

UNITED STATES NUCLEAR REGULATORY COMMISSION

REGION IV 611 RYAN PLAZA DRIVE, SUITE 400 ARLINGTON, TEXAS 76011-4005

October 12, 2007

Thomas Newton, Director lowa Department of Public Health Lucas State Office Building 321 East 12th Street Des Moines, Iowa 50319

Dear Mr. Newton:

The U.S. Nuclear Regulatory Commission (NRC) uses the Integrated Materials Performance Evaluation Program (IMPEP) in the evaluation of Agreement State programs. Enclosed for your review is the draft IMPEP report, which documents the results of the Agreement State review held in Iowa on September 11-14, 2007. I was the team leader for the review. The review team's preliminary findings were discussed with you and your staff on the last day of the review. The review team's proposed recommendations are that the Iowa Agreement State Program be found adequate to protect public health and safety and compatible with NRC's program.

NRC conducts periodic reviews of Agreement State programs to ensure that public health and safety are adequately protected from the potential hazards associated with the use of radioactive materials and that Agreement State programs are compatible with NRC's program. The process, titled IMPEP, employs a team of NRC and Agreement State staff to assess Agreement State and NRC Regional radioactive materials programs. All reviews use common criteria in the assessment and place primary emphasis on performance. One additional area applicable to your program has been identified as a non-common performance indicator and is also addressed in the assessment. The final determination of adequacy and compatibility of each Agreement State program, based on the review team's report, is made by a Management Review Board (MRB) composed of NRC managers and an Agreement State program manager, who serves as a liaison to the MRB.

In accordance with procedures for implementation of IMPEP, we are providing you with a copy of the draft team report for your review and comment prior to submitting the report to the MRB. Comments are requested within four weeks from your receipt of this letter. This schedule will permit the issuance of the final report in a timely manner that will be responsive to your needs.

The team will review your response, make any necessary changes to the report, and issue it to the MRB as a proposed final report. Our preliminary scheduling places the lowa MRB meeting in the week of November 26, 2007. I will coordinate with you to establish the date for the MRB review of the lowa report. The NRC will provide invitational travel for you or your designee to attend the MRB meeting. The NRC has video conferencing capability if it is more convenient for

the State to participate through this medium. Please contact me if you desire to establish a video conference for the meeting.

If you have any questions regarding the enclosed report, please contact me at (817) 860-8143. Thank you for your cooperation.

Sincerely,

/RA/

Randy Erickson State Agreements Officer

Enclosure:

Draft Iowa IMPEP Report

cc w/encl:

Melanie Rasmusson, Chief Bureau of Radiological Health Iowa Department of Public Health Lucas State Office Building, 5th Floor 321 East 12th Street Des Moines, Iowa 50319

Mark Light, Supervisor Medical Licensing & Inspection (RAM) Ohio Department of Health 246 North High Street Columbus, Ohio 43215 T. Newton -3-

bcc (via ADAMS e-mail distribution):
RRErickson
JLLynch, RIII
KGNull, RIII
LDWert
CLCain
LMcLean
AMcCraw, FSME
KLukes, FSME

Pkg # ML072880456

SUNSI Review Completed: Yes ADAMS: X Yes Initials: RRE X Publicly Available X Non-Sensitive

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INTEGRATED MATERIALS PERFORMANCE EVALUATION PROGRAM REVIEW OF THE IOWA AGREEMENT STATE PROGRAM

September 11-14, 2007

DRAFT REPORT

1.0 INTRODUCTION

This report presents the results of the review of the lowa Agreement State Program. The review was conducted during the period of September 11-14, 2007, by a review team comprised of technical staff members from the U.S. Nuclear Regulatory Commission (NRC) and the State of Ohio. Team members are identified in Appendix A. The review was conducted in accordance with the "Implementation of the Integrated Materials Performance Evaluation Program and Rescission of Final General Statement of Policy," published in the *Federal Register* on October 16, 1997, and the February 26, 2004, NRC Management Directive 5.6, "Integrated Materials Performance Evaluation Program (IMPEP)." Preliminary results of the review, which covered the period of August 1, 2003, to September 14, 2007, were discussed with Iowa managers on the last day of the review.

[A paragraph on the results of the Management Review Board (MRB) meeting will be included in the final report.]

The Iowa Agreement State Program is administered by the Department of Public Health (the Department). The Department Director is appointed by and reports directly to the Governor. The Division of Environmental Health (the Division), within the Department, houses the Bureau of Radiological Health (the Bureau), which implements the radioactive materials program. Organization charts for the Department and the Division are included as Appendix B.

