

June 16, 1995

FE-07  
PUBLIC

DowElanco  
ATTN: Mr. Perry Gehring  
Vice President-R & D  
9330 Zionsville Rd  
Indianapolis, IN 46268

Dear Mr. Gehring:

This refers to the routine safety inspection conducted on May 17, 1995 with continuing in-office review through June 2, 1995 of activities authorized by NRC Byproduct Materials License No. 13-09639-05, and to the discussion of my findings with you, Mr. Socha and others of your staff at the conclusion of the onsite inspection.

The inspection was an examination of activities conducted under your license as they relate to radiation safety and to compliance with the Commission's rules and regulations and with the conditions of your license. The inspection consisted of a selective examination of procedures and representative records, observations, and interviews with personnel.

During this inspection, certain of your activities were found to be in violation of NRC requirements, as described in the enclosed Notice. A written response is required.

In accordance with 10 CFR 2.790 of the Commission's regulations, a copy of this letter, the enclosure, and your response to this letter will be placed in the NRC Public Document Room.

The response directed by this letter and the accompanying Notice are not subject to the clearance procedures of the Office of Management and Budget as required by the Paperwork Reduction Act of 1980, PL 96-511.

We will gladly discuss any questions you have concerning this inspection.

Sincerely,  
Original Signed By

Toye L. Simmons, Radiation Specialist  
Nuclear Materials Inspection Section 1

License No.: 13-26398-01  
Docket No.: 030-32714

Enclosure: Notice of Violation

cc w/encl: Greg E. Socha, RSO

bcc w/encl: PUBLIC

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NOTICE OF VIOLATION

DowElanco  
Indianapolis, Indiana

License No. 13-26398-01  
Docket No. 030-32714

During an NRC inspection conducted on May 17, 1995 with continuing in-office review through June 2, 1995, a violation of NRC requirements was identified. In accordance with the "General Statement of Policy and Procedure for NRC Enforcement Actions, "10 CFR Part 2, Appendix C, the violation is listed below:

10 CFR 20.1501(b) requires the licensee to ensure that instruments and equipment used for quantitative radiation measurements are calibrated periodically for the radiation measured.

Contrary to the above, as of May 17, 1995, instruments used by receiving personnel to comply with 10 CFR 20.1906 "Procedures for Receiving and Opening Packages," have not been calibrated for the radiation measured.

This is a Severity Level IV violation (Supplement VI).

Pursuant to the provisions of 10 CFR 2.201, DowElanco is hereby required to submit a written statement or explanation to the U. S. Nuclear Regulatory Commission, Region III, 801 Warrenville Road, Lisle, Illinois, 60532-4351, within 30 days of the date of the letter transmitting this Notice of Violation (Notice). This reply should be clearly marked as a "Reply to a Notice of Violation" and should include for each violation: (1) the reason the for the violation, or, if contested, the basis for disputing the violation, (2) the corrective steps that will be taken and the results achieved, (3) the corrective steps that will be taken to avoid further violations, and (4) the date when full compliance will be achieved. If an adequate reply is not received within the time specified in this Notice, an order or a demand for information may be issued as to why the license should not be modified, suspended, or revoked, or why such other action as may be proper should not be taken. Where good cause is shown, consideration will be given to extending the response time.

Dated at Lisle, Illinois  
this 16<sup>th</sup> day of June 1995

APPENDIX E

NOTE: All areas indicated in field notes are not required to be addressed during each inspection

INDUSTRIAL/ACADEMIC/RESEARCH INSPECTION FIELD NOTES  
Region III

Inspection Report No. 95001 License No. 13-26398-01  
Licensee (Name & Address): Docket No. 030-32714  
DowElanco  
9330 Zionville Rd/306 Building, E2-1010  
Indianapolis, IN 46269-1053  
Licensee Contact: Greg Socha Telephone No. (317)337-3151  
Last Amendment No. 06 Date of Amendment 03/24/95  
Priority: F1A-II  
Program Code 01100

Date of Last Inspection 11/18/92  
Date of This Inspection 5/17/95 with continuing in-office review thru 5/26/95

Type of Inspection: ( ) Announced (X) Unannounced  
(X) Routine ( ) Special  
( ) Initial ( ) Reinspection

Next Inspection Date 05/97 (X) Normal ( ) Reduced ( ) Extended  
Next inspection date was not extended- this was the first inspection with the licensee using RAM. Also no field work is being done at this time.

