May 2, 2006

Dr. Theresa A. Maldonado, Deputy Director
Texas Engineering Experiment Station
Texas A&M University
1095 Nuclear Science Road
College Station, TX 77843-3575

SUBJECT: NRC ROUTINE INSPECTION REPORT NO. 50-128/2006-201

Dear Dr. Maldonado:

This letter refers to the inspection conducted on March 20-24, 2006, at your Nuclear Science Center Reactor Facility. The inspection included a review of activities authorized for your facility. The enclosed report presents the results of that inspection.

Areas examined during the inspection are identified in the report. Within these areas, the inspection consisted of selective examinations of procedures and representative records, interviews with personnel, and observations of activities in progress. Based on the results of this inspection, no safety concerns or noncompliances of NRC requirements were identified. No response to this letter is required.

In accordance with 10 CFR 2.390 of the NRC's "Rules of Practice," a copy of this letter and its enclosure will be available electronically for public inspection in the NRC Public Document Room or from the Publicly Available Records (PARS) component of NRC's document system (ADAMS). ADAMS is accessible from the NRC Web site at (the Public Electronic Reading Room) http://www.nrc.gov/reading-rm/adams.html.

Should you have any questions concerning this inspection, please contact Craig Bassett at (404) 562-4712.

Sincerely,

/RA/

Brian E. Thomas, Branch Chief
Research and Test Reactors Branch
Division of Policy and Rulemaking
Office of Nuclear Reactor Regulation

Docket No. 50-128
License No. R-83

Enclosure: NRC Inspection Report No. 50-128/2006-201
cc w/encl.: Please see next page

cc:

Mayor, City of College Station
P.O. Box Drawer 9960
College Station, TX 77840-3575

Governor's Budget and
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ATTN: Dr. Warren D. Reece, Director
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Texas State Department of Health
Radiation Control Program Director
Bureau of Radiation Control
Dept. of Health
1100 West 49th Street
Austin, Texas 78756-3189

Test, Research and Training
Reactor Newsletter
202 Nuclear Sciences Center
University of Florida
Gainesville, FL 32611

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DATE	4/25/06	4/25/06	5/2/06

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U. S. NUCLEAR REGULATORY COMMISSION
OFFICE OF NUCLEAR REACTOR REGULATION

Docket No:	50-128
License No:	R-83
Report No:	50-128/2006-201
Licensee:	Texas A&M University
Facility:	Texas Engineering Experiment Station Nuclear Science Center
Location:	College Station, TX
Dates:	March 20-24, 2006
Inspector:	Craig Bassett
Approved by:	Brian E. Thomas, Branch Chief Research and Test Reactors Branch Division of Policy and Rulemaking Office of Nuclear Reactor Regulation

EXECUTIVE SUMMARY

Texas A&M University
Texas Engineering Experiment Station
Inspection Report No. 50-128/2006-201

The primary focus of this routine, unannounced inspection was the onsite review of selected aspects of the licensee's Class II research reactor safety programs including: organization and staffing, review and audit and design change functions, procedures, radiation protection, environmental protection, and transportation of radioactive material since the last NRC inspection in these areas. The licensee's programs were directed toward the protection of public health and safety and were generally in compliance with NRC requirements.

Organization and Staffing

- The licensee's organization and staffing met requirements specified in Technical Specification Section 6.0.

Review and Audit, and Design Change Functions

- The Reactor Safety Board acceptably completed review, oversight, and audit functions required by Technical Specification Section 6.2.

- The licensee's design change program was in accordance with 10 CFR 50.59 and was being implemented as required.

Radiation Protection

- Periodic surveys were completed and documented as required by procedure.

- Postings and signs met regulatory requirements.

- Personnel dosimetry was being worn as required and recorded doses were generally within the NRC's regulatory limits.

- Radiation survey and monitoring equipment was being maintained and calibrated as required.

- The Radiation Protection and ALARA Programs satisfied regulatory requirements.

- Radiation protection training was acceptable.

Environmental Protection

- Effluent monitoring satisfied license and regulatory requirements and releases were within the specified regulatory and Technical Specification limits.

Transportation

- Radioactive material was being shipped in accordance with the applicable regulations.

