkansas at Little Rock, 1974-1985); 20+ years of experience as a clinic radiologic technologist; Health Physicist experience as x-ray inspector with Arkansas Department of Health for 1 year. Health Physicist with Radioactive Materials Program since 1999.***

12. Please list all professional staff who have not yet met the qualification requirements of license reviewer/materials inspection staff (for NRC, Inspection Manual Chapters 1246; for Agreement States, please describe your qualifications requirements for materials license reviewers and inspectors). For each, list the courses or equivalent training/experience they need to attend and a tentative schedule for completion of these requirements.

Qualification Requirements for Arkansas

a. Materials License Inspectors

- (1) Work Experience**
 - (a) Within the Team's Materials Inspection Program, or, previous job experience.**
 - (b) On-the-job training.**
- (2) Formal Training Requirements**
 - (a) H-109 Applied Health Physics**
 - (b) S-301 RERO**
 - (c) G-108 Inspection Practices & Procedures**
 - (d) G-109 Licensing Practices & Procedures**
 - (e) H-304 Diagnostic & Therapeutic Medicine**
 - (f) H-305 Safety Aspects of Industrial Radiography**
 - (g) H-308 Transportation of Radioactive Materials**
 - (h) H-314 Safety Aspects of Well Logging**

b. Materials License Reviewers

- (1) Work Experience**
 - (c) Within the Team's X-Ray Compliance Section, or previous job experience.**
 - (d) On-the-job training.**
- (2) Formal Training Requirements**
 - (i) H-109 Applied Health Physics**
 - (j) S-301 RERO**
 - (k) G-108 Inspection Practices & Procedures**
 - (l) H-304 Diagnostic & Therapeutic Medicine**
 - (m) H-305 Safety Aspects of Industrial Radiography**
 - (n) H-308 Transportation of Radioactive Materials**
 - (o) H-314 Safety Aspects of Well Logging**

Melinda C. Davis must complete the Safety Aspects of Industrial Radiography (H-305) and Safety Aspects of Well Logging (H-314) to be a fully qualified Radioactive Materials Inspector/License Reviewer. Until she attends this training course, Mrs. Davis will be accompanied by a Program Qualified Health Physicist or the Program Leader on industrial radiography/well logging inspections.

These training courses will be completed within the training schedule of the Radiation Control & Emergency Management Team. This should be accomplished within 18-24 months.

13. Please identify the technical staff who left the RCP/Regional DNMS program during this period.

Jimmy L. Martin	Health Physicist	January 1999
Hamp R. Stokes	Health Physicist	November 1999
David D. Snellings	Division Director	July 2001

14. List the vacant positions in each program, the length of time each position has been vacant, and a brief summary of efforts to fill the vacancy.

There are no vacant positions in the Radioactive Materials Program.

IV. Technical Quality of Licensing Actions

15. Please identify any major, unusual, or complex licenses which were issued, received a major amendment, were terminated, decommissioned, submitted a bankruptcy notification or renewed in this period. Also identify any new or amended licenses that now require emergency plans.

No Arkansas Radioactive Material Licenses require emergency plans.

See Appendix E

16. Discuss any variances in licensing policies and procedures or exemptions from the regulations granted during the review period.

The following variances in licensing policies and procedures or exemptions from the regulations were granted during the review period:

- a) Use of Optically Stimulated Luminescent Dosimetry approved and exchange frequency defined - May 17, 1999***
- b) Two-person crew for industrial radiography licensees, the requirement for radiographers certification, and radiography equipment requirements to be compatible with USNRC regulations - March 3, 2000. Arkansas Rules and Regulations adopted these requirements effective July 1, 2002.***
- c) Administration of Iodine-131 dose greater than 30 millicuries outside a medical facility. This was done based on Conditions of Exemption to the University of Arkansas for Medical Science (ARK-001-INC-07-96) Radioactive Material License on January 4, 2001 to enhance health care for a difficult patient.***
- d) Changed frequency of survey meter calibration per request of industrial radiography licensee. Licensee performs radiography at a fixed permanent location and the frequency was changed from quarterly to semiannually. Licensee: Mid-State Pipe Fabricating, Inc. (ARK-749-BP-10-01) Letter dated January 19, 2001.***

- e) ***Administration of Iodine-131 dose greater than 30 millicuries outside a medical facility. This was done based on Conditions of Exemption to the University of Arkansas for Medical Science (ARK-001-INC-07-96) Radioactive Material License on January 24, 2002 to enhance health care for a difficult patient.***
17. What, if any, changes were made in your written licensing procedures (new procedures, updates, policy memoranda, etc.) during the reporting period?

The following Program Licensing Procedures were revised during the reporting period:

- RAM-01.1 "Amendment Request For Radioactive Material & Particle Accelerator Licenses" - 12/21/01***
- RAM-01.2 "Radioactive Material & Particle Accelerator New Licenses" - 12/21/01***
- RAM-01.3 "Radioactive Material & Particle Accelerator License Renewal" - 12/21/01***
- RAM-01.4 "Pre-Licensing Visits" - 12/21/01***
- RAM-01.5 "Guidance For Medical Advisory Committee Approval Requests" - 12/21/01***
- RAM-01.6 "Radioactive Material or Particle Accelerator License Termination & Decommissioning" - 12/21/01***
- RAM-01.7 "Radioactive Material License Reciprocity Guidelines" - 12/21/01***
- RAM-01.8 "Signature Authority For Radioactive Materials & Particle Accelerator Licenses & Amendments" - 12/21/01***
18. For NRC Regions, identify by licensee name, license number and type, any renewal applications that have been pending for one year or more. Please indicate why these reviews have been delayed.

