

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED: Covance Clinical Research Unit, Inc. Global Clinical Pharmacology 617 Oakley Street Evansville, IN 47710 REPORT NUMBER(S) 2013-001		2. NRC/REGIONAL OFFICE Region III U. S. Nuclear Regulatory Commission 2443 Warrenville Road, Suite 210 Lisle, IL 60532-4352	
3. DOCKET NUMBER(S) 030-33820	4. LICENSE NUMBER(S) 13-26640-01	5. DATE(S) OF INSPECTION 08/02/2013	

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) were discussed involving the following requirement(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 in accordance with NRC Enforcement Policy. This form is a NOTICE OF VIOLATION, which may be subject to posting in accordance with 10 CFR 19.11.
(Violations and Corrective Actions)

Statement of Corrective Actions

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	Bill C. Lin		8/12/13
BRANCH CHIEF	Aaron T. McCraw		8/12/13

Docket File Information
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6. INSPECTION PROCEDURES USED 87130	7. INSPECTION FOCUS AREAS 3.01-3.07
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SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM CODE(S) 03810	2. PRIORITY 3	3. LICENSEE CONTACT Robert G. Kochan	4. TELEPHONE NUMBER (608) 310-8268
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Main Office Inspection Next Inspection Date: 08/2016

Field Office Inspection _____

Temporary Job Site Inspection _____

PROGRAM SCOPE

The licensee is a clinical research facility located in Evansville, Indiana. The licensee currently ~~has~~^{has} a possession and storage in standby NRC Materials License only. The licensee currently does not possess any authorized license materials.

Inspection Scope

The inspector took a toured of the facility, interviewed licensee personnel, and took independent radiation surveys. The licensee currently does not possess any radioactive materials and does not ~~planned~~ have on having any radioactive materials anytime in the near future. Licensee personnel is knowledgeable about NRC Regulations and the Conditions of NRC Materials License 13-26640-01. The inspector took independent surveys to confirmed that there are no radioactive materials within the licensee's facility.