REPORT DETAILS

Summary of Plant Status

The licensee's one megawatt, pool-type TRIGA research and test reactor continued to be operated in support of education, operator training, irradiation of various materials, laboratory experiments, and various types of research. During the inspection, the reactor was started, operated, and shut down as required and in accordance with applicable procedures to support these ongoing activities.

1. Organization and Staffing

a. Inspection Scope (Inspection Procedure [IP] 69001)

The inspector reviewed selected aspects of the following regarding the licensee's organization and staffing to ensure that the requirements specified in Section 6.1 of Technical Specifications (TS), Amendment No.15, dated November 1, 1999, were being met:

- organization and staffing for the Texas A&M Nuclear Science Center (NSC)
- Annual Report for the Texas A&M University Nuclear Science Center for 2004
- administrative controls and management responsibilities specified in TS Section 6.0
- NSC Standard Operating Procedure (SOP), Section I, Procedure C, "Administration," Revision (Rev.) 0, dated March 6, 1990

b. Observations and Findings

The organizational structure and functions of the Texas Engineering Experimental Station (TEES), NSC Reactor Facility had not functionally changed since the last inspection (refer to NRC Inspection Report No. 50-128/2005-201). The licensee's current organizational structure and assignment of responsibilities, as reported in the Annual Report, were consistent with those specified in the TS Section 6.1.1. All positions reviewed were filled with qualified personnel. Review of records verified that management responsibilities were administered as required by TS Section 6.1.2 and applicable procedures. However, it was noted that there had been changes in the staffing. The former Manager of Operations had been promoted to Associate Director. It was also noted that the former Reactor Supervisor had found other employment. A Senior Reactor Operator had been promoted to fill the Reactor Supervisor position but the licensee was planning to move that person into the Manager of Operations slot. When that move occurs, a vacancy will exist and the licensee will need to find or appoint a new Reactor Supervisor.

c. Conclusions

Despite recent personnel losses, the licensee's organization and staffing were in compliance with the requirements specified in TS Section 6.

2. Review and Audit, and Design Change Functions

a. Inspection Scope (IP 69001)

To verify that the licensee had established and conducted reviews and audits as required in TS Section 6.2 and to determine whether modifications to the facility, if any, were consistent with 10 CFR 50.59, the inspector reviewed:

- completed audits and reviews from 2004 through 2005
- design changes reviewed under 10 CFR 50.59 for 2004 and 2005
- Reactor Safety Board meeting minutes from 2004 through the present
- Annual Report for the Texas A&M University Nuclear Science Center for 2004
- NSC SOP, Section I, Procedure H, "Reactor Safety Board," dated March 6, 1990
- Modification Authorization Number M-55, "Log Power Drawer Replacement," dated May 29, 2005 and documented on NSC Form 519

b. Observations and Findings

(1) Review and Audit Functions

The inspector reviewed minutes of the last two Reactor Safety Board (RSB) meetings. The minutes showed that the committee met once per calendar year as required by TS Section 6.2.2.a and that a quorum was present for each meeting. The topics considered during the meetings were appropriate and as stipulated in TS Section 6.2.3. The RSB conducted audits and reviews of the ALARA program, the emergency preparedness and security plans, and the licensee's conformance of operations to the TS and maintenance items, as required by TS Section 6.2.4 and 6.2.5. Results of the audits were reviewed and recommendations for improvement were made. The inspector determined that the audit findings and licensee actions taken in response to the findings were acceptable.

(2) Design Change

The inspector determined that design changes at the NSC Reactor facility required a facility staff review followed by an RSB review and subsequent approval. Only one design change had been processed during the past year. It involved replacing the old Log Power Drawer with a functionally equivalent new one. The inspector reviewed the records and determined that the staff review had been performed as required and also that it had been reviewed and approved by the RSB. Training was conducted on the modification and the system was checked out prior to resumption of reactor operations. From the review, the inspector also determined that 10 CFR 50.59 reviews and approvals were focused on safety and met licensee program requirements. No safety significant issues were noted during the review and the modification did not involve a change to the TS.

c. Conclusions

The RSB acceptably completed review, oversight, and audit functions required by TS Section 6.2. The licensee's design change program was being implemented as required.

