

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED:
 Dept of Health and Human Services
 National Institutes of Health, NIAID
 Rocky Mountain Laboratories
 903 South 4th Street, Hamilton, Montana 59840
 REPORT NO: 2009-01

2. NRC/REGIONAL OFFICE
 U.S. Nuclear Regulatory Commission
 Region IV, 612 East Lamar Blvd, Suite 400
 Arlington, Texas 76011-4125

3. DOCKET NUMBER
 030-05167

4. LICENSE NUMBER
 25-01203-01

5. DATE OF INSPECTION
 October 20, 2009

LICENSEE:

The inspection was an examination of the activities conducted under your license as they relate to radiation safety and to compliance with the Nuclear Regulatory Commission (NRC) rules and regulations and the conditions of your license. The inspection consisted of selective examinations of procedures and representative records, interviews with personnel, and observations by the inspector. The inspection findings are as follows:

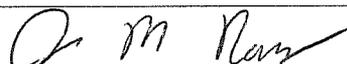
- 1. Based on the inspection findings, no violations were identified.
- 2. Previous violation(s) closed.
- 3. The violation(s), specifically described to you by the inspector as non-cited violations, are not being cited because they were self-identified, non-repetitive, and corrective action was or is being taken, and the remaining criteria in the NRC Enforcement Policy to exercise discretion, were satisfied.

Non-Cited Violation(s) was/were discussed involving the following requirement(s) and Corrective Action(s):

4. During this inspection certain of your activities, as described below and/or attached, were in violation of NRC requirements and are being cited. This form is a NOTICE OF VIOLATION, which may be subject to posting in accordance with 10 CFR 19.11.

Licensee's Statement of Corrective Actions for Item 4, above.

I hereby state that, within 30 days, the actions described by me to the inspector will be taken to correct the violations identified. This statement of corrective actions is made in accordance with the requirements of 10 CFR 2.201 (corrective steps already taken, corrective steps which will be taken, date when full compliance will be achieved). I understand that no further written response to NRC will be required, unless specifically requested.

Title	Printed Name	Signature	Date
LICENSEE'S REPRESENTATIVE			
NRC INSPECTOR	Jason M. Razo		11/06/2009

TRANSMISSION VERIFICATION REPORT

TIME : 11/06/2009 14:38
NAME : NRC RIV
FAX : 8178608188
TEL : 8178608100
SER.# : BROJ4J117485

DATE, TIME	11/06 14:37
FAX NO./NAME	714063639336
DURATION	00:00:51
PAGE(S)	02
RESULT	COVERPAGE
MODE	OK
	STANDARD
	ECM



UNITED STATES
NUCLEAR REGULATORY COMMISSION
REGION IV
612 EAST LAMAR BLVD, SUITE 400
ARLINGTON, TEXAS 76011-4125

F A C S I M I L E

Name: Barri Twardoski, Radiation Safety Officer
Licensee: Dept of Health and Human Services
National Institutes of Health, NIAID
Rocky Mountain Laboratories
License No.: 25-01203-01
Docket No.: 030-05167

Fax No.: (406) 363-9336
Phone No.: (406) 363-9216
From: Jason Razo
Date: 11/06/2009
Subject: Clear Inspection Report, NRC Form 591M Part1
Pages: 1 + transmittal sheet

Mr. Twardoski,

I am faxing you an NRC Form 591M inspection report that documents the inspection performed by Marti Poston-Brown and myself, conducted at your facility in Hamilton, Montana. Because there were no violations, no response or signature on your part is required. Please maintain the report for your records. If you have any questions about the inspection or the 591M please call me at 817-276-6589.

Jason M. Razo
Materials Inspector



UNITED STATES
NUCLEAR REGULATORY COMMISSION
REGION IV
612 EAST LAMAR BLVD, SUITE 400
ARLINGTON, TEXAS 76011-4125

F A C S I M I L E

Name: Barri Twardoski, Radiation Safety Officer
Licensee: Dept of Health and Human Services
National Institutes of Health, NIAID
Rocky Mountain Laboratories
License No.: 25-01203-01
Docket No.: 030-05167

Fax No.: (406) 363-9336
Phone No.: (406) 363-9216
From: Jason Razo
Date: 11/06/2009
Subject: Clear Inspection Report, NRC Form 591M Part1
Pages: 1 + transmittal sheet

Mr. Twardoski,

I am faxing you an NRC Form 591M inspection report that documents the inspection performed by Marti Poston-Brown and myself, conducted at your facility in Hamilton, Montana. Because there were no violations, no response or signature on your part is required. Please maintain the report for your records. If you have any questions about the inspection or the 591M please call me at 817-276-6589.

Jason M. Razo
Materials Inspector
Nuclear Materials Safety Branch A