Summary of Findings and Action:

- ( ) No violations cited, Clear 591 issued
- ( ) Violation(s), 591 issued
- (X) Violation(s), Regional letter issued
- ( ) Followup on Previous Violations

Were non-cited violations identified during this inspection? ( ) Y (X) N

Was proprietary information reviewed by or received by the inspector? ( ) Y (X) N

Inspector: Jay Simmons Date 6/15/95  
(Signature)

Approved: [Signature] Date 6/16/95  
(Signature)

1. INSPECTION HISTORY

( ) N/A - Initial inspection

- A. Violations were identified during any of the last two inspections or two years, whichever is longer ( ) Y (X) N
- B. Response letter(s) or 591(s) dated 11/18/92 clear 591 issued

2. ORGANIZATION AND SCOPE OF PROGRAM

- A. Organizational Structure
  - \*Perry Gehring, Vice President/R& D
  - \*Paul Brownson, M. D., RSC Chairman - Corporate Medical Director
  - \*+Greg Socha, RSO
 (inspector interviewed numerous lab personnel and primary investigators during the course of this inspection)

+ Individuals contacted during inspection  
 \* Individuals present at exit meeting

- 1. Meets license requirements [L/C] (X) Y ( ) N
- 2. Multiple authorized locations of use and/or laboratories (X) Y ( ) N  
 If yes, may use ATTACHMENT A as a guide for location(s) or lab(s) inspected and note lab numbers where violations are found. (X) N/A
- 3. Briefly describe scope of activities, including types and quantities of use involving byproduct material, frequency of use, staff size, etc. There are 10 primary investigators and a total of about 150 RAM users. Licensee uses primarily

Since instituting this license field work has been performed at the Greenfield site. Licensee performed field work in 1993 in soil and several field applications in June 1994 (see attachment 1 for June 94 applications).

- B. Radiation Safety Committee required [L/C] (X) Y ( ) N
  - 1. RSC fulfills license requirements [L/C] (X) Y ( ) N
  - 2. Records maintained [L/C] (X) Y ( ) N
- C. Radiation Safety Officer
  - 1. Authorized on license [L/C] (X) Y ( ) N
  - 2. Fulfills duties as RSO (X) Y ( ) N
- D. Use by authorized individuals [L/C] (X) Y ( ) N

Remarks: Licensee as of this inspection actually has a small program using a limited amount of material for R&D and repeat product testing purposes.

3. TRAINING, RETRAINING, AND INSTRUCTIONS TO WORKERS

- A. Instructions to workers/students per [10 CFR 19.12] (X) Y ( ) N

Ex 2

B. Training program required [L/C] (X) Y ( ) N

1. If so, briefly describe training program:

"Radiation Safety for New Users of Loose Radioisotopes" a 4 hour course taught primarily by the RSO, using both instructional training and various types of audiovisuals. Course includes an exam.

2. Training program implemented (X) Y ( ) N

3. Periodic training program required (X) Y ( ) N

4. Periodic training program implemented (X) Y ( ) N

5. Records maintained (X) Y ( ) N

C. Individuals understanding of procedures and Regulations is adequate (X) Y ( ) N

1. Current operating procedures (X) Y ( ) N

2. Emergency procedures (X) Y ( ) N

3. Use of survey instrumentation (X) Y ( ) N

D. Revised Part 20

Workers cognizant of requirements for:

1. Radiation Safety Program [20.1101] (X) Y ( ) N

2. Annual dose limits [20.1301, 1302] (X) Y ( ) N

3. New forms 4 and 5 ( ) N/A (X) Y ( ) N

4. 10% monitoring threshold [20.1502] ( X Y ( ) N

5. Dose limits to embryo/fetus and declared pregnant worker [20.1208] (X) Y ( ) N

6. Grave Danger Posting [20.1902] (X) N/A ( ) Y ( ) N

7. Procedures for opening packages [20.1906] ( ) N/A (X) Y ( ) N

8. Sewer disposal limits [20.2003] (X) N/A ( ) Y ( ) N

**NOTE:** Deficiencies in this area, while not always a violation, should be brought to the attention of licensee management at the exit meeting and in the cover letter transmitting the inspection report or NOV.

**Remarks:** In discussions with various lab personnel- all seemed to be well aware of the RSO, the Radiation Safety Manual location, emergency numbers, and general laboratory safety procedures.

4. INTERNAL AUDITS, REVIEWS OR INSPECTIONS

A. Audits are required [L/C] (X) Y ( ) N

B. Audits or inspections are conducted (X) Y ( ) N

(1) Audits conducted by RSO

(2) Frequency All labs audited either semi annually or annually depending on the amount of RAM authorized to possess.

C. Content and implementation of the radiation protection program reviewed annually by the licensee [20.1101(c)] (X) Y ( ) N

D. Records maintained [20.2102] (X) Y ( ) N

5. FACILITIES

- A. Facilities as described in license application [L/C] (X) Y ( ) N
- B. Describe any Self-contained dry-source-storage irradiators [Part 36] and/or survey instrument calibrators (model, radionuclide, activity, use, etc.) (X) N/A

Remarks: Facilities at Indianapolis site appear as described in license documents.

6. MATERIALS

- A. Isotope, chemical form, quantity and use as authorized [L/C] (X) Y ( ) N
- B. Licensed materials secured to prevent unauthorized removal or access [20.1801, 1802] (X) Y ( ) N
- C. Leak tests and Inventories [L/C]
  - 1. Performed as required ( ) N/A (X) Y ( ) N
  - 2. Adequate analysis methodology and sensitivity ( ) N/A (X) Y ( ) N
  - 3. Records maintained [L/C] (X) Y ( ) N

7. RADIATION SURVEYS

- A. Instruments and equipment:
  - 1. Appropriate operable survey instrumentation possessed and readily accessible [L/C] (X) Y ( ) N
  - 2. Calibrated as required [20.1501, L/C] ( ) Y ( ) N
  - 3. Calibration records maintained [20.2103(a)] ( ) Y ( ) N
- B. Briefly describe area survey requirements [20.1501(a), L/C]: Lab surveys are performed either during the process, weekly or monthly depending upon how much and what type of material is being used. For example, [REDACTED] users survey during the procedure and following the procedure. EX 2
- C. Performed as required [20.1501(a), L/C] (X) Y ( ) N
  - 1. Contamination found (X) Y ( ) N
  - 2. Corrective action taken and documented (X) Y ( ) N
- D. Records maintained [20.2103, L/C] (X) Y ( ) N
- E. Protection of members of the public
  - 1. Licensee made adequate surveys to demonstrate either (1) that the TEDE to the individual likely to receive the highest dose does not exceed 100 mrem in a year, or (2) that if an individual were continuously present in an unrestricted area, the external dose would not exceed 2 mrem in any hour and 50 mrem in a year. [20.1301(a)(1), 1302(b)] (X) Y ( ) N
  - 2. Unrestricted area radiation levels do not exceed 2 mrem in any one hour [20.1301(a)(2)] (X) Y ( ) N
  - 3. Records maintained [20.2103, 2107] (X) Y ( ) N

8. RADIOACTIVE WASTE

( ) N/A

A. Disposal

( ) N/A

1. Decay-in-storage

( ) N/A

- a. Procedures approved [20.2001(a)(2), L/C] (X) Y ( ) N
- b. In accordance with [L/C] (X) Y ( ) N
- c. Labels removed or defaced [20.1904(b)] (X) Y ( ) N