3. Radiation Protection Program

a. Inspection Scope (IP 69001)

The inspector reviewed selected aspects of the following to verify compliance with 10 CFR Parts 19 and 20 and TS Sections 3.5, 4.5, 5.4, and 6.6 requirements:

- Personnel dosimetry records for 2004 to 2005
- RSB meeting minutes from 2004 through the present
- RSB completed audits and reviews from 2004 through the present
- Annual Report for the Texas A&M University Nuclear Science Center for 2004
- various forms associated with the procedures mentioned below from 2004 to 2005
- NSC SOP Section VII, Procedure A-1, “Radiation Protection Program,” Rev. 3, dated December 4, 1997
- NSC SOP Section VII, Procedure A-3, “Reporting Requirements,” Rev. 2, dated December 19, 1999
- NSC SOP Section VII, Procedure A-6, “ALARA,” Rev. 0, dated February 25, 2002
- NSC SOP Section VII, Procedure B-3, “Daily Building Integrity Check,” Rev. 4, dated August 19, 2003
- NSC SOP Section VII, Procedure B-6, “Monthly Facility Air Monitoring,” Rev. 3, dated August 25, 1984
- NSC SOP Section VII, Procedure B-7, “Area Radiation Monitor,” Rev. 3, dated August 25, 1984
- NSC SOP Section VII, Procedure B-13, “Portable Survey Instrument Calibration and Operability Check,” Rev. 4, dated September 3, 1999
- NSC SOP Section VII, Procedure B-14, “Personnel Dosimeters,” Rev. 6, dated October 15, 1999 and Procedure Change Notice (PCN) dated August 28, 2002
- NSC SOP Section VII, Procedure C-4, “Radioactive Material Retained at the NSC,” Rev. 3, dated September 3, 1999
- NSC SOP Section VII, Procedure C-6, “Radioactive Material Storage,” Rev. 2, dated December 19, 1997
- NSC SOP Section VII, Procedure C-10, “Radioactive Materials Handling,” Rev. 2, dated December 19, 1997
- NSC SOP Section VII, Procedure C-11, “Site Survey,” Rev. 2, dated September 3, 1999
- NSC SOP Section VII, Procedure C-12, “Facility Radiation Survey,” Rev. 3, dated August 19, 2003
- NSC SOP Section VII, Procedure C-14, “Facility Contamination Surveys,” Rev. 3, dated December 4, 1997
- NSC SOP Section VII, Procedure D-1, “Health Physics Training,” Rev. 0, dated October 3, 1990
- NSC SOP Section VII, Procedure E-1, “Personnel Dosimetry,” Rev. 0, April 13, 1995
- NSC SOP Section VII, Procedure F-1, “Facility Air Monitor Configurations,” Rev. 0, dated May 10, 2000

b. Observations and Findings

(1) Surveys

The inspector reviewed selected monthly and other contamination and radiation surveys from 2005 through the present. The surveys had been completed by HP staff members as required and were documented as required by procedures.

Results were evaluated and corrective actions taken when readings/results exceeded the licensee's established limit of three times background. During the inspection the inspector accompanied a licensee representative during a radiation survey in the Upper Research Level of the Reactor Building. Proper techniques were used during the survey. The radiation levels noted were comparable to those detected during previous surveys in the area and no anomalies were noted.

(2) Postings and Notices

During tours of the facility, the inspector observed that caution signs, postings and controls in the controlled areas were acceptable for the hazards involving radiation, high radiation, and contaminated areas and were posted as required by 10 CFR 20, Subpart J. Through observations of and interviews with licensee staff, the inspector confirmed that personnel complied with the signs, postings, and controls. The facility's radioactive material storage areas were noted to be properly posted. No unmarked radioactive material was detected in the facility.

Copies of current notices to workers were posted in various areas in the facility. Radiological signs were typically posted at the entrances to controlled areas. Other postings also characterized the industrial hygiene hazards that were present in the areas as well. During one facility tour, the inspector noted that the copies of NRC Form-3, "Notice to Employees," that were posted at the facility, as required by 10 CFR Part 19.11, were not the current version. This issue was brought to the attention of the licensee and copies of the correct version were immediately retrieved from the Internet. The copies were then posted in various areas throughout the facility including the bulletin board in the hallway by each entrance to the facility, in the hallway of the Upper Research Level in the Reactor Building, and in the Lower Research Level of the Reactor Building. Caution signs, postings, and controls for radiation areas were as required in 10 CFR Part 20.