At the time of the review, the Bureau regulated 175 specific licenses authorizing Agreement materials. The review focused on the radioactive materials program as it is carried out under the Section 274b. (of the Atomic Energy Act of 1954, as amended) Agreement between the NRC and the State of Iowa.

In preparation for the review, a questionnaire addressing the common and applicable non-common performance indicator was sent to the Bureau on June 8, 2007. The Bureau provided its response to the questionnaire on July 20, 2007. A copy of the questionnaire response may be found in the NRC's Agencywide Documents Access and Management System (ADAMS) using the Accession Number ML072610135.

The review team's general approach for conduct of this review consisted of: (1) examination of the Bureau's response to the questionnaire; (2) review of applicable lowa statutes and regulations; (3) analysis of quantitative information from the Bureau's database; (4) technical review of selected regulatory actions; (5) three field accompaniments of two lowa inspectors; and (6) interviews with staff and managers to answer questions or clarify issues. The review team evaluated the information gathered against the established criteria for each common and applicable non-common performance indicator and made a preliminary assessment of the Agreement State program's performance.

Section 2.0 of this report covers the State's actions in response to recommendations made during the previous review. Results of the current review for the common performance indicators are presented in Section 3.0. Section 4.0 details the results of the review of the applicable non-common performance indicator, and Section 5.0 summarizes the review team's findings and recommendations. Recommendations made by the review team are comments

that relate directly to program performance by the State. A response is requested from the State to all recommendations in the final report.

2.0 STATUS OF ITEMS IDENTIFIED IN PREVIOUS REVIEWS

During the previous IMPEP review, which concluded on August 1, 2003, the review team made no recommendations in regard to program performance.

3.0 COMMON PERFORMANCE INDICATORS

IMPEP identifies five common performance indicators to be used in reviewing NRC Regional and Agreement State radioactive materials programs. These indicators are: (1) Technical Staffing and Training, (2) Status of Materials Inspection Program, (3) Technical Quality of Inspections, (4) Technical Quality of Licensing Actions, and (5) Technical Quality of Incident and Allegation Activities.

3.1 Technical Staffing and Training

Issues central to the evaluation of this indicator included staffing levels and turnover, in addition to staff technical qualifications and training histories. To evaluate these issues, the review team examined the Bureau's questionnaire response relative to this indicator; interviewed managers and staff; and reviewed job descriptions, training plans, and training records. The review team also considered any possible workload backlogs in evaluating this indicator.

The Bureau is comprised of seven regulatory programs, one of which is the Radioactive Materials Program (the Program). The Program is responsible for radioactive materials licensing, inspection, and emergency response activities. At the time of the review, the Program employed two technical staff members and two one administrative staff members. The technical staff members perform licensing and inspection activities. A former staff member, who currently works in the X-Ray Program, could be called upon to provide assistance to the Program, if needed.

The review team noted that staffing levels did not present any performance issues affecting implementation of the Agreement State program; however, loss of a technical staff member could potentially impact the Bureau's ability to remain current on all regulatory actions. This potential vulnerability was discussed with Department managers, who acknowledged the issue and indicated that they were researching future staffing solutions would assess staffing needs.

The Program's staffing was stable over the review period. The former Bureau Chief retired in November 2006, and one technical staff member transferred to the X-Ray Program in April 2007. The current Bureau Chief joined the program in February 2007. At the time of the review, there were no vacancies in the Program.

The Bureau has a documented training plan consistent with the guidance in the NRC/Organization of Agreement States Training Working Group Report and the NRC's Inspection Manual Chapter (IMC) 1246, "Formal Qualification Programs in the Nuclear Material Safety and Safeguards Program Area." The review team reviewed the Bureau's qualification process and noted that the training program consisted of classroom instruction, on-the-job

training, and in-house instruction. Qualification journals were maintained for each technical staff member. The Bureau Chief was supportive of and actively identified staff training opportunities. The Bureau had has three staff members who attended the NRC's Security Systems and Principles Course and were qualified to perform Increased Controls inspections. The review team concluded that the Bureau has an adequate, well-balanced, and adequately trained staff to carry out its regulatory responsibilities.

The review team noted that the Bureau was adequately funded. The Bureau is authorized to assess and collect fees for specific and general radioactive materials licenses, radiation machine registrations, industrial radiographer certifications, and medical radiological technologist certifications. As of July 2007, fees are deposited into a dedicated Bureau fund. The Department collects fees for the transportation of radioactive materials through the State. This fee was implemented to fund training for first responders who are responsible for responding to transportation accidents involving radioactive materials. Radiological training for first responders is performed by Bureau personnel.

The State Board of Health (the Board) is the policy making body for the Department. Its duties include the adoption and implementation of rules and regulations. The Board is comprised of nine members, five with experience in health-related disciplines and four representing the general public. The Department Director serves as Secretary of the Board. Iowa regulations prohibit Board members from engaging in outside employment or activities that are in conflict with the individual's official duties or responsibilities.