Not Applicable

V. Responses to Incidents and Allegations

19. For Agreement States, please provide a list of the reportable incidents (i.e., medical misadministration, overexposures, lost and abandoned sources, incidents requiring 24 hour or less notification, etc. See Handbook on Nuclear Material Event Reporting in Agreement States for additional guidance.) that occurred during the review period. Information included in previous submittals to NRC need not be repeated (i.e., those submitted under OMB clearance number 3150-0178, Nuclear Material Events Database). The list should be in the following format:

<u>Licensee Name</u>	<u>License #</u>	<u>Date of Incident/Report</u>	<u>Type of Incident</u>
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See Appendix F

20. During this review period, did any incidents occur that involved equipment or source failure or approved operating procedures that were deficient? If so, how and when were other State/NRC licensees who might be affected notified? For States, was timely notification made to NRC? For Regions, was an appropriate and timely PN generated?

Yes, of the events listed, 4 involved spontaneous equipment failure and 3 involved failure of equipment due to damage caused by accidents, machinery or manufacturing processes.

IVB device failed to function as designed. Information Notice 02-02 sent to licensees who might be affected.

Information bulletin sent to fixed gauge licensees on 11/29/99.

Timely notification of these events was made to USNRC as required.

21. For Agreement States, for incidents involving failure of equipment or sources, was information on the incident provided to the agency responsible for evaluation of the device for an assessment of possible generic design deficiency? Please provide details for each case.

Letter dated July 26, 2002 notified State of Kentucky of the equipment failure at Albemarle Corporation. Incident date June 6, 2002.

22. Identify any changes to your procedures for handling allegations that occurred during the period of this review.

There has been no change for handling allegations. Procedure AD-06.9 is still in effect.

VI. General

23. Please prepare a summary of the status of the State's or Region's actions taken in response to the comments and recommendations following the last review. Describe the results of any program audits completed during the review period.

Recommendations

- A. "The review team recommends that the Division continue to implement the updated escalated enforcement procedure in order to enhance its compliance program."

RAM-3.8 has been implement and used frequently during the reporting period. The Program uses "Management Conferences" to resolve significant health and safety issues and serious compliance issues.

We consider this recommended item to be closed.

- B. "The review team recommends that the Division continue efforts to move its reciprocity inspection program towards the guidelines established in IMC 1220."

Procedure RAM-03.9 addresses the inspection frequency of reciprocity licensees. The percentage of licensees to be inspected are equivalent to NRC Manual Chapter 1220, Appendix II.

Since 1998, the number of reciprocity inspections conducted have been in accordance with the established percentages.

We consider this recommended item closed.

- C. "The review team recommends that the Division proceed expeditiously with its review and updating of compliance program guidance. (Section 3.2)"

This item remains open. Due to time and personnel constraints, efforts have been limited in the revision of Program Guidance.

We recognize the importance of this item and will implement an action plan to achieve this recommended item.

- D. "The review team recommends that the Division staff revise the license reviewer guidance, including checklists, to address comprehensive radiation protection program reviews, annual program audits, and the need for financial assurance. (Section 3.4)"

This item remains open. Due to time and personnel constraints, efforts to revise and update the license review guidance and checklist have been limited.

Currently, each renewal and new license application is reviewed for the comprehensive radiation protection reviews, annual program audits, financial assurance requirements, and emergency plans.

We recognize the importance of this item and will implement an action plan to achieve this recommended item.

- E. "The review team recommends that the State adequately document and closely follow the progress of investigations of incidents through close out. (Section 3.5)"

The Program has adequately documented and closed all incidents that occurred during the reporting period.

We consider this recommended item closed.

- F. "The review team recommends that the State continue to report events and participate in the NMED system by providing event information and close-out status to be added to the NMED system or by providing compatible information in accordance with the guidance contained in the "Handbook on Nuclear Event Reporting in the Agreement States"."

The Program has successfully reported all events for the reporting period in the NMED system. All events were detailed and appropriately closed out.

We consider this recommended item closed.

- G. "The review team recommends that, in order to maintain an effective SS&D evaluation program, one additional individual receive training in SS&D evaluations. (Section 4.2.2)"

The State of Arkansas relinquished the SS&D evaluation authority to NRC effective October 1, 1998.

We consider this recommended item closed.

- H. "The review team recommends that any events involving a defective device or source in a device, be evaluated for possible generic implications and such information passed on to the manufacturer and NRC."

The Program does evaluate defective devices or sources for possible generic implications and appropriate information is passed on to the manufacturer or the NRC.

We consider this recommended item closed.

Suggestions

- A. "The review team suggests that management continue to reevaluate progress and implement the Action Plan."

The Action Plan was used to identify and make over all improvement in the areas identified during the 1998 IMPEP. The Plan also helped in the improvements of the Program's efficiency and function.

- B. "The review team suggests that, for the purposes of compatibility, the State adopt the NRC regulations in 10 CFR 30.32(g) and 32.210."

These NRC regulations were adopted in the latest revision of the Arkansas Rules and Regulations effective July 1, 2002.

24. For NRC Regions, briefly describe any recent efforts, or future plans, on your part to: (1) improve the safety performance of licensees operating below acceptable levels for ensuring public health and protection, (2) increase the public confidence in your program, (3) increase your effectiveness, and efficiency, or (4) reduce any unnecessary regulatory burden for your stakeholders.

Not Applicable

25. Provide a brief description of your program's strengths and weaknesses. These strengths and weaknesses should be supported by examples of successes, problems or difficulties which occurred during this review period.