(3) Dosimetry

The inspector determined that the licensee used Optically Stimulated Luminescent (OSL) dosimeters for whole body monitoring of beta and gamma radiation exposure with an additional component to measure fast/thermal neutron radiation. The licensee used thermoluminescent dosimeter (TLD) finger rings for extremity monitoring. The inspector confirmed that dosimetry was being issued to staff and visitors as required by NSC SOP Section VII, Procedure E, "Personnel Dosimetry." The dosimetry was supplied and processed by a National Voluntary Laboratory Accreditation Program accredited vendor.

An examination of the OSL and TLD results indicating exposures to radiation at the facility for the past two years showed that the highest occupational doses, as well as doses to the public, were within 10 CFR Part 20 limitations. The records showed that the highest annual whole body exposure received by a single individual for 2004 was 856 millirem (mr) deep dose equivalent (DDE). The highest annual extremity exposure for that year was 3680 mr shallow dose equivalent (SDE). For 2005, the highest annual whole body exposure received by a single individual was 1036 mr DDE and the highest annual extremity exposure was 9380 mr SDE. The dosimetry results for 2006, to date, indicated that one individual had received an apparent

overexposure to the extremities. That issue was investigated and the results of the inspection were documented in a separate inspection report (refer to NRC Special Inspection Report No. 50-128/2006-203).

Through direct observation the inspector determined that dosimetry was acceptably used by facility personnel. Also, exit frisking practices were in accordance with facility radiation protection requirements.

(4) Radiation Monitoring Equipment

The calibration and periodic checks of the portable survey meters and radiation monitoring instruments were performed by the licensee's staff, Texas A&M calibration facilities, or certified contractors. The inspector confirmed that the licensee's calibration procedures and frequencies satisfied TS Section 4.3 and 10 CFR 20.1501(b) requirements. The inspector verified that the calibration and check sources used were traceable to the National Institute of Standards and Technology.

The inspector reviewed selected NSC instrument calibrations done 2005 and to date in 2006, and confirmed that the calibration of the portable survey meters in use had been completed as required. All instruments checked had current calibrations appropriate for the types and energies of radiation they were used to detect and/or measure. Calibrations of the permanently installed radiation area monitors and the facility air monitors were completed in accordance with requirements specified in TS Section 4.5 and the applicable procedures.

(5) Radiation Protection Program

The licensee's Radiation Protection and ALARA programs were established in NSC SOP Section VII, Procedure A-1, "Radiation Protection Program," NSC SOP Section VII, Procedure A-6, "ALARA," and through various related HP procedures. The programs had been reviewed and approved as required. The Radiation Protection and ALARA programs contained instructions concerning organization, training, monitoring, personnel responsibilities, audits, record keeping, and reports. The ALARA program provided objectives for keeping doses as low as reasonably achievable which was consistent with the guidance in 10 CFR Part 20. The programs, as established, appeared to be generally acceptable.

It appeared that the programs had not appreciably changed since the last NRC inspection. The licensee reviewed the programs at least annually as required by 10 CFR 20.1101(c). Review and oversight was provided by the RSO with the assistance of the RSB.

The licensee did not require or have a respiratory protection program.

(6) Radiation Work Permit Program

The inspector reviewed selected Radiation Work Permits (RWPs) that had been written, used, and closed out during 2004-2005 and selected RWPs that had been generated for use during 2005-2006. It was noted that the controls specified in the

RWPs were generally acceptable and applicable for the type of work being done. The RWPs had been initiated, reviewed, and approved as required.

c. Conclusions

The inspector determined that the Radiation Protection and ALARA Programs, as implemented by the licensee, satisfied regulatory requirements because: 1) surveys were generally completed and documented acceptably to permit evaluation of the radiation hazards present; 2) postings met regulatory requirements; 3) personnel dosimetry was being worn as required and recorded doses were within the NRC's regulatory limits; 4) radiation survey and monitoring equipment was being maintained and calibrated as required; and, 5) the Radiation Protection Program satisfied regulatory requirements.

4. Environmental Protection

a. Inspection Scope (IP 69001)

The inspector reviewed the following to verify compliance with the requirements of 10 CFR Part 20 and TS Sections 3.5, 3.7, 4.5, 5.4, and 6.6:

- effluent monitoring program results for 2005
- various gamma spectrum analyses for 2005
- counting and analysis records associated with airborne releases
- various forms associated with the procedures mentioned below from 2004 to 2005
- Annual Report for the Texas A&M University Nuclear Science Center for 2004 including the effluent monitoring program results for that period
- NSC SOP Section VII, Procedure B-8, "Stack Particulate Monitor," Rev. 3, dated October 15, 1999
- NSC SOP Section VII, Procedure B-9, "Stack Gas (Ar-41) Monitor," Rev. 3, dated September 3, 1999 and PCN dated August 29, 2002
- NSC SOP Section VII, Procedure B-9A, "Stack Gas (Xe-125) Monitor," Rev. 0, dated May 10, 2000 and PCN dated August 29, 2002
- NSC SOP Section VII, Procedure B-10, "Reactor Building Particulate Monitor," Rev. 5, dated October 15, 1999
- NSC SOP Section VII, Procedure B-11, "Reactor Building Gas Monitor," Rev. 4, dated September 3, 1999 and PCN dated August 29, 2002
- NSC SOP Section VII.B.18, Environmental Surveillance Program, Rev. 2, dated September 3, 1999
- NSC SOP Section VII, Procedure C-8, "Radioactive Liquid Waste System," Rev. 3, dated May 10, 2000
- NSC SOP Section VII, Procedure C-9, "Radioactive Liquid Waste Disposal," Rev. 3, dated May 10, 2000
- NSC HP Form 819a, "Radioactive Liquid Waste Disposal Record," latest form revision dated September 1998
- NSC Form 819A, "Nuclear Science Center Radioactive Liquid Effluent Releases - Monthly Summary," latest form revision dated January 2, 2001
- NSC HP Form 819B, "Nuclear Science Center Radioactive Particulate Effluent Releases," (updated quarterly) latest form revision dated March 14, 2006

- NSC HP Form 819C, "Nuclear Science Center Radioactive Gaseous Effluent Releases," (updated quarterly) latest form revision dated March 14, 2006
- NSC Form 819D, "Nuclear Science Center Radioactive Liquid Effluent Releases - Annual Summary," latest form revision dated May 12, 1994

b. Observation and Findings

On-site and off-site gamma radiation monitoring was completed using the reactor facility stack effluent monitor and area monitors, and various environmental monitoring TLDs, in accordance with the applicable procedures. Data indicated that there were no measurable doses above any regulatory limits. Observation of the facility by the inspector indicated no new potential release paths.

The inspector determined that gaseous releases continued to be monitored as required, were calculated according to established protocol, and were acceptably documented in the annual reports. The airborne concentrations of the gaseous releases were well within the annual dose constraints of 10 CFR 20.1101 (d), Appendix B concentrations, and TS limits. COMPLY code calculations indicated an effective dose equivalent to the public of 0.1 mr for 2004 and 0.4 mr for 2005. The highest total dose that could be received by a member of the general public due to facility operation was 1.16 mr for all of 2004 and 2.09 mr for 2005.

The licensee had released liquid from the Radioactive Liquid Waste Holding Tank on various occasions during the past two years. The Radiological Safety Officer reviewed and approved the releases after analysis proved that the releases met regulatory requirements for discharge. The principles of ALARA were acceptably implemented to minimize radioactive releases. Monitoring equipment was acceptably maintained and calibrated. Records were current and acceptably maintained.

c. Conclusion

Effluent monitoring satisfied TS and regulatory requirements and releases were within the specified regulatory limits. The environmental monitoring program was acceptable.

5. Inspection of Transportation Activities

a. Inspection Scope (IP 86740)

The inspector interviewed licensee personnel and reviewed the following records to verify compliance with regulatory and procedural requirements for shipping licensed radioactive material:

- training records of those qualified to ship radioactive material
- selected records of various types of radioactive material shipments documented on various forms including NSC Form 514, 852, and 854
- NSC SOP, Section VII, Procedure C-1, "Radioactive Material Inventory," Rev. 3, dated September 3, 1999
- NSC SOP, Section VII, Procedure C-2, "Radioactive Materials Released Off-Site," Rev. 2, dated December 20, 1994

- NSC SOP, Section VII, Procedure C-3, “Radioactive Materials Released From the NSC License,” Rev. 2, dated December 12, 1997
- NSC SOP, Section VII, Procedure C-5, “Radioactive Material Received,” Rev. 3, dated December 19, 1997
- NSC SOP, Section VII, Procedure C-7, “Radioactive Solid Waste Sorting,” Rev. 4, dated May 10, 2000

b. Observations and Findings

Through records review and discussions with licensee personnel, the inspector determined that the licensee had shipped various types of radioactive material since the previous inspection in this area. A review of the records of selected shipments indicated that the radioisotope types and quantities were calculated and dose rates measured as required. All radioactive material shipment records reviewed by the inspector had been completed in accordance with the applicable Department of Transportation (DOT) and NRC regulations.

The inspector verified that the licensee maintained copies of shipment recipients’ licenses to possess radioactive material as required and that the licenses were verified to be current prior to initiating a shipment. The training of the staff members responsible for shipping the material was also reviewed. The inspector verified that the shippers’ training met DOT requirements. The training program appeared to be extensive and conducted properly.

c. Conclusions

Radioactive material was being shipped in accordance with the applicable regulations.

6. Follow-up on Previous Open Items

a. Inspection Scope

The inspector reviewed the licensee's actions taken in response to a previously identified violation (VIO).

b. Observation and Findings

(Closed) VIO - 50-128/2004-201-01 - Failure to follow procedures during 2003 in that: 1) no radiation or contamination survey was completed of the Bridge (Upper Research Level) during August; and, 2) survey data was not recorded on the floor plan of the area being surveyed on four occasions.

While reviewing various radiation and contamination surveys during an inspection in April 2004, the inspector noted various discrepancies. A review of surveys of the Bridge (Upper Research Level) in the Reactor Building indicated that no radiation or contamination survey was completed of that area during August 2003. Further, a review of surveys of the Upper Research Level (South) in the Reactor Building indicated that no radiation survey data was recorded on the floor plan of this area during surveys conducted on June 23 and December 8, 2003. Also, a review of surveys of the Upper Research Level Mezzanine in the Reactor Building indicated that no radiation survey

data was recorded on the floor plan of this area during surveys conducted on September 3 and October 9, 2003.

During this inspection, the inspector carefully reviewed the radiation and contamination surveys of the above mentioned areas for 2005 and to date in 2006. It was noted that all the required information was recorded and the surveys were properly documented. No discrepancies were noted. Also, survey results were evaluated by the licensee and corrective actions taken when readings/results exceeded the licensee's established limit of three times background. This item is considered closed.

c. Conclusions

One violation was closed as the result of the licensee's corrective actions.

7. Exit Interview

The inspection scope and results were summarized on March 24, 2006, with licensee representatives. The inspector discussed the findings for each area reviewed. The licensee acknowledged the findings presented and did not identify as proprietary any of the material provided to or reviewed by the inspector during the inspection.

PARTIAL LIST OF PERSONS CONTACTED

Licensee

T. Fisher	Supervisor, Reactor Maintenance
D. Hibbing	Student Worker II
B. Pack	Technician II and Material Control Coordinator
D. Reece	Director, Nuclear Science Center
J. Remlinger	Associate Director, Nuclear Science Center
A. Urashkin	Duty Health Physicist
L. Vasudevan	Radiation Safety Officer, Health Physics

Other Personnel

C. Crenshaw,	Lieutenant, Texas A&M University Police Department

INSPECTION PROCEDURE USED

IP 69001	Class II Research and Test Reactors
IP 86740	Inspection of Transportation Activities

ITEMS OPENED, CLOSED, AND DISCUSSED

Opened

None

Closed

50-128/2004-201-01	VIO	Failure to follow procedures during 2003 in that: 1) no radiation or contamination survey was completed of the Bridge (Upper Research Level) during August; 2) survey data was not recorded on the floor plan of the area being surveyed on four occasions.

LIST OF ACRONYMS USED

ALARA	As low as reasonably achievable
CFR	Code of Federal Regulations
DDE	Deep dose equivalent
HP	Health Physics
IP	Inspection Procedure
NSC	Nuclear Science Center
NRC	Nuclear Regulatory Commission
mr	millirem
OSL	Optically stimulated luminescent
PCN	Procedure Change Notice
RSO	Radiation Safety Officer
RSB	Reactor Safety Board
SDE	Shallow dose equivalent
SRO	Senior Reactor Operator
TLD	Thermoluminescent dosimeter
TS	Technical Specifications
TEES	Texas Engineering Experiment Station
VIO	Violation