U.S. NUCLEAR REGULATORY COMMISSION U.S. NUCLEAR REGULATORY COMMISSION U.S. NUCLEAR REGULATORY COMMISSION 10 GFR 2,201 SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION										
1. LICENSEE/LOCATIO	IN INSPECTED:		2. NRC/REGIONAL OFFICE							
Covance Central Laboratory Services, Inc. 8211 SciCor Drive Indianapolis, IN 46214			Region III U. S. Nuclear Regulatory Commission 2443 Warrenville Road, Suite 210							
REPORT NUMBER(S) 2018001			LISIC, IL 00332-4332							
3. DOCKET NUMBER(S)		4. LICENSE NUMBER	(S) 5. DATE(S) OF INSPECTION		ON					
030-31150		13-26058-01		April 5 , 2018						
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	$\mathbf{X}$ 1. Based on the inspection findings, no violations were identified.									
2. Previous	2. Previous violation(s) closed.									
3. The violat non-repet discretion	<ul> <li>The violations(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.</li> </ul>									
	Non-cited violation(s) were discuss	ed involving the follo	wing requirement(s):							
<ul> <li>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.</li> <li>(Violations and Corrective Actions)</li> </ul>										
Statement of Corrective Actions										
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	Dennis P. O'Dowd	k	emis PgO'h	Jowel	04/	65/18				
BRANCH CHIEF	Aaron T. McCraw		170		4/2	18				
NRC FORM 591M PART	1 (07-2012)	/			1					

U.S. NUCLEAR REGULATORY COMMISSION									
SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION									
1. LICENSEE/LOCATION INSPECTE	ED:		2. NRC/REGIONAL OFFICE						
Covance Central Laborat 8211 SciCor Drive Indianapolis, IN 46214	ory Services, Inc.		Region III U. S. Nuclear Regulatory Commission 2443 Warrenville Road, Suite 210 Lisle, IL 60532-4352						
REPORT NUMBER(S) 201800	01								
3. DOCKET NUMBER(S)		4. LICENSE NUMBER(S)		5. DATE(S) OF INSPECTION					
030-31150		13-26058-01		April 5, 2018					
6. INSPECTION PROCEDURES USED		7. INSPECTION FOCUS AREAS							
86126		3.01-3.07							
		A LICENSEE CONTAC							
02410	5	Brian Davidso	n, RSO	(317) 273-5369					
Main Office Inspec	tion	Next Inspection	Date: April 5, 20	023					
Field Office Inspec	tion								
Temporary Job Site Inspection									
PROGRAM SCOPE									
This was an unannounced, routine inspection of a laboratory testing service company authorized for millicurie quantities of iodine-25 (1-125), tritium (H-3), and carbon-14 (C-14), for use in benchtop testing to support medical trials of products for pharmaceutical clients. The licensee was a large company, employing around 1500 employees; however, only approximately 5 laboratory personnel were trained to use licensed material, and of these, only 2 actively used material on a regular basis. Licensed material was used in the Radioimmunoassay (RA1) Area located within a larger lab called the "Central Laboratory." The licensee used I-125 kits exclusively; H-3 had not been used in over 7 years, and as of the inspection date, C-14 had never been possessed or used by the licensee. Each I-125 kit contained about 4-5 μCi of I-125, and approximately 2 kits were utilized per week. The licensee only generated and stored solid waste for decay in storage, and had not used sanitary sewage for disposal since approximately 2012. PERFORMANCE OBSERVATIONS The inspector toured the RA1 lab area, the waste storage room, and interviewed licensee staff. The inspector observed staff demonstrate package receipt procedures, the licensee's inventory tracking system, proper usage of radioactive material labels and postings, security of radioactive material handling and survey procedures. The inspector reviewed selected records, including quarterly audits, package receipt records, materials inventory, disposal logs, and weekly wipe tests and survey results. The licensee was previously cited during a routine inspection conducted on August 14, 2013, (ref. IR 03031150/2013001 (DNMS)) for a violation of a regulatory requirement, specifically, for failure determine the presence or absence of radioactive radioactive of 1-125 RIA kits, as required by the license (i.e., Condition 17 of the licensee's documentation, discussions with licensee staff, and observations of licensee's documentation, discussions with licensee taff. Alo doservations of lic									