STRENGTHS

- ♦ Health Physics inspectors have demonstrated ability to perform thorough compliance inspections.
- ♦ Licensing actions are of continuing high technical quality.
- ♦ Customer service - good communication with licensees.
- ♦ Effectiveness of management conferences to implement corrective action plans, to improve radiation safety programs of licensees.
- ♦ Technical staff is competent and is willing to work; individuals have shown a desire to do a good job.
- ♦ Ability to manage response activities and incident investigations considering the limited number of staff.
- ♦ Minimal technical staff turnover during review period.
- ♦ Flexibility in initiating programmatic changes in policies and procedures.
- ♦ Ability of the program to make technical decisions in a team based environment.
- ♦ Ability to hire experienced, qualified technical personnel at above entry-level salary.
- ♦ Demonstrated Department management support for Program enforcement actions.

WEAKNESSES

- ♦ Inadequate professional staffing due to budgetary constraints over the past two fiscal years resulting in the loss of technical positions.
- ♦ Limited training opportunities for professional staff because of reduced funding for training.
- ♦ Existing resources challenged by a wide variety of responsibilities in addition to the regulatory programs, including radiological emergency response (both ANO and source-oriented), non-radiological emergency response (CSEPP, hazardous materials, natural disasters, etc.)
- ♦ Inadequate fee structure to support needed staffing.
- ♦ Lack of technical career ladder for health physicists.
- ♦ Performance/risk based inspections not fully implemented.
- ♦ Lack of dedicated licensing and inspection staff.
- ♦ Revisions of Rules and Regulations are too cumbersome and lengthy; the revision process is virtually continuous.
- ♦ Program Licensing Guidance is outdated.

B. NON-COMMON PERFORMANCE INDICATORS

I. Legislation and Program Elements Required for Compatibility

26. Please list all currently effective legislation that affects the radiation control program (RCP).
- a. Radiation Control: Statutes are Arkansas Code 20, Chapter 21 (reference Arkansas Code 1987 Annotated, Volume 20A, Title 20, Chapter 21).
- (1) Legislation:
- (a) Act 19 of 1983. Revised original enabling Legislative Act 8 of 1961 and included procedures to implement a civil penalties process.
 - (b) Act 504 of 1987. Enabled fees.
 - (c) Act 796 of 1995. Changed fees.

- b. Mammography Legislation:
 - (1) Act 292 of 1989. Mammography accreditation.
 - (2) Act 508 of 1995. MQSA compliance.
 - c. Nuclear Planning & Response Legislation:
 - (1) Act 101 of 1981. Amended original enabling legislative Act 67 of 1980 (placed program 100% within the Arkansas Department of Health).
 - (2) Act 536 of 1983. Established County Grant Program.
 - (3) Act 544 of 1983. Established Nuclear Planning & Response Program Advisory Committee.
 - d. Low Level Waste:
 - (1) Statutes:
 - (a) Arkansas Code 8, 201 et. Seq. (reference Arkansas Code 1987 Annotated, Volume 6A, Title 8, chapter 8).
 - (2) Legislation:
 - (a) Act 9 of 1983. Arkansas a member of the Central Interstate Compact.
 - (b) Act 929 of 1985. Established member and alternate.
 - (c) Act 562 of 1987. Defined LLW and required above-ground disposal facility.
 - (d) Act 847 of 1991. "Nebraska Amendments."
 - e. Radiologic Technologist Licensure Program
 - (1) Act 1071 of 1999. Radiologic Technologist Licensure Requirements for Healing Arts Professionals.
 - f. Appropriation Legislation:
 - (1) Act 1675 of 2001. Arkansas Department of Health's Appropriations Bill.
27. Are your regulations subject to a "Sunset" or equivalent law? If so, explain and include the next expiration date for your regulations.
- Arkansas Radiation Control Program Rules and Regulations are not subject to a "sunset" or equivalent law.***
28. Please complete the enclosed table based on NRC chronology of amendments. Identify those that have not been adopted by the State as detailed in the current RATS form, explain why they were not adopted, and discuss any actions being taken to adopt them. Identify the regulations that the State has adopted through legally binding requirements other than regulations.

See enclosed table.

29. If you have not adopted all amendments within three years from the date of NRC rule promulgation, briefly describe your State's procedures for amending regulations in order to maintain compatibility with the NRC, showing the normal length of time anticipated to complete each step.

The revision of the Arkansas Rules and Regulations with an effective date of July 1, 2002, meets the three year requirement for Agreement States to be compatible with NRC rules.

II. Sealed Source and Device Program

The State of Arkansas relinquished regulatory authority of the sealed source and device evaluation program to the NRC effective October 1, 1998.

30. Prepare a table listing new and revised SS&D registrations of sealed sources and devices issued during the review period. The table heading should be:

<u>SS&D Registry Number</u>	<u>Manufacturer, Distributor or Custom User</u>	<u>Product Type or Use</u>	<u>Date Issued</u>	<u>Type of Action</u>
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31. What guides, standards and procedures are used to evaluate registry applications?
32. Please include information on the following questions in Section A, as they apply to the Sealed Source and Device Program:

Technical Staffing and Training - A.III.10-14
Technical Quality of Licensing Actions - A.IV.15-18
Responses to Incidents and Allegations - A.V.19-22

III. Low-Level Waste Program **NOT APPLICABLE**

33. Please include information on the following questions in Section A, as they apply to the Low-level Waste Program:

Status of Materials Inspection Program - A.I.1-3, A.I.5
Technical Quality of Inspections - A.II.6-9
Technical Staffing and Training - A.III.10-14
Technical Quality of Licensing Actions - A.IV.15-18
Responses to Incidents and Allegations - A.V.19-22

IV. Uranium Mill Program **NOT APPLICABLE**

34. Please include information on the following questions in Section A, as they apply to the Uranium Mill Program:

Status of Materials Inspection Program - A.I.1-3, A.I.5

Technical Quality of Inspections - A.II.6-9

Technical Staffing and Training - A.III.10-14

Technical Quality of Licensing Actions - A.IV.15-18

Responses to Incidents and Allegations - A.V.19-22

TABLE FOR QUESTION 28.