Based on the IMPEP evaluation criteria, the review team recommends that lowa's performance with respect to the indicator, Technical Staffing and Training, be found satisfactory.

3.2 Status of Materials Inspection Program

The review team focused on five factors while reviewing this indicator: inspection frequency, overdue inspections, initial inspections of new licenses, timely dispatch of inspection findings to licensees, and performance of reciprocity inspections. The review team's evaluation was based on the Bureau's questionnaire response relative to this indicator, data gathered from the Bureau's database, examination of completed inspection casework, and interviews with managers and staff.

The review team verified that the Bureau's inspection priorities for various license types were at least as frequent as similar license types listed in IMC 2800, "Materials Inspection Program." Thirteen of the 15 license categories established by the Bureau were assigned inspection priority codes that resulted in a more frequent inspection schedule than those established in IMC 2800.

The review team determined that the Bureau conducted approximately 110 Priority 1, 2, and 3 inspections and 26 initial inspections during the review period. None of these inspections were performed overdue by more than 25 percent of the inspection priorities listed in IMC 2800, nor were any inspections overdue at the time of the review.

To evaluate the Bureau's timeliness in providing inspection findings to licensees, the review team examined 20 inspection reports, covering a cross-section of the staff, and determined that

inspection findings were consistently communicated to licensees less than 30 days after the inspection.

Over the review period, the Bureau granted 163 reciprocity permits that were candidates for inspection based on the criteria in IMC 1220, "Processing of NRC Form 241 and Inspection of Agreement State Licensees Operating under 10 CFR 150.20." The review team determined that the Bureau met or exceeded the goal of inspecting 20 percent of all candidate licensees operating under reciprocity in each of the four years covered by the review period.

The review team determined that the Bureau adequately planned for the initial set of Increased Controls inspections of affected licensees. The review team evaluated the Bureau's prioritization methodology and found it acceptable. The Bureau identified 13 licensees who are subject to the Increased Controls and elected to perform all inspections by December 2006. The review team noted that all initial Increased Controls inspections and 10 followup inspections had been completed at the time of the review.

Based on the IMPEP evaluation criteria, the review team recommends that Iowa's performance with respect to the indicator, Status of Materials Inspection Program, be found satisfactory.

3.3 Technical Quality of Inspections

The review team evaluated inspection reports, enforcement documentation, inspection field notes, and interviewed inspectors for 20 radioactive materials inspections conducted during the review period. The casework examined included a cross-section of inspections conducted by three Bureau inspectors and covered a wide variety of inspection types, including: broad scope medical, industrial radiography, self-shielded irradiators, nuclear pharmacy, Increased Controls, and reciprocity. Appendix C lists the inspection casework files reviewed, as well as the results of the inspector accompaniments.

Based on the evaluation of casework, the review team noted that inspections covered all aspects of the licensees' radiation safety programs. The review team found that inspection reports were generally thorough, complete, consistent, and of high quality with sufficient documentation to ensure that licensees' performances with respect to health, safety, and security were acceptable. Inspection report documentation supported violations, recommendations made to licensees, verbal exchanges, unresolved safety issues, and discussions held with licensees during exit interviews.

The inspection procedures utilized by the Bureau are consistent with the inspection guidance found in IMC 2800. After the inspectors complete inspection reports, the reports are peer reviewed prior to being reviewed and signed by the Bureau Chief. Once signed, completed actions are promptly sent to the licensee. Findings were clearly stated and documented. The review team also noted that inspection correspondence involving the Increased Controls was appropriately labeled as sensitive information and withheld from public disclosure.

The Bureau requires licensees to respond to any violations within 30 days of issuance of a Notice of Violation. Before a Notice of Violation is issued, the Bureau contacts the licensee via telephone to ensure the licensee clearly understands the cited violations and is initiating corrective actions. This helps ensure that licensees respond to any cited violations in a timely

manner. All licensee responses are reviewed for adequacy by the inspector and the Bureau Chief. The review team recommends that the State's practice of contacting licensees prior to issuance of Notice of Violations are issued be identified as a good practice.

The review team noted that supervisor accompaniments of the inspection staff had not been consistently performed over the review period; however, all accompaniments had been brought up to date at the time of review. New procedures have been implemented to ensure that staff is accompanied at least annually.

The review team verified that the Bureau maintains an adequate supply of appropriately calibrated survey instrumentation to support its inspection program, as well as to respond to radioactive materials incidents and emergency conditions. The majority of survey instruments are calibrated by the Emergency Management Division Calibration Laboratory at 6-month intervals. The remaining instruments are sent to the manufacturer for calibration.

