

UNITED STATES
NUCLEAR REGULATORY COMMISSION

REGION IV
612 EAST LAMAR BLVD, SUITE 400
ARLINGTON, TEXAS 76011-4125

December 22, 2009

John Riegel, Acting Director
Division of Sanitation Facilities Construction
Office of Environmental Health and Engineering
Department of Health and Human Services
Phoenix Area Indian Health Service
40 N. Central Avenue, Suite 720
Phoenix, Arizona 85004

SUBJECT: NRC INSPECTION REPORT 030-17788/09-001 (FORM 591M)

Dear Mr. Riegel:

This letter and the enclosed NRC Form 591M refer to the safety inspection conducted on December 17, 2009, at your facility in Sparks, Nevada. The inspection was an examination of activities conducted under the authority of NRC Materials License 02-19495-01 as they relate to safety and compliance with the Commission's rules and regulations and with conditions of the license. A final exit briefing was conducted with you on December 17, 2009.

Within the scope of this inspection, no violations or deviations were identified; therefore, no response to this letter or the enclosed NRC Form 591M 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 made available electronically for public inspection in the NRC Public Document Room or from the NRC's document system (ADAMS), accessible from the NRC Web site at <http://www.nrc.gov/reading-rm/adams.html>.

Should you have any questions concerning this letter, please contact Jason Razo at (817) 276-6589.

Sincerely,


Anthony D. Gaines, Chief
Nuclear Materials Safety Branch A

Docket: 030-17788
License: 02-19495-01

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED:

Department of Health and Human Services
Phoenix Area Indian Health Service
Reno District Office
1395 Greg Street, Suite 101, Sparks, Nevada

REPORT NO: 2009-001

2. NRC/REGIONAL OFFICE

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

3. DOCKET NUMBER

030-17788

4. LICENSE NUMBER

02-19495-01

5. DATE OF INSPECTION

December 17, 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

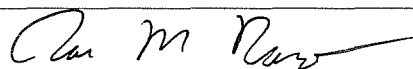
Signature

Date

LICENSEE'S
REPRESENTATIVE

NRC INSPECTOR

Jason M. Razo



12/21/09

☐

Non-Public

☐

Sensitive – Security-Related

☒

Public

☒

Non-Sensitive

Department of Health and Human Services - 2 -
Phoenix Area Indian Health Service

bcc via e-mail:

A. Howell
C. Cain
A. Gaines
J. Razo
M. Herrera, Fee Coordinator
R4DNMS_MS-A

Hard copy:

RIV Materials Docket File (5th Floor)

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ADAMS: <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	<input checked="" type="checkbox"/> SUNSI Review Complete	Reviewer Initials: JMR
	<input checked="" type="checkbox"/> Publicly Available	<input checked="" type="checkbox"/> Non-Sensitive
	<input type="checkbox"/> Non-publicly Available	<input type="checkbox"/> Sensitive
KEYWORD: Sunsi Review Complete		
RIV:DNMS/NMSB-A	C:NMSB-A	
JMRazo;dlf	ADGaines RAZ	
12/21/09	12/22/09	

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