10 CFR RULE	DATE DUE	DATE ADOPTED OR EFFECTIVE	OR	
			CURRENT STATUS	EXPECTED ADOPTION
Any amendment due prior to 1993. Identify each regulation (refer to the Chronology of Amendments)				
Emergency Planning; Parts 30, 40, 70	4/7/93	1/1/94		
Standards for Protection Against Radiation; Part 20	1/1/94	1/1/94		
Safety Requirements for Radiographic Equipment; Part 34	1/10/94	7/1/02		
Notification of Incidents; Parts 20, 30, 31, 34, 39, 40, 70	10/15/94	1/1/94 1/1/97		
Quality Management Program and Misadministrations; Part 35	1/27/95	1/1/94		
Licensing and Radiation Safety Requirements for Irradiators; Part 36	7/1/96	1/1/97 7/1/02	Minor revisions for criminal penalties	
Definition of Land Disposal and Waste Site QA Program; Part 61	7/22/96	N/A	No land disposal sites in Arkansas, prohibited by state law	
Decommissioning Recordkeeping: Documentation Additions; Parts 30, 40, 70	10/25/96	7/1/02	Additions to resolutions to address 61FR24669 and 62FR24669	
Uranium Mill Tailings: Conforming to EPA Standards; Part 40	7/1/97	N/A	No mill tailing facilities in Arkansas	
Timeliness in Decommissioning Parts 30, 40, 70	8/15/97	1/1/97 7/1/02	Partially referenced in 1/1/97 revision.	
Preparation, Transfer for Commercial Distribution, and Use of Byproduct Material for Medical Use; Parts 30, 32, 35	1/1/98	1/1/97 7/1/02	Partial adoption of Part 35 1/7/97. Revisions 7/1/02	
Frequency of Medical Examinations for Use of Respiratory Protection Equipment	3/13/98	1/7/97	RH - 1303 F.5.A. iii(e)	
Low-Level Waste Shipment Manifest Information and Reporting	3/1/98	7/1/02	Appendices F & G added	

10 CFR RULE	DATE DUE	DATE ADOPTED OR EFFECTIVE	OR	
			CURRENT STATUS	EXPECTED ADOPTION
Performance Requirements for Radiography Equipment	6/30/98	3/10/97 7/1/02	Information Notice by Regulation 7/1/02	
Radiation Protection Requirements: Amended Definitions and Criteria	8/14/98	7/1/02		
Medical Administration of Radiation and Radioactive Materials.	10/20/98	7/1/02		
Clarification of Decommissioning Funding Requirements	11/24/98	7/1/02		
10 CFR Part 71: Compatibility with the International Atomic Energy Agency	4/1/99	7/1/02		
Termination or Transfer of Licensed Activities: Recordkeeping Requirements.	6/16/99	7/1/02		
Resolution of Dual Regulation of Airborne Effluents of Radioactive Materials; Clean Air Act	1/9/2000	7/1/02		
Recognition of Agreement State Licenses in Areas Under Exclusive Federal Jurisdiction Within an Agreement State	2/27/2000	7/1/02		
Criteria for the Release of Individuals Administered Radioactive Material	5/29/2000	7/1/02		
Licenses for Industrial Radiography and Radiation Safety Requirements for Industrial Radiography Operations; Final Rule	6/27/2000	7/1/02		
Radiological Criteria for License Termination	8/20/2000	7/1/02		
Exempt Distribution of a Radioactive Drug Containing One Microcurie of Carbon-14 Urea	1/2/2001	7/1/02	Part 30	
Deliberate Misconduct by Unlicensed Persons	2/12/2001	7/1/02	Parts 30, 40, 61, 70, 150	
Licenses for Industrial Radiography and Radiation Safety Requirements for Industrial Radiographic Operations; Clarifying Amendments and Corrections	7/9/2001	3/10/97 7/1/02	Information Notice Parts 30, 34, 30, 70	

10 CFR RULE	DATE DUE	DATE ADOPTED OR EFFECTIVE	OR	
			CURRENT STATUS	EXPECTED ADOPTION
Minor Corrections, Clarifying Changes, and a Minor Policy Change	10/26/2001	7/1/02	Parts 20, 35, 36	
Transfer for Disposal and Manifest; Minor Technical Conforming Amendments	11/20/2001	7/1/02	Part 20	
Radiological Criteria for License Termination of Uranium Recovery Facilities	6/11/2002	7/1/02	Uranium Recovery Facilities Not Applicable, For other facilities decommissioning criteria added to regulations.	
Respiratory Protection and Controls to Restrict Internal Exposures	2/2/2003	7/1/02	Part 20	
Energy Compensation Sources for Well Logging and Other Regulatory Clarifications	5/17/03	7/1/02	Part 39	
New Dosimetry Technology	1/8/04		Portions have been addressed in the current revision and by Policy memo dated 1/13/99.	07/04
Requirements for Certain Generally Licensed Industrial Devices Containing Byproduct Material	2/16/04			07/04
Medical Use of Byproduct Material	4/24/05			07/05