- 2. Special procedures performed as required [L/C] (X) n/a
- 3. Liquid scintillation (LS) media and animal carcasses per [20.2005] (X) N/A ( ) Y ( ) N
- 4. Improper/unauthorized disposals [20.2001] (X) Y ( ) N
- 5. Records maintained [20.2103(a), 2108, L/C] (X) Y ( ) N

Licensee sent a total of [redacted] to Dow in Midland Michigan for incineration, instead of the [redacted] identified on the shipping papers. There <sup>was</sup> a transcription and addition error made by one of the lab personnel. The main error was misinterpreting millicuries for microcuries. As a result Dow in Midland exceeded its incinerator daily and weekly [redacted] burn activities. (See attachment 2) It appears that in spite of the additional [redacted] the DowElanco package still met the Limited Quantity requirements as defined in 49 CFR.

Ex 2

B. Effluents

( ) N/A

- 1. Release into sanitary sewer [20.2003] (X) N/A ( ) Y ( ) N
- 2. Release to septic tanks [20.2003] (X) N/A ( ) Y ( ) N
- 3. Waste incinerated ( ) N/A (X) Y ( ) N  
(waste incinerated by Dow at Midland Michigan)
- 4. Control of effluents and ashes [20.1201, 1301, 1501, 2001, L/C] {See also IP 87102, RG 8.37} (X) Y ( ) N

a. Compliance with air emissions requirements in Part 20:

Licensee has demonstrated compliance with air emission requirements in 10 CFR Part 20 (X) Y ( ) N

Basis for compliance determination (circle one or more; provide basis below)

- \_\_\_ (1) Measured concentrations of radionuclides in air effluents are below Appendix B, Table 2 concentrations (and external dose < 50 mrem/yr)
- \_\_\_ (2) Bounding calculations show that air effluents could not exceed Appendix B, Table 2 concentrations (and external dose < 50 mrem/yr)
- \_\_\_ (3) Dose modeling shows that dose equivalent to the individual likely to receive the highest dose does not exceed 10 mrem/yr
- X (4) Licensee does not possess sufficient

effluents  
Table 2

external dose < 50 mrem/yr)

radioactive material to  
exceed Part 20 requirements

Basis for Determination: As of this inspection, the licensee has not purchased enough materials to exceed Part 20 requirements. Also synthesis of [redacted] is performed with [redacted] or less in a relatively closed system. Volatiles are not normally used during the synthesis process. When used a breathing zone sample is taken. Of the 4 samples taken only one showed 2 mrem the rest were negative. Synthesis is not conducted for commercial distribution but more for internal testing, therefore, is not continuously performed.

EX-2

b. Description of effluent monitoring program

1. Monitoring system hardware equipment adequate ( ) Y ( ) N
2. Equipment calibrated as appropriate ( ) Y ( ) N
3. Air samples/sampling technique (charcoal, HEPA, etc.) analyzed with appropriate equipment ( ) Y ( ) N

Remarks: No routine air monitoring is performed (see above), however, work is performed in fumehoods which have filter banks. The filters and the airflow of the hoods is checked at least annually.

C. Waste Management ( ) N/A

1. Waste compacted [L/C] (X) Y ( ) N
2. Storage area(s) ( ) N/A
  - a. Protection from elements and fire [L/C] (X) Y ( ) N
  - b. Control of waste maintained [20.1801] (X) Y ( ) N
  - c. Containers properly labeled and area properly posted [20.1902, 1904] (X) Y ( ) N
  - d. Package integrity maintained [L/C] (X) Y ( ) N
3. Packaging, Control and Tracking [App. F.III] [20.2006(d)]:

Note: The licensee's waste is likely to be Class A.