The review team accompanied two of the Bureau's inspectors during the week of August 27, 2007. Health and safety and Increased Controls inspections were performed at a self-shielded irradiator and an industrial radiography facility; and a health and safety inspection was performed at a nuclear pharmacy. Both inspectors demonstrated appropriate performance-based inspection techniques and knowledge of the regulations. The inspectors were well trained, prepared for the inspections, and thorough in their audits of the licensees' radiation safety programs. The inspectors conducted interviews with appropriate personnel, observed licensed operations, conducted confirmatory measurements, and utilized good health physics practices. The inspections were adequate to assess radiological health and safety and Increased Controls at the licensed facilities.

Based on the IMPEP evaluation criteria, the review team recommends that Iowa's performance with respect to the indicator, Technical Quality of Inspections, be found satisfactory.

3.4 Technical Quality of Licensing Actions

The review team examined completed licensing casework and interviewed license reviewers for 18 specific licenses. Licensing actions were reviewed for completeness, consistency, proper radioisotopes and quantities, qualifications of authorized users, adequate facilities and equipment, adherence to good health physics practices, financial assurance, operating and emergency procedures, appropriateness of license conditions, and overall technical quality. The casework was also reviewed for timeliness, use of appropriate deficiency letters and cover letters, reference to appropriate regulations, supporting documentation, consideration of enforcement history, pre-licensing visits, peer/supervisory review, and proper signatures. The casework was checked for retention of necessary documentation and supporting data.

The licensing casework was selected to provide a representative sample of licensing actions completed during the review period. Licensing actions selected for evaluation included three new licenses, eight renewals, two amendments, and five license terminations. Files reviewed included a cross-section of license types, including: medical diagnostic and therapy (including high dose-rate remote afterloaders), industrial radiography, portable and fixed gauges, academic and medical broad scope, research and development, and nuclear pharmacies. A listing of the licensing casework reviewed can be found in Appendix D.

The review team noted that licensing actions were generally thorough, complete, consistent, and of high quality, with health, safety, and security properly addressed. License conditions were clearly stated and supported by information contained in the license file. Licenses and correspondence were created using a standardized format, which included standardized license conditions. Licensing staff appropriately used the Bureau's licensing guides and policies. When appropriate, licensees' compliance histories were taken into account during licensing actions.

After a licensing action is initially completed by the license reviewer, a peer review of the action is performed. A final review is performed by the Bureau Chief. The license reviewer then signs out the action, and a concurrence signature by the Bureau Chief is attached. Licenses are issued for a 5-year term and can continue under timely renewal until the Bureau issues a renewed license. At the time of the review, the Bureau had six open licensing actions, with five of the six having been received in August or September 2007. All were on track to meet the Bureau's 30-day goal for processing licensing actions. A new license application was also pending completion at the time of the review and was expected to be issued by the end of October 2007.

The review team evaluated the Bureau's decommissioning financial assurance program and noted that the Bureau had identified nine licensees who are required to comply with lowa's financial assurance requirements. During the review of licensing casework, the review team identified an original financial assurance document in the license file. Two other license files contained only copies of the original financial assurance documents. The remainder of the files reviewed did not reveal either originals or copies of any financial assurance documents. The review team discussed the necessity of securing original financial assurance documents with Bureau staff and managers, and later with Department managers. The review team recommends that the State evaluate their decommissioning financial assurance program to identify and secure original financial assurance documentation from current and future licensees who are required to comply with lowa's financial assurance requirements.

The review team found that terminated licensing actions were well documented, showing appropriate material transfer and survey records. The review team noted that confirmatory surveys were conducted when appropriate.

Bureau staff conducts pre-licensing visits of new licensees to verify compliance with the Increased Controls requirements before a new license is issued. Pre-licensing visits of other licensees were not routinely being performed at the time of the review.

The review team examined the Bureau's licensing practices in regard to the Increased Controls. The team noted that the Bureau added legally-binding license conditions to the licenses that met the criteria for implementing the Increased Controls. The review team reviewed the Bureau's methodology for identifying those licenses and found the rationale was thorough and accurate, and that the Bureau had correctly identified those licenses requiring compliance with the Increased Controls. In May 2006, the Bureau amended their regulations to incorporate requirements for the Increased Controls and have removed the license conditions from affected licenses.

Based on the IMPEP evaluation criteria, the review team recommends that Iowa's performance with respect to the indicator, Technical Quality of Licensing Actions, be found satisfactory.

3.5 Technical Quality of Incident and Allegation Activities

In evaluating the effectiveness of the Bureau's actions in responding to incidents and allegations, the review team examined the Bureau's response to the questionnaire relative to this indicator, evaluated selected incidents reported for Iowa in the Nuclear Material Events Database (NMED) against those contained in the Bureau's files, and evaluated the casework for eight radioactive materials incidents. A listing of the casework examined, with case-specific comments, can be found in Appendix E. The review team also evaluated the Bureau's response to six allegations involving radioactive materials, including two allegations referred to the State by the NRC during the review period.

The incidents selected for review included medical events, lost radioactive material, damaged equipment, overexposures, and equipment failures. When notification of an incident is received, the Bureau Chief and staff determine the appropriate level of initial response. The review team determined that the Bureau's response to incidents was complete and comprehensive. Initial responses were prompt and well coordinated, and the level of effort was commensurate with the health and safety significance. The Bureau dispatched inspectors for on-site investigations in appropriate situations and took suitable enforcement and follow-up actions when necessary.

The review team identified 11 radioactive materials incidents in NMED for lowa during the review period of which eight required reporting. The review team evaluated the Bureau's timeliness in reporting incidents and found that, following notification from the licensee, the Bureau reported six of the eight incidents within the required time frame. Of the remaining two cases, one incident was not initially reported to the NRC Headquarters Operations Center due to confusion over jurisdiction, because the incident occurred directly on the State border with Minnesota. Only after Minnesota responded to the incident was it determined that the site was actually on the lowa side of the border. The other case was an oversight and resulted in the event information not being submitted for inclusion in NMED. The Bureau reported these two events to the NRC Headquarters Operations Center while the review team was on site.

Bureau staff members incorporate incident information into their incident database and provide that information electronically to the NRC's contractor responsible for maintaining NMED. The database is updated as needed. The review team found that incident information in NMED for lowa was up to date and complete, with the exception of the one incident noted above.

In evaluating the effectiveness of lowa's response to allegations, the review team evaluated the casework for two NRC referred allegations, as well as four other allegations reported directly to the State during the review period. The team's review found that the Bureau took prompt and appropriate action in response to all concerns raised. All of the allegations reviewed were appropriately closed, and affected individuals were notified of the actions taken. Although the Bureau makes every effort to protect an alleger's identity, lowa law requires that public documents be made available upon request.

Based on the IMPEP evaluation criteria, the review team recommends that Iowa's performance with respect to the indicator, Technical Quality of Incident and Allegation Activities, be found satisfactory.

4.0 NON-COMMON PERFORMANCE INDICATORS

IMPEP identifies four non-common performance indicators to be used in reviewing Agreement State Programs: (1) Compatibility Requirements; (2) Sealed Source and Device Evaluation Program; (3) Low-Level Radioactive Waste Disposal Program; and (4) Uranium Recovery Program. Iowa's Agreement does not cover a sealed source and device evaluation program, a low-level radioactive waste disposal program, or a uranium recovery program, so only the first non-common performance indicator was applicable to this review.

4.1 Compatibility Requirements

4.1.1 Legislation

lowa became an Agreement State on January 1, 1986. The statutory authority for the program is found in lowa Code, Chapter 136C. The Department is designated as the State's radiation control agency and the Bureau implements the radiation control program. The review team noted that no legislation affecting the radiation control program was passed during the review period.

4.1.2 <u>Program Elements Required for Compatibility</u>

The Iowa Regulations for Control of Radiation are found in Iowa Administrative Code, Section 641, Chapters 38-45, and apply to radioactive materials and devices designed to produce radiation. The Bureau requires a license for possession and use of all radioactive material, including naturally-occurring materials, such as radium, and accelerator-produced radionuclides.

The review team examined the State's administrative rulemaking process and found that it takes approximately 5 months after filing the draft administrative rule with the State Rules Coordinator until a final rule is adopted. Draft rules are published in the State Administrative Bulletin and a public hearing is scheduled. Rules are presented to the Board prior to being adopted. The State has Emergency Rule capability if public health and safety are at risk. State rules and regulations are not subject to "sunset" laws.

Proposed rules are sent to impacted licensees for comment and to NRC for compatibility review. Comments are considered and incorporated, as appropriate, before rules are finalized. The State has the authority to issue legally-binding requirements (e.g., license conditions) until equivalent State rules become effective.

The review team evaluated the Bureau's response to the questionnaire relative to this indicator, reviewed the status of regulations required to be adopted by the State under the Commission's adequacy and compatibility policy, and verified the adoption of regulations with data obtained from the Office of Federal and State Materials and Environmental Management Programs' State Regulation Status Sheet.

Since the previous review, the State has adopted 21 regulation amendments. The review team noted that, with the most recent rulemaking package, the State is up to date on all NRC amendments. The State submitted a package for a compatibility review of final regulations on

July 12, 2007. The NRC transmitted the results of it compatibility review via letter on September 24, 2007. As a result of the review, the NRC identified 11 comments on the final regulations.