**MATERIALS REQUESTED TO BE AVAILABLE FOR
THE ONSITE PORTION OF AN IMPEP REVIEW**

ORGANIZATION CHARTS

Clean, sized 8½ X 11" including names and positions

- ☐ One showing positions from Governor down to Radiation Control Program Director (RCPD)
- ☐ One showing positions of current radiation control program with RCPD as Head
- ☐ Equivalent charts for LLRW and mills programs, if applicable

LICENSE LISTS

- ☐ Printouts of current licenses, showing total, as follows:

Name	License #	Location	License Type	Priority	Last Inspection	Due Date
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Sort alphabetically

Also, sort by due date and by priority (if possible)

THE FOLLOWING LISTS

- ☐ List of open license cases, with date of original request, and dates of follow up actions
- ☐ List of licenses terminated during review period.
- ☐ Copy of current log or other document used to track licensing actions
- ☐ Copy of current log or other document used to track inspections
- ☐ List of Inspection frequency by license type
- ☐ List all incidents occurring during the review period. Show whether incident is open or closed and whether it was reported to the NRC
- ☐ List of all allegations occurring during the review period. Show whether the allegation is open or closed and whether it was referred by NRC
- ☐ List of all wrongdoings occurring during the review period. Show whether the allegation is open or closed

THE FOLLOWING DOCUMENTS

- ☐ All State regulations
- ☐ Statutes affecting the regulatory authority of the state program
- ☐ Standard license conditions
- ☐ Technical procedures for licensing, model licenses, review guides
- ☐ SS&D review procedures
- ☐ Instrument calibration records
- ☐ Inspection procedures and guides
- ☐ Inspection report forms
- ☐ Records of results of supervisory accompaniments of inspectors
- ☐ Emergency plan and communications list
- ☐ Procedures for investigating allegations
- ☐ Procedures for investigating incidents
- ☐ Enforcement procedures, including procedures for escalated enforcement, severity levels, civil penalties (as applicable)
- ☐ Copies of job descriptions
- ☐ Copies of audits or self audits conducted

ARKANSAS DEPARTMENT OF HEALTH
RADIATION CONTROL & EMERGENCY MANAGEMENT

APPENDIX A

<u>LICENSEE NAME</u>	<u>PRIORITY</u>	<u>REASON FOR CHANGE</u>
Angelo Iafrate Corporation	1	Compliance Issues
Atlas Asphalt, Inc.	1	Compliance Issues
Cardiovascular Associates of NEA	1	Multiple Use Locations
Cardiac & Vascular Center of Arkansas	1	Compliance Issues
City of Jonesboro	2	Compliance Issues
DECCO Contractors-Paving, Inc.	1	Compliance Issues
Drummond Asphalt Construction	2	Compliance Issues
Gaylord Container Company	2	Compliance Issues
Gilbert Central Corporation	1	Reciprocity/Compliance Issues
Graves & Associates	1	Compliance Issues
Grubbs, Hoskyn, Barton & Wyatt (ARK-456)	1	Compliance Issues
Grubbs, Hoskyn, Barton & Wyatt (ARK-899)	1	Compliance Issues
Harris Hospital	1	Allegations/Staff Turnover/Compliance
Hill & Hill Construction	2	Compliance Issues
Ideal Construction Company	2	Compliance Issues
International Paper Company	1	Staff Turnover/Compliance Issues
Jet Asphalt & Rock, Inc.	2	Compliance Issues
Materials Testing of Arkansas, Inc.	1	Compliance Issues
McClelland Consulting Engineers	1	Compliance Issues
McGeorge Contracting Company, Inc.	1	Compliance Issues
Medical Park Hospital	1	Compliance Issues
Newport Hospital	1	Staff Turnover/Compliance Issues
Randolph County Medical Center	1	Staff Turnover
R.D. Plant Contracting, Inc.	1	Incident/Compliance Issues
Siloam Springs Memorial Hospital	1	Compliance Issues
Terracon Consultants, Inc.	1	Compliance Issues

ARKANSAS DEPARTMENT OF HEALTH
RADIATION CONTROL & EMERGENCY MANAGEMENT

APPENDIX B

Cathey Bradley

10/23/1998	Medical	Jared Thompson
03/29/2001	Irradiator	Jared Thompson
07/02/2001	Medical	Jared Thompson
08/21/2002	Industrial	Jared Thompson

Gary Bortz

10/21/1998	Medical-Private Practice	Jared Thompson
01/20/1999	Portable Gauge	Jared Thompson
03/05/1999	Medical	Jared Thompson
06/22/1999	Medical-Private Practice	Jared Thompson
08/26/1999	Radiography - Field	Jared Thompson
09/10/1999	Portable Gauge	Jared Thompson
04/04/2000	Radiography - Field	Rick Kelley
04/25/2000	Radiography - Office	Jared Thompson
04/25/2000	Portable Gauge - Field	Jared Thompson
10/16-19/2000	Broad/Academic	Jared Thompson
09/26/2001	Portable Gauge	Jared Thompson
11/03/2001	Irradiator Source Shipment	Jared Thompson
07/02/2002	Radiography - Office	Jared Thompson

Lynn Davis

07/21/2000	Medical	Jared Thompson
09/24/2000	Medical	Jared Thompson
10/16-19/2000	Broad/Academic	Jared Thompson
10/24/2000	Medical	Bernard Bevill
07/24/2001	Radiography - Field	Jared Thompson
08/21/2001	Radiography - Field	Rick Kelley
12/14/2001	Radiography - Office	Jared Thompson
01/11 & 01/18/2002	Fixed Gauges	Rick Kelley
06/12/2002	Medical	Jared Thompson
06/12/2002	Nuclear Pharmacy - Field	Jared Thompson

Steve Mack

11/19/1998	Medical	Jared Thompson
04/18/2000	Wireline - Field	Jared Thompson
10/16-19/2000	Broad/Academic	Jared Thompson
07/16/2001	Wireline - Field	Jared Thompson
06/06/2002	Medical	Jared Thompson
06/06/2002	Nuclear Pharmacy - Field	Jared Thompson

Jim Martin

10/17/1998	Medical - Therapy	Jared Thompson
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Hamp Stokes

09/17/1998	Portable Gauge	Jared Thompson
10/09/1998	Academic	Jared Thompson
10/20/1998	Portable Gauge	Jared Thompson
12/02/1998	Gas Chromatography	Jared Thompson

Kim Wiebeck

06/25/1999	Medical - Therapy	Jared Thompson
11/23/1999	Medical	Bernard Bevill
01/05/2000	Medical	Jared Thompson
07/02/2001	Medical	Jared Thompson
06/11/2002	Medical-Private Practice	Jared Thompson

APPENDIX C

INSTRUMENTATION

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Yearly Schedule

<u>MAKE</u>	<u>MODEL</u>	<u>SERIALNO</u>	<u>MONTHDUE</u>
ALNOR	VELOMETER		February
Alnor		2770	February
Dosimeter	3096-3	36-1091	February
Gamma Industries	Mark I	6164	February
HI-Q	AFC-3	391	February
HI-Q	AFC-8	3885	February
LUDLUM	3	16252 with probe	February
LUDLUM	3	16300	February
LUDLUM	3	21928	February
LUDLUM	3	21951	February
LUDLUM	3	22056	February
LUDLUM	3	31684	February
LUDLUM	3	31754	February
LUDLUM	3	87343	February
LUDLUM	3	87410	February
LUDLUM	3	87448	February
LUDLUM	3	92704	February
LUDLUM	3	92768	February
LUDLUM	6	51840	February
LUDLUM	6	58141	February
LUDLUM	6	58153	February
LUDLUM	6	58159	February
LUDLUM	17	74524	February
LUDLUM	18	72834	February
LUDLUM	19	72163	February
LUDLUM	19	73497	February
LUDLUM	19	91559	February
LUDLUM	19	85958	February
LUDLUM	500	70651	February
LUDLUM	500	94933	February
RADCAL	10X5-1800	9888	February
RADCAL	10X5-1800	9900	February
RADCAL	10X5-1800	9902	February

.uary

<u>MAKE</u>	<u>MODEL</u>	<u>SERIALNO</u>	<u>MONTHDUE</u>
RADCAL	MDH/3036	36-0343	February
RADCAL	MDH/3036	36-0380	February
RADOS	RAD 50R	200781	February
RADOS	RAD 50R	200782	February
RADOS	RAD 50R	200785	February
RADOS	RAD 50R	992261	February
RADOS	RAD 50R	992262	February
RADOS	RAD 50R	992263	February
RADOS	RAD 50R	992264	February
RADOS	RAD 50R	992265	February
RADOS	RAD 50R	992266	February
Victoreen	8000	291	February

May

Yearly Schedule

<u>MAKE</u>	<u>MODEL</u>	<u>SERIALNO</u>	<u>MONTHDUE</u>
LUDLUM	3	16228	May
LUDLUM	3	16248	May
LUDLUM	3	16254	May
LUDLUM	3	16276	May
LUDLUM	3	31649	May
LUDLUM	3	31743	May
LUDLUM	3	62600	May
LUDLUM	3	62642	May
LUDLUM	3	62645	May
LUDLUM	3	62936	May
LUDLUM	3	92787	May
LUDLUM	3	124383	May
LUDLUM	6	63391	May
LUDLUM	6	63420	May
LUDLUM	6	63429	May
LUDLUM	6	63413	May
Ludlum	9	133732	May
Ludlum	9	133760	May
LUDLUM	17	36667	May
LUDLUM	17	93409	May
LUDLUM	19	91485	May
LUDLUM	500	63865	May
LUDLUM	500	70628	May
LUDLUM	500	94941	May
MDH	1015	3523	May
RADCAL	10X5-1800	9901	May
Victoreen	8000	310	May

gust

Yearly Schedule

<u>MAKE</u>	<u>MODEL</u>	<u>SERIALNO</u>	<u>MONTHDUE</u>
LUDLUM	12-4	140119	August
LUDLUM	43-10-1	133992	August
LUDLUM	43-5	P2379	August
LUDLUM	43-5	P2635	August
LUDLUM	43-5	P2779	August
LUDLUM	43-5	P2781	August
LUDLUM	43-5	P2877	August
LUDLUM	43-5	P2878	August
LUDLUM	43-5	P2879	August
LUDLUM	43-5	P2880	August
LUDLUM	43-5	P2881	August
LUDLUM	43-5	P2882	August
LUDLUM	43-5	PR-0363	August
LUDLUM	43-5	PR090797	August
LUDLUM	43-5	PR090798	August
LUDLUM	43-5	PR7637	August
LUDLUM	43-5	PR7638	August
LUDLUM	43-5	2355	August
LUDLUM	44-2	P0004	August
LUDLUM	44-2	P0014	August
LUDLUM	44-2	P0022	August
LUDLUM	44-2	P034044	August
LUDLUM	44-2	P063229	August
LUDLUM	44-2	P20408	August
LUDLUM	44-2	P2636	August
LUDLUM	44-2	P6220	August
LUDLUM	44-2	P6221	August
LUDLUM	44-2	P6226	August
LUDLUM	44-2	PR062302	August
LUDLUM	44-2	PR090802	August
LUDLUM	44-2	PR090803	August
LUDLUM	44-2	PR090804	August
LUDLUM	44-2	PR090805	August

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<u>MAKE</u>	<u>MODEL</u>	<u>SERIALNO</u>	<u>MONTHDUE</u>
LUDLUM	44-2	PR0008	August
LUDLUM	44-2	2635	August
LUDLUM	44-6	P015218	August
LUDLUM	44-6	P015221	August
LUDLUM	44-6	P015646	August
LUDLUM	44-6	P044291	August
LUDLUM	44-6	P044306	August
LUDLUM	44-6	P073477	August
LUDLUM	44-6	P078855	August
LUDLUM	44-6	P079139	August
LUDLUM	44-6	P30050	August
LUDLUM	44-6	P7009	August
LUDLUM	44-6	PR053656	August
LUDLUM	44-6	PR090794	August
LUDLUM	44-6	PR090796	August
LUDLUM	44-6	PR129258	August
LUDLUM	44-6	PR7008	August
LUDLUM	44-6	PR028073	August
LUDLUM	44-6	PR028074	August
LUDLUM	44-6	244	August
LUDLUM	44-6	10750	August
LUDLUM	44-6	15219	August
LUDLUM	44-6	15220	August
LUDLUM	44-6	53654	August
LUDLUM	44-6	53655	August
LUDLUM	44-6	79132	August
LUDLUM	44-6	90795	August
LUDLUM	44-6	96672	August
LUDLUM	44-6	106545	August
LUDLUM	44-9	PR018124	August
LUDLUM	44-9	PR018125	August
LUDLUM	44-9	PR018126	August
LUDLUM	44-9	PR018127	August
LUDLUM	44-9	PR018128	August
LUDLUM	44-9	PR018129	August

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<u>MAKE</u>	<u>MODEL</u>	<u>SERIALNO</u>	<u>MONTHDUE</u>
LUDLUM	44-9	PR018366	August
LUDLUM	44-9	PR018367	August
LUDLUM	44-9	PR018368	August
LUDLUM	44-9	PR018369	August
LUDLUM	44-9	PR018370	August
LUDLUM	44-9	PR018371	August
LUDLUM	44-9	PR065672	August
LUDLUM	44-9	PR065673	August
LUDLUM	44-9	PR075464	August
LUDLUM	44-9	PR075465	August
LUDLUM	44-9	PR075466	August
LUDLUM	44-9	PR075467	August
LUDLUM	3	13220 with probe	August
LUDLUM	3	16300	August
LUDLUM	3	21928	August
LUDLUM	3	21951	August
LUDLUM	3	22056	August
LUDLUM	3	31684	August
LUDLUM	3	31754	August
LUDLUM	3	87343	August
LUDLUM	3	87410	August
LUDLUM	3	87448	August
LUDLUM	3	92704	August
LUDLUM	3	92768	August
LUDLUM	6	51840	August
LUDLUM	6	58141	August
LUDLUM	6	58153	August
LUDLUM	6	58159	August
LUDLUM	17	36623	August
LUDLUM	17	38692	August
LUDLUM	17	38722	August
LUDLUM	19	73508	August
LUDLUM	19	85932	August
LUDLUM	19	91534	August
MDH	1015	2496	August

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<u>MAKE</u>	<u>MODEL</u>	<u>SERIALNO</u>	<u>MONTHDUE</u>
RADECO	H-809C	4645	August
RADECO	H-809C	4646	August
RADECO	H-809C	4647	August
RADECO	H-809C	4648	August
RADECO	H-809C	4649	August
RADECO	H-809C	4650	August
Victoreen	8000	309	August

ember

Yearly Schedule

<u>MAKE</u>	<u>MODEL</u>	<u>SERIALNO</u>	<u>MONTHDUE</u>
KEITHLEY	36150	21789	November
KEITHLEY	36150	21800	November
LUDLUM	3	16228	November
LUDLUM	3	16248	November
LUDLUM	3	16254	November
LUDLUM	3	16276	November
LUDLUM	3	31649	November
LUDLUM	3	31743	November
LUDLUM	3	62600	November
LUDLUM	3	62642	November
LUDLUM	3	62645	November
LUDLUM	3	62936	November
LUDLUM	3	92787	November
LUDLUM	3	124383	November
LUDLUM	6	63391	November
LUDLUM	6	63420	November
LUDLUM	6	63429	November
LUDLUM	6	63413	November
LUDLUM	17	36619	November
LUDLUM	17	36665	November
LUDLUM	19	73484	November
LUDLUM	19	73496	November
LUDLUM	19	85980	November
LUDLUM	19	85985	November
RADCAL	MDH/3036	36-0345	November
RADCAL	MDH/3036	36-0374	November
Victoreen	8000	96450	November

ARKANSAS DEPARTMENT OF HEALTH
RADIATION CONTROL & EMERGENCY MANAGEMENT

APPENDIX D

<u>NAME</u>	<u>POSITION</u>	<u>AREA OF EFFORT</u>	<u>FTE%</u>
Gary Bortz	Health Physicist	Inspections	60%
		Licensing	10%
		Emergency Response	10%
		Administrative	20%
Cathey Bradley	Health Physicist	Inspections	10%
		Licensing	60%
		Emergency Response	10%
		Administrative	20%
Lynn Davis	Health Physicist	Inspections	50%
		Licensing	20%
		Emergency Response	10%
		Administrative	20%
Steve Mack	Health Physicist	Inspections	35%
		Licensing	45%
		Emergency Response	10%
		Administrative	10%
Kim Wiebeck	Health Physicist	Inspections	35%
		Licensing	35%
		Emergency Response	10%
		Administrative	10%

Mrs. Wiebeck is a qualified Food and Drug Administration (FDA) Mammography inspector. She assists the Department's Mammography Team with the completion of the FDA inspection contract, approximately 10% of the FTE functions.

Jared Thompson	Program Leader	Inspections	15%
		Licensing	15%
		Emergency Response	10%
		Administrative	60%

Bernard Bevill	Team Leader	Inspections	5%
		Licensing	5%
		Emergency Response	10%
		Administrative	10%

Mr. Bevill is the Radiation Control & Emergency Management Team Leader which provides administrative support to the Radioactive Materials Program. He is involved with Radioactive Materials Program activities approximately 30% of the FTE functions.

Consultant

David D. Snellings, CHP was hired as a contract consultant beginning in January 2002. Mr. Snellings program responsibilities are in the area of licensing review and consultation of unusual requests. He is contracted to work 20 hours per week. He will also be revising licensing guidance and checklists.

Mr. Snellings is the former Director for the Division of Radiation Control and Emergency Management.

ARKANSAS DEPARTMENT OF HEALTH
RADIATION CONTROL & EMERGENCY MANAGEMENT

APPENDIX E

UNUSUAL/COMPLEX LICENSING ACTIONS

<u>Licensee</u>	<u>Action</u>	<u>Status</u>
Arkansas Children's Hospital	Renewal	Active
Baptist Medical Center (IVB)	Amendment	Active
CARTI (Mobile HDR)	Amendment	Active
CARTI (RAM Transportation)	Amendment	Active
Cat Clinic of Conway	New	Pending
Grasbey, STI	Termination	Terminated
Jefferson Regional Medical Center	Renewal	Pending
Northwest Medical Center	Renewal	Active
Northwest Medical Center (IVB)	Amendment	Active
St. Vincent Infirmary Med Ctr (Master License)	Renewal	Active
SteriGenics (dba Ion Beam Applications)	New	Active
University of Arkansas (ARK-064)	Amendment	Active
University of Arkansas (ARK-064)	Renewal	Pending
University of Arkansas at Little Rock	Renewal	Pending
University of Arkansas at Little Rock	Amendment	Active
University of Arkansas for Medical Sciences (UAMS)(Gamma Knife)	New	Active
UAMS/CARTI (Joint Brachytherapy Program)	Amendments	Active

ARKANSAS DEPARTMENT OF HEALTH
RADIATION CONTROL & EMERGENCY MANAGEMENT

APPENDIX F

<u>Licensee Name</u>	<u>License #</u>	<u>Date of Incident/Report</u>	<u>Type</u>
Coastal Unilube1	General License	09/23/1998-09/27/1998	Fire/damaged equipment
University of Arkansas for Medical Science	ARK-001-INC-07-96	09/11/1998-12/03/1998	Medical Misadministration
Anderson Engineering	ARK-519-BP-08-04	10/28/1998-10/28/1998	Stolen Gauge
Nucor Steel	Non-License	11/03/1998-11/03/1998	Lost RAM
Albany International	NRC#030-22487	11/30/1998-12/01/1998	Stolen Gauge
St. Edwards Mercy Medial Center	ARK-335-BP-06-96	12/07/1998-12/07/1998	Therapy Misadministration
Aquaterra Environmental	Louisiana #5382-L01	06/02/1999-06/03/1999	Damaged Device
Arkansas Children's Hospital	ARK-572-INC-09-08	09/29/1999-09/30-1999	Loss of Control of Radioactive Material
Material Testing of Arkansas	ARK-859-BP-03-02	02/23/2000-02/24/2000	Stolen Gauge
Halliburton Energy Services	ARK-319-BP-10-00	08/28/2000-08/29/2000	Source Lost Down Hole
Drew Memorial Hospital	ARK-482-BP-02-00	11/09/2000-11/14/2000	Stolen RAM
St. Joseph's Cancer Center	ARK-342-BP-04-02	03/07/2001-04/12/2001	Therapy Misadministration
R.D. Plant Contracting	ARK-756-BP-04-05	06/13/2001-06/14/2001	Lost/Stolen Gauge
Baptist Memorial Medical Center	ARK-409-BP-04-01	01/28/2002-02/04/2002	Over Exposure
Mid Coast Aviation	General License	07/01/2001-01/03/2002	Lost/Stolen Device
Green Bay Packaging, Inc.	ARK-197-BP-01-98	08/07/2001-08/08/2001	Poor Maintenance Procedure/Damage Device

ARKANSAS DEPARTMENT OF HEALTH
RADIATION CONTROL & EMERGENCY MANAGEMENT

APPENDIX F

<u>Licensee Name</u>	<u>License #</u>	<u>Date of Incident/Report</u>	<u>Type</u>
St. Bernard's Regional Medical Center	ARK-365-BP-07-97	09/17/2001-12/14/2001	IVB - Device Failure
St. Bernard's Regional Medical Center	ARK-365-BP-07-97	02/26/2002-03/07/2002	IVB - incorrect treatment site/Device Failure
Sparks Regional Medical Center	ARK-021-BP-11-05	03/13/2002-05/13/2002	IVB - Device Failure
Albemarle Corporation	ARK-717-BP-11-99	06/06/2002-06/06/2002	Equipment Failure
Jefferson Regional Medical Center	ARK-623-RA-10-96	05/10/2002-06/24/2002	Loss of control of radioactive material
University of Arkansas	ARK-064-INC-01-96	06/16/2002-06/17/2002	Loss of control of radioactive material (Spill)