- a. Not packaged for disposal in cardboard or fiberboard boxes [61.56(a)] (X) Y ( ) N
- b. Liquid wastes solidified, i.e., less than 1% freestanding liquid, and void spaces minimized [61.56(a), (b)] (X) Y ( ) N
- c. Does not generate harmful vapors [61.56] (X) Y ( ) N
- d. Structurally stable (will maintain its physical dimensions and form under expected disposal conditions) [61.56(b)] (X) Y ( ) N
- e. Packages properly labeled [App. F.III.A.2] (X) Y ( ) N
- f. Licensee conducts a QC program to ensure compliance with [61.55, 56] and includes



- management evaluation of audits  
 [App. F.III.A.3] not applicable ( ) Y ( ) N
- g. Shipments not acknowledged within 20 days  
 after transfer are investigated and  
 reported [App. F.III.A.8] (X) N/A ( ) Y ( ) N

4. Transfers to land disposal facilities (X) N/A

D. Records of surveys and material accountability are  
 maintained [20.2103, 2108] (X) Y ( ) N

Remarks: Licensee waste disposed of either by decay-in-storage for short-  
 lived material or (long-lived) it is shipped to Dow Chemical in  
 Midland Michigan for incineration. The waste storage facility is  
 very well managed.

9. RECEIPT AND TRANSFER OF RADIOACTIVE MATERIAL

- A. Describe how packages are received and by whom: ( ) N/A  
 Packages are received by receiving department personnel where all  
 other packages are received. These individuals survey and swipe the  
 packages before delivering them to the various labs.
- B. Written package opening procedures established  
 and followed [20.1906(e)] (X) Y ( ) N
- C. All incoming packages with DOT labels wiped, unless  
 exempted (gases and special form) [20.1906(b)(1)] (X) Y ( ) N
- D. Incoming packages surveyed per [20.1906(b)(2)] (X) Y ( ) N
- E. Monitoring in (C) and (D) above, performed within time  
 specified [20.1906(c)] (X) Y ( ) N
- F. Transfer(s) between licensees performed per [30.41] (X) Y ( ) N
- G. All sources surveyed before shipment and transfer  
 [20.1501(a), 49 CFR 173.475(i), L/C] (X) Y ( ) N
- H. Records of surveys and receipt/transfer maintained  
 [20.2103(a), 30.51] (X) Y ( ) N
- I. Transfers within licensee's authorized users  
 or locations performed as required [L/C] ( ) N/A (X) Y ( ) N
- J. Arrangements made for packages containing quantities  
 of radioactive material in excess of Type A  
 quantity [20.1906(a)] (not applicable) ( ) Y ( ) N
- K. Package receipt/distribution activities evaluated  
 for compliance with 20.1301 [20.1302] (X) N/A ( ) Y ( ) N

Remarks: Receiving department personnel perform wipes and direct package  
 surveys as required by license documents, however, the instruments  
 used have not been calibrated in accordance with ANSI standards (two  
 points on two scales with a known radiation standard) since at least  
 the last inspection in 1992. The instruments are checked each day  
 of use to determine operability. The licensee uses a pancake  
 probe/plancet setup to assay package wipe tests-this method is not  
 sufficient to obtain quantitative information nor is it sufficient  
 to detect tritium. The referenced license documents require that  
 only instruments used to assay sealed source leak tests and  
 laboratory wipe tests be calibrated annually. 10 CFR 20.1501 (b)  
 states that the licensee shall ensure that instruments and equipment

used for quantitative radiation measurements are calibrated periodically for the radiation measured. Contrary to the above, radiation instruments used to determine package wipe test results have not been calibrated since at least the last inspection