Based on the IMPEP evaluation criteria, the review team recommends that lowa's performance with respect to the indicator, Compatibility Requirements, be found satisfactory.

5.0 SUMMARY

As noted in Sections 3.0 and 4.0, the review team found lowa's performance to be satisfactory for all six performance indicators reviewed. The review team made one recommendation regarding program performance. Accordingly, the review team recommends that the lowa Agreement State Program be found adequate to protect public health and safety and compatible with NRC's program. Based on the results of the current IMPEP review, the review team recommends that the next full IMPEP review take place in approximately 4 years.

Below is the recommendation, as mentioned earlier in the report, for evaluation and implementation, as appropriate, by the State.

The review team recommends that the State evaluate their decommissioning financial assurance program to identify and secure original financial assurance documentation from current and future licensees who are required to comply with lowa's financial assurance requirements. (Section 3.4)

GOOD PRACTICE

Before a Notice of Violation is issued, the Bureau contacts the licensee via telephone to ensure the licensee clearly understands the cited violations and is initiating corrective actions. This helps ensure that licensees respond to any cited violations in a timely manner.

LIST OF APPENDIXES

Appendix A IMPEP Review Team Members

Appendix B Iowa Organization Charts

Appendix C Inspection Casework Reviews

Appendix D License Casework Reviews

Appendix E Incident Casework Reviews

APPENDIX A

IMPEP REVIEW TEAM MEMBERS

Name	Area of Responsibility
Randy Erickson, Region IV	Team Leader Compatibility Requirements
James Lynch, Region III	Technical Staffing and Training Technical Quality of Incident and Allegation Activities
Mark Light, Ohio	Status of Materials Inspection Program Technical Quality of Inspections
Anthony Gaines, Region IV	Inspector Accompaniments
Kevin Null, Region III	Technical Quality of Licensing Actions

APPENDIX B

IOWA ORGANIZATION CHARTS

ADAMS ACCESSION NO.: ML072610081

PAGES 1 and 6

APPENDIX C

INSPECTION CASEWORK REVIEWS

NOTE: CASEWORK LISTED WITHOUT COMMENT IS INCLUDED FOR COMPLETENESS ONLY.

File No.: 1

Licensee: Keokuk Steel Casings License No.: 0341-1-56-IR2

Inspection Type: Routine/Special, Unannounced Priority: 2

Inspection Date: 8/1/07 Inspector: RD

File No.: 2

Licensee: Stork Twin City Testing License No.: 0316-1-77-IR1

Inspection Type: Routine/Special, Unannounced Priority: 1
Inspection Date: 8/28/07 Inspector: RD

File No.: 3

Licensee: WOS Testing, Inc License No.: 0253-1-57-IR1

Inspection Type: Special, Unannounced Priority: 1

Inspection Date: 8/14/07 Inspector: RD

File No.: 4

Licensee: Cardinal Health, Inc License No.: 0043-1-77-NP

Inspection Type: Routine, Unannounced Priority: 2
Inspection Dates: 8/29/07 Inspector: NF

File No.: 5

Licensee: Iowa State University License No.: 0014-1-85-AAB

Inspection Type: Routine, Unannounced Priority: 2

Inspection Date: 6/8/05 Inspector: NF FN

File No.: 6

Licensee: Trinity Medical Center-Terrace Park License No.: 0118-1-82-M1

Inspection Type: Routine, Unannounced Priority: 3

Inspection Date: 5/2/07 Inspector: RD

File No.: 7

Licensee: The Blood Center of Central Iowa License No.: 0133-1-77-I1

Inspection Type: Routine, Special, Unannounced Priority: 5

Inspection Date: 8/30/07 Inspector: NF

File No.: 8

Licensee: Advanced Diagnostic Imaging, Inc. License No.: 0335-1-07-M1

Inspection Type: Initial, Unannounced Priority: 3

Inspection Date: 2/21/06 Inspector: RD

Inspection Casework Reviews

File No.: 9

Licensee: Mercy Medical Center License No.: 0339-1-57-HDR

Inspection Type: Routine, Unannounced Priority: 2 Inspection Date: 10/3/06

Inspector: NF

File No.: 10

Licensee: Fansteel-Wellman Dynamics Corporation License No.: 0103-1-88-SM1

Inspection Type: Routine, Unannounced Priority: 2 Inspection Date: 6/19/06

Inspector: DM

File No.: 11

Licensee: Iowa Methodist Medical Center. License No.: 0077-1-77-M1

Inspection Type: Routine, Unannounced Priority: 3 Inspection Date: 1/24/07 Inspector: NF

File No.: 12

Licensee: University of Iowa License No.: 0037-1-52-AAB

Inspection Type: Routine/Special, Unannounced Priority: 2 Inspection Date: 10/12/06 Inspectors: RD, NF

File No.: 13

License No.: 0286-1-82-GK Licensee: Genesis Medical Center

Inspection Type: Routine/Special, Unannounced Priority: 2 Inspection Date: 7/10/07 Inspector: RD

File No.: 14

License No.: 0034-1-82-M1 Licensee: Genesis Medical Center

Inspection Type: Routine, Unannounced Priority: 3 Inspection Dates: 8/23-25/05 Inspector: RD

File No.: 15

Licensee: Mercy Medical Center-Des Moines License No.: 0008-1-77-M1

Inspection Type: Routine, Announced Unannounced Priority: 3 Inspection Date: 6/22/07 Inspector: NF

File No.: 16

Licensee: Iowa Methodist Medical Center. License No.: 0310-1-77-HDR

Inspection Type: Routine, Announced Unannounced Priority: 2 Inspection Date: 8/6/06 Inspector: NF

File No.: 17

Licensee: St. Anthony's Regional Health Center License No.: 0313-1-14-HDR

Inspection Type: Routine, Unannounced Priority: 2

Inspection Date: 11/1/06 Inspector: DM

Inspection Casework Reviews

File No.: 18

Licensee: Team Industrial Services, Inc License No.: 9009-1-00-IR1

Inspection Type: Reciprocity Priority: 1 Inspection Date: 9/5/07

Inspector: RD

File No.: 19

Licensee: American Engineering Testing, Inc. License No.: 9102-1-00-IR1

Inspection Type: Reciprocity Priority: 1 Inspection Date: 8/22/05 Inspector: NF

File No.: 20

Licensee: DBI, Incorporated License No.: 9106-1-00-IR1

Inspection Type: Reciprocity Priority: 1 Inspection Date: 9/22/06 Inspector: RD

INSPECTOR ACCOMPANIMENTS

The following inspector accompaniments were performed prior to the on-site IMPEP review:

Accompaniment No.: 1

Licensee: Stork/Twin Cities Testing License No.: 0316-1-77-IR1 Inspection Type: Routine/Special, Unannounced Priority: 1 Inspection Date: 8/28/07

Inspector: RD

Accompaniment No.: 2

Licensee: Cardinal Health. Inc. License No.: 0043-1-77-NP

Inspection Type: Routine, Unannounced Priority: 2

Inspection Date: 8/29/07 Inspector: RD NF

Accompaniment No.: 3

Licensee: The Blood Center of Central Iowa License No.: 0133-1-77-I1

Inspection Type: Routine/Special, Unannounced Priority: 5 Inspection Date: 8/30/07 Inspector: NF

APPENDIX D

LICENSE CASEWORK REVIEWS

NOTE: CASEWORK LISTED WITHOUT COMMENT IS INCLUDED FOR COMPLETENESS ONLY.

File No.: 1

Licensee: St. Anthony's Regional Medical Center

Type of Action: Renewal

Date Issued: 11/29/05

License No.: 0313-1-14-HDR

Amendment No.: N/A

License Reviewer: RD

File No.: 2

Licensee: BASF Plant Sciences, LLC

Type of Action: Termination

Date Issued: 3/29/06

License No.: 0287-1-85-RD2

Amendment No.: 02

License Reviewer: RD

File No.: 3

Licensee: Medical Associates of Iowa

Type of Action: Renewal

Date Issued: 4/10/06

License No.: 0297-1-23-M2

Amendment No.: 04 N/A

License Reviewer: RD

File No.: 4

Licensee: Quad City Testing

Type of Action: Amendment

Date Issued: 2/3/05

License No.: 0186-1-82-IR1

Amendment No.: 01

License Reviewer: RD

File No.: 5

Licensee: Quality Inspection Services

Type of Action: Termination

Date Issued: 5/25/07

License No.: 0334-1-78-IR1

Amendment No.: 02

License Reviewer: RD

File No.: 6

Licensee: Blood Center of Central Iowa
Type of Action: Renewal
Date Issued: 10/10/05
License No.: 0133-1-77-I1
Amendment No.: N/A
License Reviewer: RD

File No.: 7

Licensee: Midwest Industrial X-ray

Type of Action: Renewal

Date Issued: 1/11/05

License No.: 0075-1-78-IR1

Amendment No.: N/A

License Reviewer: RD

File No.: 8

Licensee: Pella Regional Health Center

Type of Action: New

Date Issued: 3/2/05

License No.: 0032-1-63-M2

Amendment No.: N/A

License Reviewer: RD

Iowa Draft Report Page D.2
License Casework Reviews

File No.: 9

Licensee: DBI, Inc.

License No.: 0350-1-78-IR1

Type of Action: Pending Renewal Issuance

Amendment No.: N/A

Date Issued: N/A

License Reviewer: NF

File No.: 10

Licensee: AG Processing

Type of Action: Termination

Date Issued: 9/8/06

License No.: 0263-1-74-FG

Amendment No.: 01

License Reviewer: RD

File No.: 11

Licensee: Construction Materials Testing

Type of Action: Renewal

Date Issued: 3/13/06

License No.: 0299-1-77-PG

Amendment No.: N/A

License Reviewer: RD

File No.: 12

Licensee: Iowa Blood and Cancer Center

Type of Action: New

Date Issued: 3/31/06

License No.: 0340-1-57-M2

Amendment No.: N/A

License Reviewer: NF

File No.: 13

Licensee: Iowa State University

Type of Action: Renewal

Date Issued: 9/4/06

License No.: 0014-1-85-AAB

Amendment No.: N/A

License Reviewer: NF

File No.: 14

Licensee: Quality Inspection Services

Type of Action: Termination

Date Issued: 5/25/07

License No.: 0334-1-78-IR1

Amendment No.: 02

License Reviewer: RD

File No.: 15

Licensee: Winneshiek Medical Center

Type of Action: New

Date Issued: 2/15/07

License No.: 0346-1-96-M2

Amendment No.: N/A

License Reviewer: NF

File No.: 16

Licensee: Mercy Medical Center

Type of Action: Renewal

Date Issued: 1/30/07

License No.: 0073-1-17-M1

Amendment No.: N/A

License Reviewer: NF

File No.: 17

Licensee: Cardinal Health
Type of Action: Amendment
Date Issued: 1/30/07

License No.: 0043-1-77-NP
Amendment No.: 04
License Reviewer: NF

Iowa Draft Report License Casework Reviews

Page D.3

File No.: 18

Licensee: Iowa Cancer Research Center

Type of Action: Termination Date Issued: 4/4/07

License No.: 0267-1-77-RD2

Amendment No.: 03 License Reviewer: NF

APPENDIX E

INCIDENT CASEWORK REVIEWS

NOTE: CASEWORK LISTED WITHOUT COMMENT IS INCLUDED FOR COMPLETENESS ONLY.

File No.: 1

Licensee: Midwest Industrial X-Ray, Inc. License No.: 0075-1-78-IR1

Date of Incident: 5/15/07 NMED No.: 070500

Investigation Date: 6/13/07 Type of Incident: Damaged Equipment

Type of Investigation: Telephone

Type of Investigation: Telephone

Comment:

Incident was not reported to the NRC Headquarters Operations Center.

File No.: 2

File No.: 3

Licensee: Iowa Health-Des Moines License No.: 0077-1-77-M1

Date of Incident: 6/14/07 NMED No.: 070369 Investigation Date: 6/14/07 Type of Incident: Overexposure

Licensee: National By-Products Analytical Laboratories License No.: 0113-1-77-GC

Date of Incident: 11/18/05 NMED No.: 060303 Investigation Date: 11/18/05 Type of Incident: Lost Source

Type of Investigation: Telephone

File No.: 4

Licensee: University of Iowa License No.: 0037-1-52-AAB

Date of Incident: 2/1/05 NMED No.: N/A Investigation Dates: 2/23-25/05 Type of Incident: Medical Event

Type of Investigation: Site

Comments:

a) Incident was not reported to the NRC Headquarters Operations Center.

b) Incident was not submitted for inclusion in NMED.

File No.: 5

Licensee: Mid-American Energy Company License No.: 0100-1-97-FG

Date of Incident: 3/14/05 NMED No.: 050613

Investigation Date: 3/15/05 Type of Incident: Damaged Equipment

Type of Investigation: Telephone

File No.: 6

Licensee: Quad City Testing Laboratory

Date of Incident: 9/3/05 Investigation Date: 9/5/05

File No.: 7 Licensee: CMT

Date of Incident: 10/10/05 Investigation Date: 10/10/05

File No.: 8

Licensee: University of Iowa Date of Incident: 8/29/06 Investigation Date: 8/29/06

License No.: 0186-1-78-IR1

NMED No.: 050701

Type of Incident: Damaged Equipment

Type of Investigation: Telephone

License No.: 0299-1-77-PG

NMED No.: 050693 Type of Incident: Damaged Equipment

Type of Investigation: Site

License No.: 0037-1-52-AAB

NMED No.: 060588

Type of Incident: Equipment Failure

Type of Investigation: Site