10. TRANSPORTATION (10 CFR 71.5(a) and 49 CFR 170-189) ( ) N/A
- A. Licensee shipments are:
- (X) delivered to common carriers
  - ( ) transported in licensee's own private vehicle
  - ( ) both
  - ( ) no shipments since last inspection
- B. HAZMAT training [172.700-704] N/A ( ) Y ( ) N.
- C. Packages ( ) N/A
- 1. Authorized packages used [173.415, 416(b)] (X) Y ( ) N
  - 2. Performance Test records on file NOT REVIEWED ( ) N/A
  - 3. COCs on file with NRC for Type B [71.12(c)(1)] N/A(X) Y ( ) N
  - 4. Two labels (White-I, Yellow-II, Yellow-III) with TI, Nuclide, Activity, and Hazard Class [172.403, 173.441] (X) Y ( ) N
  - 5. Properly marked (Shipping Name, UN Number, Package Type, RQ, "This End Up" (liquids), Name and Address of consignee) [172.301,306,310,312,324] ( ) Y ( ) N
  - 6. Closed and sealed during transport [173.475(f)] ( ) Y ( ) N  
5 & 6 WERE NOT REVIEWED
- D. Shipping Papers NOT REVIEWED ( ) N/A
- E. Vehicles (X) N/A
- F. Any incidents reported to DOT [171.15, 16] ( ) Y (X)
11. PERSONNEL RADIATION PROTECTION
- A. Licensee performed exposure evaluation [20.1501] (X) Y ( ) N
- B. Licensee incorporated ALARA considerations in the Radiation Protection Program [20.1101(b)] (X) Y ( ) N
- C. External Dosimetry ( ) N/A
- 1. Licensee monitors workers [20.1502(a), L/C] (X) Y ( ) N
  - 2. External exposures account for contributions from airborne activity [20.1203] (X) N/A ( ) Y ( ) N
  - 3. Supplier LANDAUER Frequency MONTHLY
  - 4. Supplier is NVLAP-approved [20.1501(c)] (X) Y ( ) N
  - 5. Dosimeters exchanged at required frequency [L/C] (X) Y ( ) N
- D. Internal Dosimetry ( ) N/A
- 1. Licensee monitors workers [20.1502(b), L/C] ( ) Y ( ) N
  - 2. Briefly describe licensee's program for monitoring and controlling internal exposures [20.1701, 1702, L/C]: Licensee personnel use fumehoods to handle radioactive materials. The hoods are checked at least

annually to assure proper airflow. Radiation surveys and swipes are performed frequently. The RSO conducts breathing zone sampling as needed.

- 3. Air sampling performed ( ) Y (X) N
- 4. Monitoring/controlling program implemented (X) Y ( ) N
- 5. Respiratory protection equipment [20.1703, L/C] ( ) Y (X) N

E. Reports ( ) N/A

- 1. Reviewed by RSO Frequency AS RECEIVED
- 2. Inspector reviewed personnel monitoring records for period 11/92 to 4/95
- 3. Prior dose determined for individuals likely to receive doses [20.2104] (X) Y ( ) N
- 4. Maximum exposures TEDE WB 0 Other Ext: 180 mrem
- 5. Maximum CDEs N/A Organs N/A
- 6. Maximum CEDE N/A
- 7. Licensee sums internal and external [20.1202] ( ) Y (X) N
- 8. TEDEs and TODEs within limits [20.1201] (X) Y ( ) N
- 9. NRC Forms or equivalent [20.2104(d), 2106(c)]
  - a. NRC-4 (X) Y ( ) N Complete: (X) Y ( ) N
  - b. NRC-5 (X) Y ( ) N Complete: (X) Y ( ) N
- 10. Worker declared her pregnancy in writing during inspection period (review records) (X) N/A ( ) Y ( ) N  
If yes, licensee in compliance with [20.1208] ( ) Y ( ) N  
and records maintained [20.2106(e)] ( ) Y ( ) N

F. Who performed PSEs at this facility (number of people involved and doses received) [20.1206, 2104, 2105, 2204] (X) N/A

G. Records of exposures, surveys, monitoring, and evaluations maintained [20.2102, 2103, 2106, L/C] (X) Y ( ) N

12. NRC INDEPENDENT MEASUREMENTS

A. Survey instrument	Serial No.	Last calibration
RAM GAM	046817	1/95

- B. Inspector's measurements were compared to licensee's (X) Y ( ) N
- C. Describe the type, location, and results of measurements:

THE FOLLOWING AREAS WERE SURVEYED BY THE INSPECTOR: [REDACTED] *EX 2*  
[REDACTED] *EX. 2*  
THE MAXIMUM READINGS WAS 0.03 MR/HR.

13. NOTIFICATION AND REPORTS ( ) N/A

- A. Licensee in compliance with [19.13, 30.50] (reports to individuals, public and occupational, monitored to show compliance with Part 20) (X) N/A ( ) Y ( ) N
- B. Licensee in compliance with [20.2201, 30.50] (theft or loss) (X) None ( ) Y ( ) N
- C. Licensee in compliance with [20.2202, 30.50] (incidents) (X) None ( ) Y ( ) N
- D. Licensee in compliance with [20.2203, 30.50] (overexposures and high radiation levels) (X) None ( ) Y ( ) N

- E. Licensee aware of NRC Ops Center phone number (X) Y ( ) N
14. POSTING AND LABELING
- A. NRC-3 "Notice to Workers" is posted [19.11] (X) Y ( ) N
- B. Parts 19, 20, 21, Section 206 of Energy Reorganization Act, procedures adopted pursuant to Part 21, and license documents are posted or a notice indicating where documents can be examined is posted [19.11, 21.6] (X) Y ( ) N
- C. Other posting and labeling per [20.1902, 1904] and the licensee is not exempted by [20.1903, 1905] (X) Y ( ) N

15. RECORDKEEPING FOR DECOMMISSIONING ( ) N/A
- A. Records of information important to the safe and effective decommissioning of the facility maintained in an independent and identifiable location until license termination [30.35(g)] (X) Y ( ) N
- B. Records include all information outlined in [30.35(g)] (X) Y ( ) N

16. BULLETINS AND INFORMATION NOTICES
- A. Bulletins, Information Notices, NMSS Newsletters, etc., received by the Licensee (X) Y ( ) N
- B. Licensee took appropriate action in response to Bulletins, Generic Letters, etc. (X) Y ( ) N

17. SPECIAL LICENSE CONDITIONS OR ISSUES ( ) N/A
- Issue: The licensee has been placed on hold for field studies until an environmental assessment (EA) study has been completed. HQ is handling the EA communications with the licensee.

18. CONTINUATION OF REPORT ITEMS (X) N/A

19. VIOLATIONS, NCVs, AND OTHER ISSUES ( ) N/A

Note: Briefly state (1) the requirement and (2) how and when the licensee violated the requirement. For non-cited violations, indicate why the violation was not cited.

10 CFR 1501(b) licensee failed to calibrate an instrument which is used for quantitative purposes. Error occurred because licensee not required by license documents to calibrate any instruments other than those used to assay sealed source leak tests and area smear tests.

20. DEBRIEF WITH LICENSING STAFF
- Inspection findings discussed with licensing staff ( ) N/A (X) Y ( ) N
- Items discussed: Inspector discussed past field uses of RAM with Patty Pelke and Susan Woods, NMSS-- Also gave both an overview of radiation safety program.

21. EPA REFERRAL FORM
- EPA referral form for air effluents sent to appropriate

22. PERFORMANCE EVALUATION FACTORS

- A. Lack of senior management involvement with the radiation safety program and/or Radiation Safety Officer (RSO) oversight ( ) Y (X) N
- B. RSO too busy with other assignments ( ) Y (X) N
- C. Insufficient staffing ( ) Y (X) N
- D. Radiation Safety Committee fails to meet or functions inadequately ( ) N/A ( ) Y (X) N
- E. Inadequate consulting services or inadequate audits ( ) N/A ( ) Y (X) N

Remarks (consider above assessment and/or other pertinent PEFs):  
Within the scope of this inspection, the program appears to be well managed by management, the RSO and the users.

Regional follow-up on above PEFs citations: