UNITED STATES
NUCLEAR REGULATORY COMMISSION
WASHINGTON, D. C. 20555

MAR 08 1988

MEMORANDUM FOR: Donald A. Nussbaumer, Assistant Director
for State Agreements Program, SLITP

FROM: Joel O. Lubenau
State Agreements Program, SLITP

SUBJECT: REPORT OF STAFF EVALUATION OF THE ILLINOIS RADIATION CONTROL PROGRAM, JUNE 1, 1987 TO DECEMRER 18, 1987

Enclosed is the subject report of staff evaluation.

As noted in the report, this initial review of the Illinois Department of Nuclear Safety radiation control program resulted in staff findings of adequacy and compatibility. No recommendations were offered.

It is recommended the next routine review be conducted in 18-24 months. An interim visit within 12 months would be appropriate. Region III staff should also proceed with additional field evaluations of IDNS inspection staff.

Enclosure:
As stated

cc w/enclosure:
V. Miller, NMSS
Regional State Agreement Representatives

A/7

STAFF REPORT AND EVALUATION
OF THE
ILLINOIS RADIATION CONTROL PROGRAM
FOR THE PERIOD
JUNE 1, 1987 TO DECEMBER 18, 1987

1st Regulatory Program Review

STAFF REPORT AND EVALUATION OF THE ILLINOIS RADIATION CONTROL PROGRAM FOR THE PERIOD JUNE 1, 1987 TO DECEMBER 18, 1987. The initial regulatory program review meeting with Illinois representatives was held during the period December 7 to 18th, 1987, in Springfield, and Glen Ellyn. The State was represented by Dr. Terry Lash, Director, Illinois Department of Nuclear Safety (IDNS). The program review included review of selected license and inspection files, was conducted by Messrs. Adam, Baggett, and Lubenau on December 7-18, 1987. Mr. Lubenau conducted an accompaniment of an IDNS inspector on December 16, 1987. A summary meeting regarding the results of the regulatory program review and inspection accompaniment was held by Mr. Lubenau and Mr. Nussbaumer with Dr. Lash and his staff on December 18, 1987.

Conclusions

The Illinois program for control of agreement materials is in the staff's opinion adequate to protect the public health and safety and is compatible with the regulatory programs of the NRC and the Agreement States.

These conclusions are based on the review of the technical and administrative aspects of the State's regulatory program for controlling agreement material.

Included in this review were examinations of selected license and inspection files, the program indicators specified in the NRC "Guide for Evaluation of Agreement State Radiation Control Programs," the accompaniment of a State inspector, the review of all licenses issued by Illinois since June 1, 1987, and our continuing exchange of information program.

Summary Discussion With State Representatives

A summary meeting to present the results of the regulatory program review meeting was held by Mr. Lubenau and Mr. Nussbaumer with Dr. Lash and his staff on December 18, 1987. In addition to Director Lash, John Cooper, Director of the Office of Environmental Safety, Paul Eastvold, Director of the Office of Radiation Safety and Steven Collins, Chief, Division of Nuclear Materials attended.

The following comments and recommendations were made to Dr. Lash.

The State was commended on its successful implementation of the Agreement State program. At the conclusion of the review all of the indicator guidelines had been met. The State has inaugurated a more aggressive inspection schedule than NRC's, e.g., many licensees classified by NRC as requiring 2 or 3 year inspection intervals will be inspected by IDNS annually. As a consequence, most of these licensees will be temporarily overdue under the IDNS inspection priority system until the State completes its initial round of inspections. The State plans to meet its inspection priorities and eliminate this backlog in 1988 (Section VI.A). An additional 6 licenses were turned over to IDNS by NRC in an overdue status using NRC priorities. The State will inspect these licensees by the end of the 1st quarter of 1988 (Section VI.A). During the review, IDNS incorporated a number of minor suggestions offered by the reviewers including modifying administrative and license procedures (Sections III.D and V.C) and instructions to staff for recording inspection results (Section VI.G).

Assessments

I. LEGISLATION AND REGULATIONS

A. Legal Authority (Category I)

The State satisfies the NRC guidelines for this program Indicator.

The State's statutes were reviewed by NRC as part of the review of Illinois request to become an Agreement State and were deemed to provide an acceptable basis for the program. The State legislature has overridden the Governor's amendatory veto of HB717 and it has become law. On October, 20, 1987, Director Lash informed NRC of the State's intent to seek an amendment to the Section 274b Agreement to include Sec. 11e.(2) byproduct material.

B. Status and Compatibility of Regulations (Category I)

The State satisfies the NRC guidelines for this program Indicator.

The State's present regulations were reviewed as part of the NRC review of the State's request for a Section 274b Agreement and were found to be compatible. The State is drafting amendments to their regulations for financial sureties to clarify the categories of licensees to be subject to these requirements. Also in progress is the drafting of a procedure establishing escalated enforcement policies including civil penalties which will become a rule. An interim procedure is currently in effect and serves until the rule is issued (Attachment Q).

II. ORGANIZATION

A. Location of the Radiation Control Program Within the State Organization (Category II)

The State satisfies the NRC guidelines for this program Indicator.

B. Internal Organization of the RCP (Category II)

The State satisfies the NRC guidelines for this program Indicator.

C. Legal Assistance (Category II)

The State satisfies the NRC guidelines for this program Indicator.

IDNS has its own legal staff and the staff works closely with the technical staff.

D. Technical Advisory Committees (Category II)

The State satisfies the NRC guidelines for this program Indicator.

Illinois has enacted a Government Ethics Act but it is not applicable to boards. An Executive Order (No. 3-1977) (Attachment T) does apply to boards except, according to IDNS legal staff, those where membership is voluntary, is not paid and whose decisions are advisory only. Therefore, it does not apply to the IDNS advisory committees.

III. MANAGEMENT AND ADMINISTRATION

A. Quality of Emergency Planning (Category I)

The State satisfies the NRC guidelines for this program Indicator.

IDNS has procedures for responding to radioactive materials incidents (Attachment O). Vol. 10 of the Illinois Plan for Radiological Accidents is being revised to incorporate them. The State has a system for responding to incidents which has been frequently and successfully tested in actual events.

B. Budget (Category II)

The State satisfies the NRC guidelines for this program Indicator.

C. Laboratory Support (Category II)

The State satisfies the NRC guidelines for this program Indicator. The State lab participates in the USEPA QC program. Adequate routine and emergency laboratory services are presently provided by the Springfield office. Additionally, the Glen Ellyn office has counting equipment suitable for counting wipes, however, some of it is not operating satisfactorily. When satisfactorily "debugged," it can be used for counting routine wipes collected by the Glen Ellyn inspectors. In emergencies, on-site laboratory support can also be provided by a mobile van.

D. Administrative Procedures (Category II)

Division of Nuclear Materials:

The State satisfies the NRC guidelines for this program Indicator.

As renewals occur, the IDNS licensing staff is reissuing NRC licenses as IDNS licenses and is combining NRC licenses with IDNS NARM licenses in cases where licensees needed both authorizations. This is accomplished by issuing an IDNS license incorporating, where appropriate, the preceding license applications and supporting documents. The IDNS license number is unique and not related to the NRC or NARM licenses. At the same time, a new IDNS central office license folder is created. A computer printout is clipped, but not permanently attached, to this new folder which identifies the preceding NRC and NARM licenses. The licensees receiving the IDNS license, however, receive no information that the NRC and NARM licenses have been combined and superceded by the IDNS license, an

obvious potential source of confusion. For IDNS staff, if the computer printout is lost, (as was the case in one file) it may not be readily apparent that other licenses (and their folders which include backup material and inspection reports) are related to the IDNS license. Since October 25, 1987 license reviewers have been assigned responsibility for assuring the IDNS folders include relevant preceding NRC and NARM documents but casework processed before and after this date were found where this was not done (Appendix B). Field files for inspectors were also constructed but cases were found in both Springfield and Glen Ellyn field files where this work had been incomplete (Appendix B). This problem was resolved during the review when the Springfield staff reviewed about 80 licenses and corrected the filing deficiencies.

It was suggested that cover letters to licensees (now routinely used) state when NRC and NARM licenses have been combined and have been replaced by the IDNS license and that the IDNS license identify those NRC and NARM licenses. This suggestion was adopted (Attachment W).

Additional procedures are available governing the handling of radioactive materials registration, quarterly exposure reports and overexposure reports (Attachment V).

Division of Waste and Transportation:

Staffs of the Offices of Environmental Safety and Radiation Safety have met to develop an outline of internal procedures for managing a low-level waste disposal site license application. David Ed has attended the NRC sponsored course on project management for such applications. The reviewer discussed with Dr. Cooper NRC's availability to review and comment on such procedures when they are drafted.

E. Management (Category II)

The State satisfies the NRC guidelines for this program Indicator.

F. Office Equipment and Support Services (Category II)

The State satisfies the NRC guidelines for this program Indicator.

G. Public Information (Category II)

The State satisfies the NRC guidelines for this program Indicator.

IV. PERSONNEL

A. Qualifications of Technical Staff (Category II)

The State satisfies the NRC guidelines for this program Indicator.

B. Staffing Level (Category II)

The State satisfies the NRC guidelines for this program Indicator.

David Price's position will become vacant as of December 18, 1987. IDNS is actively recruiting to fill the position. S. Hsu will serve as acting licensing head until the position is filled. The State also is seeking to fill an inspector vacancy in Springfield.

C. Staff Supervision (Category II)

The State satisfies the NRC guidelines for this program Indicator.

D. Training (Category II)

The State satisfies the NRC guidelines for this program Indicator.

Mr. Steve Baggett, NMSS provided training to the licensing staff during the review or review of applications for registration of sealed sources and devices. The Head, I & E is exploring the possibility of providing in-service training for the inspection staff in investigation procedures using State resources, e.g., State Police. We asked to be kept advised of developments and offered to assist in this endeavor. An offer was made to IDNS to make NRC training available as needed for the individual hired to fill the licensing head vacancy. According to the Director of the Office of Environmental Safety, training in basic health physics and in transportation will likely be requested of NRC for new staff in that Office.

E. Staff Continuity (Category II)

The State satisfies the NRC guidelines for this program Indicator.

In the Division of Nuclear Materials, noted earlier, Mr. Price is vacating the position of licensing head to accept a position of radiation safety officer in the private sector and recruitment is underway to replace him.

In the Office of Environmental (OES), the following personnel changes have occurred in the professional positions:

Name	Division	Change
Dana Willaford	W&T	Left for private sector
Shannan Flanigan	W&T	Left for private sector
Michael Madonia	Radioecology	Left for private sector
Steve Shafer	W&T	Left for private sector
Teresa Adams	OES staff	Left for foreign position

Gregory Crouch	Radiocology	Left for academic position
James Schweitzer	Radiocology	Left for academic position

Thirteen professional and technical persons have been hired by OES to fill these and other OES vacancies. As a result of these changes the Director, OES discussed future training needs as being primarily in transportation and basic health physics.

Overall, of 43 IDNS technical professional positions identified as in the October 1, 1986 Program Statement as in the Agreement State program 9 were vacated since that date. However, IDNS has been successful in filling these and other vacancies.

V. LICENSING

A. Technical Quality of Licensing Actions (Category I)

The State satisfies the NRC guidelines for this program Indicator.

Fourteen license files received technical review (Part 1 of Appendix B). Overall, the technical quality of the licensing actions was very good. IDNS does not now routinely use license checklists during reviews of applications. We suggested this be used by reviewers and remain with the proposed license for review by the supervisor as an aid to maintain quality control. Samples of NRC license checklists were provided to IDNS. The staff agreed to implement this suggestion (Attachment AC).

B. Adequacy of Product Evaluations (Category I)

The State satisfies the NRC guidelines for this program Indicator.

The State has issued one SS&D registry and a review of this file disclosed no significant problems (Part 1 of Appendix B). Mr. Steve Baggett, NMSS reviewed 16 other registration applications that were in various stages of review by IDNS and provided technical comments and suggestions which will be incorporated by the IDNS staff.

C. Licensing Procedures (Category II)

The State satisfies the NRC guidelines for this program Indicator.

The NARM licensing guide and procedures has been replaced by licensing procedures which include NRC materials and references to NRC technical resources as well as IDNS policies, interpretations and memoranda. (See attachments X and Y.)

As noted in Section III.D, Administrative Procedures, IDNS has revised its administrative procedures for handling licensing actions, in particular to assure file contents are complete and licensees receive explanations when NRC and Illinois NARM licenses are replaced by new licenses. We suggested licenses routinely include the phrase, "In accordance with letter dated _____, ..." as

an introduction on the 1st page of each license amendment or renewal to explain the reasons for the licensing action.

VI. COMPLIANCE

A. Status of Inspection Program (Category I)

The State satisfies the NRC guidelines for this program Indicator.

In the period June 1 to December 7, 1987, 193 inspections were made by IDNS. Approximately 800 licenses were transferred by NRC to IDNS. A review by IDNS of these files disclosed 6 were overdue at the time of the transfer (Region III apparently had not identified them as needing inspections). These were NRC Priority 3 and 4 licensees. Targets for inspecting these licensees in 1988 have been established by IDNS (Attachment Z). Since the effective date of the Agreement no inspections have become overdue using the NRC priority system. The State, however, is implementing a more aggressive inspection program, e.g., many licensees in NRC priorities 2 and 3 are in IDNS category 1. As a result of this increase in the inspection frequencies, there is now a temporary backlog of inspections. The State is tracking this backlog against both NRC and the IDNS inspection priority systems. The goal is to eliminate it in 1988 and a meeting of senior staff is scheduled in January 1988 to finalize the plan to eliminate the backlog. Since the IDNS "backlog" exists only because of its status as a new Agreement State and its decision to conduct more frequent inspections, and recognizing its plans to address it no comment was made at this time. In this regard, the reviewer discussed with Mr. Collins and Mr. Sanza the projected inspection workload under the IDNS inspection priority system (492 inspections per year) in comparison to expected and actual staff productivity levels. It was suggested this aspect be carefully monitored and adjustments made as necessary to assure the accelerated IDNS inspection program is realistic in light of the available staff resources for inspections.

B. Inspection Frequency (Category I)

The State satisfies the NRC guidelines for this program Indicator.

As noted above, IDNS' inspection priority system calls for more frequent inspections than NRC's. The State has attempted inspections of reciprocity general licensees but has been unsuccessful in completing an inspection at a field site.

C. Inspector's Performance and Capability (Category I)

The State satisfies the NRC guidelines for this program Indicator. Accompaniments of 3 IDNS inspectors in the IDNS Glen Ellyn office were scheduled, however, unplanned schedule conflicts and a snowstorm resulted in only an accompaniment, that by J. Lubenau of J. Papendorf on a partial inspection on December 16, 1987 of Grant Hospital, Chicago, license nos. IL-00134-01 and 12-09106-02. The results of

this accompaniment and of Mr. Gulczynski in September, 1987 were satisfactory and were discussed with the Head, I&E.

The Head, I&E, has initiated a program to make accompaniments of all inspectors.

D. Responses to Incidents and Alleged Incidents (Category I)

The State satisfies the NRC guidelines for this program Indicator.

E. Enforcement Procedures (Category I)

The State satisfies the NRC guidelines for this program Indicator.

As noted earlier, the staff is drafting a new set of enforcement procedures which will become a rule. The rule will cover civil penalties.

F. Inspection Procedures (Category II)

The State satisfies the NRC guidelines for this program Indicator.

G. Inspection Reports (Category II)

The State satisfies the NRC guidelines for this program Indicator.

Twelve inspection reports were reviewed (Part 2 of Appendix B). Inspection forms are used for routine inspections and it was noted that the medical license inspection form does not provide for an entry for inspection of the ALARA program (which for medical licenses is usually spelled out in detail). IDNS is preparing to reprint its forms and will modify the medical form to cover ALARA. In the interim, instructions were issued to the inspection staff to add a supplementary note to the report covering ALARA. This has been done (Attachment AA). We also suggested that the inspectors begin to record the actual scope of the licensees program (to distinguish it from the authorized scope) and provide for specific review of licensee management audits.

H. Confirmatory Measurements (Category II)

The State satisfies the NRC guidelines for this program Indicator.

VII. OTHER ASPECTS OF THE STATE'S RADIATION CONTROL PROGRAM

A. Non-Agreement Sources of Radiation

No reviewer comments.

B. Environmental Monitoring Program

No reviewer comments.

C. Other Generic Issues

The State has reviewed its licensees and identified those that have a potential for releases of radionuclides to sanitary sewerage systems that might be reconcentrated at sewerage treatment plants. The list includes those Illinois licensees identified in NRC TI 2800/10.

The State will conduct a sewerage sludge sampling program for these licensees (Attachment AB).

The file for Radiation Sterilizers, Inc (RSI) was reviewed. The State has under review a license renewal application dated May 15, 1987 originally submitted to NRC. On October 12, 1987 a deficiency letter was sent to RSI. A reply is pending. On October 4, 1987 the State conducted a follow-up inspection covering the non-compliance items found by NRC in its January, 1987 inspection of the RSI facilities in Ohio and Illinois (Appendix C). The State's inspection was adequate.

D. Low Level Radioactive Waste Disposal Program

The status of the IDNS LLW regulatory program was reviewed through discussions with J. Cooper, Director, Office of Environmental Safety. As noted earlier in Section IV.E, Staff Continuity, some turnover in OES staff has been experienced but IDNS has been successful in filling the vacancies. NRC training in basic health physics and in transportation may be needed for new staff and Mr. Cooper was advised to make these needs known to Mr. Adam.

In the Program Statement supporting Illinois' request for an Agreement, there were references to consultant studies in the LLW area including characterizing Illinois LLW, suggestions for treatment of LLW and review of the decommissioning plan proposed by US Ecology for the Sheffield site. Copies of the reports of these studies were obtained for NRC information. Regarding the Sheffield decommissioning plan, US Ecology is also working to resolve USEPA concerns arising from the chemical disposal area at Sheffield.

The Sheffield site is being maintained by US Ecology and environmental monitoring is continuing. IDNS conducts inspections about monthly of the site which normally include environmental sampling and inspection for erosion. Results of these inspections are conveyed by letter to US Ecology. The USGS had constructed a research tunnel at the site. The tunnel has since been closed.

OES management has been conferring with Division of Nuclear Materials staff to develop an outline for internal procedures to handle a LLW disposal site application. (See attachment B.) David Ed attended SLITP's recent licensing project management course. An offer was made to Mr. Cooper to assist in the review of the draft internal licensing procedures.

Appendices

A. Review Indicators and State Responses to Questionnaire

B. Casework Reviews

C. Present Review Comment Letter

Appendix A

EVALUATION OF AGREEMENT STATE RADIATION CONTROL PROGRAM
STATE REVIEW GUIDELINES, QUESTIONS AND ANSWERS

Name of State Program: Illinois Department of Nuclear Safety
Date of NRC Review: December 7-18, 1987

I. LEGISLATION AND REGULATIONS

A. Legal Authority (Category I)

NRC Guidelines: Clear statutory authority should exist, designating a state radiation control agency and providing for promulgation of regulations, licensing, inspection and enforcement. States regulating uranium or thorium recovery and associated wastes pursuant to the Uranium Mill Tailings Radiation Control Act of 1978 (UMTRCA) must have statutes enacted to establish clear authority for the State to carry out the requirements of UMTRCA.

Questions:

1. Please list all currently effective legislation that affects the radiation control program.

   Same as submitted for program evaluation to become an Agreement State.

2. What changes have been made to the statutory authority of the State to license, inspect, and otherwise regulate agreement materials since the last review?

   HB 717 Requires local review/approval prior to issuance of a license for low-level waste treatment, storage or disposal facility. Amendatory veto requires approval of a county board before IDNS can select a site for a low-level waste disposal facility located more than one and one-half miles from a municipal boundary. Also provides that license applicants for all types of low-level waste facilities should comply with local zoning ordinances. Although this bill was amendatorily vetoed by the Governor on September 25, 1987, the legislature is currently reconsidering this bill.

   HB 2849 Increases low-level waste fee from $90,000 per reactor to $498,000 per reactor, with none of increased amount going into long-term care fund, for period of three years. Also provides credit equal to increased amount plus interest to be reflected in disposal fee system.

SB 301 Requires written notice to local officials and legislators, along with public hearing, prior to selection of low-level waste disposal facility.

SB 492 The Department may impose fees for termination of category 2(c) and 2(d) licenses and decommissioning and decontamination activities. The Department may also set license fees for licenses which authorize the distribution of devices, products, or sealed sources involved in the production, utilization, or containment of radiation.

3. If your State regulates uranium or thorium recovery operations and associated wastes pursuant to an amended agreement and UMTRCA, explain any changes to the statutory authority for these functions.

N/A

4. Are copies of the current enabling act and other statutes (e.g., Administrative Procedures Act, Sunshine Act., etc.) which govern the conduct of the agreement materials program on file in the Radiation Control Program (RCP) office and with the NRC?

Yes.

If revisions have occurred since the last review, the changes should be included.

N/A

5. Does the State have the authority to:

Unchanged since submittal for agreement.

a. apply civil penalties? Yes If so, cite legislation.
Radiation Protection Act, Ill. Rev. Stat. 1985, ch. 111½, par. 219
b. collect fees? Yes If so, cite legislation.
Radiation Protection Act, Ill. Rev. Stat. 1985, ch. 111½, par 216b
c. require surety or long-term care funds? Yes. If so cite legislation.
Radiation Protection Act, Ill. Rev. Stat. 1985, ch. 111½, par. 216a
d. require performance bonds or sureties for decommissioning licensed facilities? Yes If so, cite legislation.
Radiation Protection Act, Ill. Rev. Stat. 1985, ch. 111½, par 216a
e. require performance bonds or sureties for clean-up of licensed facilities after a contamination accident? Yes If so, cite legislation.

Radiation Protection Act, Ill. Rev. Stat 1985, ch 111½, par 216a

f. require long term care funds for uranium mill or low-level waste facilities. Yes If so, cite legislation.
For LLW - Ill. Low-Level Radioactive Waste Management Act, Ill. Rev. Stat. 1986 Supp., ch. 241-14(b)

g. enter into low-level waste compacts? Yes If so, cite legislation.
An Act Ratifying and Approving the Central Midwest Interstate Compact on Low-Level Radioactive Waste, Ill. Rev. Stat. 1985, ch. 127, par. 63v-1

h. establish, license and/or operate a low-level waste site? Yes If so, cite legislation.
Ill. Low-Level Radioactive Waste Management Act
Ill. Rev. Stat. 1986 Supp., ch. 241-8

6. If any responses to the above question are negative, explain any plans the State may have regarding those issues.

N/A

B. Status and Compatibility of Regulations (Category I)

NRC Guidelines: The State must have regulations essentially identical to 10 CFR Part 19, Part 20 (radiation dose standards, effluent limits waste manifest rule and certain other parts), Part 61 (technical definitions and requirements, performance objectives, financial assurances), and those required by UMTRCA, as implemented by Part 40. The State should adopt other regulations to maintain a high degree of uniformity with NRC regulations. For those regulations deemed a matter of compatibility by NRC, State regulations should be amended as soon as practicable but no later than 3 years. The RCP has established procedures for effecting appropriate amendments to State regulations in a timely manner, normally within 3 years of adoption by NRC. Opportunity should be provided for the public to comment on proposed regulation changes. (Required by UMTRCA for uranium mill regulation.) Pursuant to the terms of the Agreement, opportunity should be provided for the NRC to comment on draft changes in State regulations.

Questions:

1. When did the State last amend its regulations in order to maintain compatibility and when did the revisions become effective?

September 25, 1986.

2. Referring to the enclosed NRC chronology of amendments note the effective date of the NRC changes last adopted by the State.

No change since submittal for agreement.

3. a. Were there any compatibility items that were not adopted by the State?

No

b. If so, please identify and explain why they were not adopted.

N/A

4. Does your State have a schedule or program for revising and adopting changes to regulations within three years of adoption by the NRC?

Yes: Both the Office of the Chief Legal Counsel and the Office of Radiation Safety program staff routinely review rule changes of the NRC as they are published in the Federal Register. Upon notification by program staff that a particular NRC rule change constitutes an item of compatibility, the Office of the Chief Legal Counsel will assist in the drafting of a revision to the Illinois Administrative Code. After a revision is drafted, the Office of the Chief Legal Counsel will promulgate the revisions in accordance with the requirements of the Illinois Administrative Procedure Act, Ill. Rev. Stat. 1985, ch. 127, par. 1000 et seq.

5. Has your State adopted all regulations deemed a matter of compatibility by NRC within three years? (Refer to NRC chronology).

Yes

6. What are your State's procedures for adopting new regulations? Briefly describe each step in the procedure.

The Department's formal procedures for promulgation of a rule are contained in the Illinois Administrative Procedure Act, Ill. Rev. Stat. 1985, ch 127, par. 1000 et seq. Upon completion of drafting and in-house review, the Department generally submits the draft rule to NRC for review. The Department then proposes the rule. This is accomplished by filing a "First Notice" of the rule with Secretary of State. The First Notice Period begins when the rule appears in the Illinois Register. During the First Notice Period, which must be at least 45 days long, the Department will receive public comments. If a rule will result in a significant change for a substantial number of licensees, the Department will do one or more of the following: send a copy of the proposed rule to all licensees, extend the

comment period beyond 45 days, or schedule a public hearing. In addition, if it is requested, the Department will conduct a public hearing.

At the expiration of the First Comment Period, the Department prepares a "Second Notice" of the rule. Among other things, the Second Notice contains a written response to all comments received during the First Notice Period. The Second Notice Period begins upon filing of the Second Notice with the Joint Committee on Administrative Rules, a committee of the Illinois General Assembly. During the Second Notice Period, the Department is required to respond to any questions or concerns which are raised by the Joint Committee. At the end of the Second Notice Period, the Department files the adopted rule with the Secretary of State, whose responsibility it is to publish the rule in the Illinois Register and to insert the rule in the Illinois Administrative Code.

In addition to containing procedures for this notice and comment type rulemaking, the Illinois Administrative Procedure Act contains provisions regarding preemptory and emergency rule-making. Although most rules cannot be promulgated under these provisions, those rules which do fall within the preemptory or emergency rulemaking provisions may be promulgated without prior notice and comment.

7. How is the public involved in the process?

   Public hearing(s), copies mailed to licensees, published in Illinois Register.

8. a. Does the NRC have the opportunity to comment on draft changes to State regulations?

      Yes

   b. If so, does your State respond to the comments?

      Yes

II. ORGANIZATION

A. Location of the Radiation Control Program Within State Organization (Category II)

NRC Guidelines: The RCP should be located in a State organization parallel with comparable health and safety programs. The Program Director should have access to appropriate levels of State management. Where regulatory responsibilities are divided between state agencies, clear understandings should exist as to division of responsibilities and requirements for coordination.

1. Attach a dated organization chart(s) showing the RCP and its location within the department and State organization.

   See Attachment A.

2. Is the RCP on a comparable level within the State organization with other health and safety programs so as to compete effectively for funds and staff?

   Yes

3. Does the RCP program director have access to appropriate levels of State management?

   Yes

B. Internal Organization of the RCP (Category II)

NRC Guidelines: The RCP should be organized with the view toward achieving an acceptable degree of staff efficiency, place appropriate emphasis on major program functions, and provide specific lines of supervision from program management for the execution of program policy. Where regional offices or other government agencies are utilized, the lines of communication and administrative control between these offices and the central office (Program Director) should be clearly drawn to provide uniformity in inspection policy, procedures and supervision.

Questions:

1. Attach dated copies of your internal RCP organization charts.

   See Attachment B.

2. How is the RCP organized so as to provide specific lines of supervision from program management for executing program policy?

   See Attachment A and B.

3. If regional offices are used:

   a. To whom do regional personnel report administratively?

      Chicago I & E Head and Head, I & E

   b. To whom do regional personnel report technically?

      Chicago I & E Head and Head, I & E

4. If the RCP contracts with other agencies to administer the program:

   N/A

   a. Identify the contracting agencies and indicate their responsibilities.

   b. To whom do contract personnel report administratively?

   c. To whom do contract personnel report technically?

5. If the State's regulatory authorities are divided between agencies, what procedures and memoranda are in effect to provide clear understanding of the divisions of responsibilities and requirements for coordination?

   N/A Authority not divided.

C. Legal Assistance (Category II)

NRC Guidelines: Legal staff should be assigned to assist the RCP, or procedures should exist to obtain legal assistance expeditiously. Legal staff should be knowledgeable regarding the RCP program, statutes, and regulations.

Questions:

1. Are legal staff members assigned to assist the RCP or do procedures exist to obtain legal assistance expeditiously?

   Yes - 4 assigned

2. Is the legal staff knowledgeable regarding the RCP, statutes, regulations and needs?

   Yes

3. If legal assistance was utilized since last review, provide a summary of the circumstances.

   Development of draft proposed rules and escalated enforcement procedures. Comments of SFES (NUREG 0904 Supplement 1) for West Chicago. Evaluation of financial surety arrangements. Compliance with FOI request.

D. Technical Advisory Committees (Category II)

NRC Guidelines: Technical Committees, Federal Agencies, and other resource organizations should be used to extend staff capabilities for unique or technically complex problems. A State Medical Advisory Committee should be used to provide broad guidance on the uses of radioactive drugs in or on humans. The Committee should represent a wide spectrum of medical disciplines. The Committee should advise the RCP on policy matters and regulations related to use of radioisotopes in or or humans. Procedures should be developed to avoid conflict of interest, even though Committees are advisory. This does not mean that representatives of the regulated community should not serve on advisory committees or not be used as consultants.

Questions:

1. Discuss practices followed for obtaining technical assistance when needed (e.g., consultants, technical and medical advisory committees, licensees, the NRC and other State and Federal Agencies).

   Division Chief or Office Manager calls NRC, Medical Use Advisory Board members, etc. and request assistance when they determine such would be beneficial.

2. What steps are taken to avoid conflicts of interest?

   When matters are being discussed that involve such potential, affected members are asked not to vote or are not called upon for comment. See Attachment T-Executive Order Number 3 (1977).

3. Are any committees involved in setting policies? If so, explain.

   Radiation Protection Advisory Council, Medical Use Advisory Board and soon an Industrial Use Advisory Board recommends, reviews, advises per statute for RPAC and the charge for MUAB and IUAB. For LLW, Technical Advisory Panel on Evaluation of Alternative Low-Level Waste Disposal Systems, and Citizens' Advisory Group on Low-Level Radioactive Waste as described in attachment. (See Attachment C).

4. Attach a list showing the membership, specialties and affiliations of the Medical and/or Technical Advisory Committees.

   See Attachments C and D.

5. Indicate whether the advisory committees are established by statute, by appointment of the Governor, by appointment of the State Board of Health, by appointment of the Agency, or by other means.

No change since program statement. Established by statute. Some members are appointed by the Director of Nuclear Safety, others by statute.

6. What is the formal meeting frequency of each committee, and are minutes of committee meetings prepared?

   Annually as a minimum. Yes

7. What was the date of the last formal meeting of each committee?

   RPAC and MUAB - October 29, 1987.
   CAGLLRW and TAPEALLWDS - July 22, and 23, 1987. CAGLLRW - November 9, 1987.

8. Are individual committee members contacted for consultation?

   Yes

9. Discuss how each committee is used, the average workload placed on the committee, and the remuneration, if any.

   No remuneration. Primary workload has been review of proposed rules and occasional telephone calls (monthly). We ask for policy guidance and impact of proposed action.

III. MANAGEMENT AND ADMINISTRATION

A. Quality of Emergency Planning (Category 1)

NRC Guidelines: The State RCP should have a written plan for response to such incidents as spills, overexposures, transportation accidents, fire or explosion, theft, etc. The Plan should define the responsibilities and actions to be taken by State agencies. The Plan should be specific as to persons responsible for initiating response actions, conducting operations and cleanup. Emergency communication procedures should be adequately established with appropriate local, county and State agencies. Plans should be distributed to appropriate persons and agencies. NRC should be provided the opportunity to comment on the Plan while in draft form. The plan should be reviewed annually by Program staff for adequacy and to determine that content is current. Periodic drills should be performed to test the plan.

Questions:

1. Is the RCP responsible for its own emergency plan or are accidents involving radioactive materials incorporated into a comprehensive State plan developed and administered by another State agency? Please provide copies of all applicable plans for review.

No change since program statement except for Vol. 10 Illinois Plan for Radiological Accidents (IPRA). Volume 10 is being amended to incornorate attachment 0.

2. What written procedures or plans does the RCP use for responding to incidents involving radioactive materials?

   See response to question III.A.1.

3. If the plan covers major accidents at nuclear facilities, how does it cover non-catastrophic incidents such as those involving transportation of materials?

   A separate volume for non-catastrophic incidents.

4. How does the plan define responsibilities and actions to be taken by all State Agencies (initiating response actions, operations, cleanup, etc.)?

   See Attachment E.

5. How does the plan provide for notification of and communications with appropriate government agencies?

   See Attachment E.

6. How is the response program organized so that qualified individuals are readily available through identifiable channels of communication?

   See Attachment E.

7. Has the plan been distributed to all participating agencies?

   Yes

8. Has the NRC had opportunity to comment on the plan in draft form?

   Yes

9. Is the plan reviewed annually by the RCP for adequacy and to assure the content is current?

   Yes

10. Are drills performed periodically to test the plan for radioactive materials emergencies? Explain, for example, how non-routine office hours communications are checked.

    Yes. Drills for IPRA are designed to test response to nay types of accidents/incidents.

    Same communication network for both.

B. Budget (Category II)

NRC Guidelines: Operating funds should be sufficient to support program needs such as: staff travel necessary to conduct an effective compliance program, including routine inspections, followup or special inspections (including pre-licensing visits) and responses to incidents and other emergencies, instrumentation and other equipment to support the RPC, administrative costs in operating the program including rental charges, printing costs, laboratory services, computer and/or word processing support, preparation of correspondence, office equipment, hearirg costs, etc. as appropriate. Principal operating funds should be from sources which provide continuity and reliability, i.e., general tax, license fees, etc. Supplemental funds may be obtained through contracts, cash grants, etc.

Questions:

1. What fiscal year is used by your State?

   July 1-June 30

2. Indicate the amount for funds obtained from each revenue source (fees, State General funds, HHS, NRC environmental monitoring or transportation surveillance contracts, EPA, FDA and others).

	Appropriated Fiscal Year 1987		Appropriated Fiscal Year 1988
GRF	2,037,574	GRF	1,417,685
RPF	957,600	RPF	613,904
NSEP	9,869,695	NSEP	12,285,630
LLW	1,933,442	LLW	10,340,430
RWSPC	39,072	TOTAL	24,657,649
TOTAL	14,837,383		

GRF = General Revenue Fund

RPF = Radiation Protection Fund

NSEP = Nuclear Safety Emergency Preparedness Fund

LLW = Low-Level Waste Fund

RWSPC = Radioactive Waste Site Perpetual Care Fund

3. Show the total amounts assigned to:

   a. the total radiation control program

      $24.7 million

   b. the radioactive materials program.

      $1.2 million for licensing and inspection

4. What is the change in budget from the previous year and what is the reason for the change (new programs, change in emphasis, statewide reduction, etc.)?

   Increase for new programs regarding low-level waste and nuclear power plant monitoring.

5. Describe your fee system, if you have one, and give the percentage of cost recovery. Enclose a copy of the fee schedule.

   Unchanged since program statement. 26% cost recovery for FY88.

   See Part 331 of regulations. Almost same as NRC system.

6. Does the RCP administer the fee system?

   Yes

7. What recourse does the RCP have in the event of non-payment?

   Department's recourse for failure of a licensee/applicant to pay appropriate fees is codified at 32 Ill. Adm. Code 331.310 which states:

   In any case where the Department finds that an applicant or a licensee has failed to pay a prescribed fee required in this Part, the Department will not process any application and will have the authority to suspend or revoke, in accordance with 32 Ill. Adm. Code 330.500, any license issued to the applicant or licensee.

   In addition, Section 223 of the Radiation Protection Act states that:

   Any person who shall violate any of the provisions of, or who fails to perform any duty imposed by this Act, or who violates any determination or order of the Department,

promulgated pursuant to this Act, is guilty of a Class A misdemeanor; provided each day during which violation continues shall constitute a separate offense; and in addition thereto, such person may be enjoined from continuing such violation as hereinafter provided.

The penalties provided herein shall be recoverable in an action brought in the name of the people of the State of Illinois by the Attorney General.

8. Overall, is the funding sufficient to support all of the program needs? If not, specify the problem areas.

Yes N/A

C. Laboratory Support (Category II)

NRC Guidelines: The RCP should have the laboratory support capability in-house, or readily available through established procedures, to conduct bioassays, analyze environmental samples, analyze samples collected by inspectors, etc., on a priority established by the RCP.

Questions:

1. Are laboratory services readily available in-house or through other departments within the State organization?

In house. Same as in program statement.

2. If services are provided by other departments, discuss the arrangements, supervision, charges and interdepartmental communications.

N/A

3. If laboratory services must be provided by a non-State agency:

N/A

a. Discuss the contractual arrangements.

b. Is the party providing the service a State licensee?

c. If a State licensee provides the service or equipment, what are the costs?

4. Describe the capability of the laboratory as follows:

No change since program statement.

a. Can it qualitatively and quantitatively analyze low-energy beta emitters?

Yes

b. Can it qualitatively and quantitatively analyze alpha emitters?

Yes

c. Can it selectively determine the presence and quantity of gamma emitters?

Yes

d. Can it handle samples in any physical form - wipes, liquids, solids, gaseous?

Yes

e. Does the lab participate in a periodic quality control program.

Yes

5. How much time does it take to obtain the results from sample analyses on both a routine basis and on an emergency basis?

Routine - one to two weeks; Emergency, next day

6. List the number and types of laboratory instrumentation and services available.

Same as in program statement. A GM pancake probe with sample holder is available for counting filter paper discs. A RASCAL with appropriate probes is generally available but is being serviced.

D. Administrative Procedures (Category II)

NRC Guidelines: The RPC should establish written internal procedures to assure program functions are carried out as required and to provide a high degree of uniformity and continuity in regulatory practices. These procedures should address internal processing of license applications, inspection policies, decommissioning and license termination, fee collection, contacts with communication media, conflict of interest policies for employees, and other functions required of the program. Administrative procedures are in addition to the technical procedures utilized in licensing, inspection and enforcement.

Questions:

1. What procedures are established to assure adequate and uniform regulatory practices (e.g., administrative procedures, policy memos, licensing and inspection guides, escalated enforcement procedures, decommissioning procedures, etc.)?

   See attached procedures (Attachment F).

2. To what extent are the procedures documented?

   See attached procedures (Attachment F).

3. If your State has separate licensing and inspection staffs, what are the procedures used to assure adequate communication between the two staffs?

   Copies of all correspondence are placed in both sets of files. Section Heads keep each other informed. Division Chief signs all documents after review and ensures communication is effective. Joint staff meetings are held. Frequent telephone communication is encouraged.

4. How are personnel kept informed of current regulatory policies and practices?

   Copies distributed and circulated to all technical staff. Telephone calls, meetings and memoranda used as needed.

5. If your State collects fees, are fee collection duties assigned to non-technical staff?

   Yes. Effective about December 8, 1987, a Nuclear Safety Associate I, Theresa Head will begin taking over these duties. This is a technical position at a level below health physicists and above clerical.

6. How are contacts with communication media handled?

   All go to Director or PIO.

7. What procedures exist to ensure timely release of factual information on matters of interest to the public, the NRC and Agreement States?

   The Director of the Illinois Department of Nuclear Safety and the Department's Public Information Officer are the primary individuals who release information to the public. The Department has made it a high priority to provide factual information to the general public. This is

evidenced by the publication of the Department's newsletters, annual reports, and its sponsoring of numerous conferences. The Department has five advisory boards including a citizens advisory group. The Department does issue press releases as necessary to report to the general public facts concerning radiation incidents. The Department will disclose to the public administrative orders and other information pertaining to the compliance activities in accordance with the requirements of the Freedom of Information Act and 2 Ill. Admin. Code 1076. In addition, press releases may be issued for civil penalties and orders.

The Director personally ensures that this is done by monitoring all correspondence with assistance of clerical, legal, management, and technical staff instructed to keep him informed of all items of potential interest to any of these groups.

8. If your RCP has regional offices:

   a. what procedures are in effect to assure the regions have complete copies of the procedures and files?

      Complete copies provided by Head, I & E or Chief, Division of Nuclear Materials.

   b. how often are periodic staff meetings held with headquarters staff?

      Daily communication. Annual Department meeting and semi-annual Division meeting. Head, I & E and/or Chief make additional trips as needed.

   c. how often are periodic visits/audits made by headquarters staff to regional offices?

      At least quarterly

   d. how is uniformity assured?

      Head, I & E reviews all reports and letters and accompanies inspectors.

   e. how is supervision handled?

      No change since program statement. The Head of Chicago I & E has supervisory authority in the regional office.

E. Management (Category II)

NRC Guidelines: Program management should receive periodic reports from the staff on the status of regulatory actions (backlogs, problem cases, inquiries, regulation revisions). RCP management should periodically assess workload trends, resources and changes in legislative and regulatory responsibilities to forecast needs for increased staff, equipment, services and fundings. Program management should perform periodic reviews of selected license cases handled by each reviewer and document the results. Complex licenses (major manufacturers, large scope - Type A Broad, or potential for significant releases to environment) should receive second party review (supervisory, committee, or consultant). Supervisory review of inspections, reports and enforcement actions should also be performed. When regional offices or other government agencies are utilized, program management should conduct periodic audits of these offices.

Questions:

1. How does the staff keep program management abreast of the status of regulatory actions (such as backlog, problem cases, inquiries, and revision of regulations)?

   Verbal communication of problems, monthly status reports and computer tracking printouts.

2. a. Is a periodic statistical tabulation of licenses, licensees, inspections and backlogs prepared by category?

      Yes

   b. If so, specify how frequently the tabulation is prepared.

      As needed but at least monthly.

3. How does RCP management assess workload trends and resources in order to determine future needs or the need for program changes?

   Six month planning sessions using workload reports from data base.

4. How does the RCP management keep abreast of changes in legislative and regulatory responsibility?

   Direct involvement of legislative liaison (PIO) in legislative activities, and legal staff reports to Division.

5. Discuss the procedures followed by licensing supervision or RCP management to monitor licensing quality.

   Head of Licensing reviews every document after reviewer has finished it. Independent review of selected license

applications is performed. For example, Office Manager and Division Chief and reviewer all worked on INS application.

6. Discuss the procedures used for supervisory review of inspection reports.

   Head of I & E reviews inspection reports and letters and assures every violation is accurate and well documented and required information has been included.

7. What license review practices are followed for unusual or complex license applications?

   Two license reviewers (one senior or the Head, Licensing Section or Division Chief) independently review document and/or NRC technical assistance is requested.

8. If applicable, discuss the procedures used for supervisory review of work performed by contract agencies or regional offices.

   Same as #6 above.

F. Office Equipment and Support Services (Category II)

NRC Guidelines: The RCP should have adequate secretarial and clerical support. Automatic typing and Automatic Data Processing and retrieval capability should be available to larger (greater than 300-400 licenses) programs. Similar services should be available to regional offices, if utilized. Professional staff should not be used for fee collection and other clerical duties.

1. a. In terms of the person-year/100 licenses figure, what level of secretarial/clerical support is provided?

      4 clerical and 1 temporary. 0.4/100

   b. If your program has regional offices, provide the figures for the support for those offices.

      One clerical for the regional office. 0.12/100

2. Describe the ADP and word processing capabilities available to the RCP.

   NBI word processing system. One terminal for each clerical plus NBI word processing on each of five computers used by professional staff.

G. Public Information (Category II)

NRC Guidelines: Inspection and licensing files should be available to the public consistent with State administrative procedures. It is desirable, however, that there be provisions for protecting from public disclosure proprietary information and information of a clear personal nature. Opportunity for public hearings should be provided in accordance with UMTRCA and applicable State administrative procedure laws.

Questions:

1. Are licensing and inspection files available for inspection by the public?

   Yes

2. Can medical and proprietary data be withheld?

   Yes

3. What other parts, if any, are not available?

   See Attachment G.

4. What written procedures and laws govern this? Please provide reference citations.

   See Attachment G.

5. For mill States, are opportunities provided for public hearings in accordance with UMTRCA and applicable State administrative procedures and statutes?

   N/A

IV. PERSONNEL

A. Qualifications of Technical Staff (Category II)

NRC Guidelines: Professional staff should have a bachelor's degree or equivalent training in the physical and/or life sciences. Additional training and experience in radiation protection for senior personnel should be commensurate with the type of licenses issued and inspected by the State.

Written job descriptions should be prepared so that professional qualifications needed to fill vacancies can be readily identified.

Questions:

1. Do all professional personnel hold a bachelor's degree or have equivalent training in the physical or life sciences?

   Yes

2. What additional training and experience do the senior personnel need to have in radiation protection?

   An equivalent of at least one year inspection and/or licensing experience plus satisfactory completion of most of the following courses as applicable to their job assignment: Basic Health Physics Course or equivalent, Inspection Procedures Course, Licensing Practices and Procedures, Well-Logging for State Regulatory Personnel, Industrial Radiography, Radiation Protection Engineering, and Medical Uses of Radionuclides.

3. What written position descriptions describe the duties, responsibilities and functions of each professional position?

   N.S. Inspector III & IV
   N.S. Health Physicist I & II
   N.S. Engineer I & II
   N.S. Scientist I & II
   N.S. Manager I & II

B. Staffing Level (Category II)

NRC Guidelines: Staffing level should be approximately 1-1.5 person-year per 100 licenses in effect. RCP must not have less than two professionals available with training and experience to operate RCP in a way which provides continuous coverage and continuity. For States regulating uranium mills and mill tailings, current indications are that 2-2.75 professional person-years of effort, including consultants, are needed to process a new mill license (including in situ mills) or major renewal, to meet requirements of Uranium Mill Tailings Radiation Control Act of 1978. This effort must include expertise in radiological matters, hydrology, geology, and structural engineering.

Questions:

1. Complete a table as below, listing the person-years of effort applied to the agreement or radioactive material program by individual. Include the name, position, fraction of time spent and the duty (licensing, inspection, administration, etc.).

Name	Position	FTE%	Area of Effort
Terry Lash	Director	20%	Administration
Paul Eastvold	Manager	50%	Administration
Michael Ewan	Assistant Manager	50%	Administration
Steven Collins	Division Chief	100%	Administration
David Price	Licensing Head	100%	Administration & Licensing
Sharyn Eklund	License Reviewer	100%	Licensing
Steve Hsu	License Reviewer	100%	Licensing
Lori Podolak	License Reviewer	100%	Licensing
Bruce Sanza	Inspection Head	100%	Administration, I & E
Andy Gulczynski	Reg. Insp. Sup.	100%	Administration and Inspection
George Merrihew	Inspector	100%	Inspection
Robin Bauer	Inspector	100%	Inspection
Joanne Kark	Inspector	100%	Inspection
John Papendorf	Inspector	100%	Inspection
Sheryl Soderdahl	H.P.I.	100%	Support Services
Robert Minue	Nuclear Engineer I	100%	Support Services
David LaTouche	Waste Analysis Section Head	100%	Waste Analysis & Technical Support
Mike Momemi	Scientist II	100%	Waste Analysis & Technical Support
George FitzGerald	Engineer I	100%	Waste Analysis & Technical Support

Total: 17.2 Person-Years

This table does not include Emergency Planning, Environmental and Transportation program staff.

2. Compute the person-year effort of person-years per 100 licenses (excluding mills and burial sites). Show calculation.

   17.2 person-years/1250 licenses = 1.4

3. Is the staffing level adequate to meet normal and special needs and backup?

   Yes

C. Staff Supervision (Category II)

NRC Guidelines: Supervisory personnel should be adequate to provide guidance and review the work of senior and junior personnel. Senior personnel should review applications and inspect licenses independently, monitor work of junior personnel, and participate in the establishment of policy. Junior personnel should be initially limited to reviewing license applications and inspecting small programs under close supervision.

Questions:

1. Identify the junior and senior personnel.

   Currently, all personnel are considered senior.

2. a. What duties are assigned to junior personnel?

   Accompany senior inspectors. Learn licensing by using the licensing workshop. Inspect smaller less complicated programs and work under close supervision.

   b. Do they review applications and perform inspections independently?

   No

3. a. What duties are assigned to senior personnel?

   Inspection and Licensing independently or under general supervision. Train and supervise junior personnel. Suggest policy and procedure changes.

   b. Do they independently review and monitor the work of junior personnel?

   Yes

4. Is there adequate supervisory or senior guidance and direction for junior personnel?

   Yes

5. Discuss procedures established to ensure supervisory review of the licensing, inspection and enforcement functions.

   All written documents require supervisory review and approval. Records document review by staff and supervisor.

6 a. Are RCP staff members allowed to consult or work part time for State licensees?

   No. It is considered conflict of interest.

   b. If so, how are conflicts of interest avoided?

   N/A

D. Training (Category II)

NRC Guidelines: Senior personnel should have attended NRC core courses in licensing orientation, inspection procedures, medical practices and industrial radiography practices. (For mill States, mill training should also be included.) The RCP should have a

program to utilize specific short courses and workshops to maintain appropriate level of staff technical competence in areas of changing technology.

Questions:

1. List materials personnel and their attendance at training courses that they have attended.

   Additions to program statement follow:

Name of Student	Course	Agency Sponsor	Dates
–	–	–	–
–	–	–	–

   See Attachment U.

2. How does the RCP utilize short courses and workshops to maintain staff proficiency?

   Staff attends both, whenever possible, to ensure proficiency. Budget is adequate to support attendance.

E. Staff Continuity (Category II)

NRC Guidelines:

Staff turnover should be minimized by combinations of opportunities for training, promotions, and competitive salaries. Salary levels should be adequate to recruit and retain persons of appropriate professional qualifications. Salaries should be comparable to similar employment in the geographical area. The RCP organization structure should be such that staff turnover is minimized and program continuity maintained through opportunities for promotion. Promotion opportunities should exist from junior level to senior level or supervisory positions. There also should be opportunity for periodic salary increases compatible with experience and responsibility.

Questions:

1. Identify the RCP employees who have left the program since the last review and give the reasons for the turnovers. Also state whether the positions are presently vacant, filled (name replacement), abolished or other status.

   Steve Meiners. - more money. Licensing position filled by an inspector, Lori Podolak. Inspection position vacant, interviews being scheduled for January, 1988.

2. List the RCP salary schedule:

Position Title	Annual Salary Range
— No change since program statement.	—

3. Compare your salary schedule with similar employment alternatives in the same geographical area, such as industrial, medical, academic or other departments within your State.

New comparison being done now. See Attachment H.

4. What opportunities are there for promotion within the RCP organizational structure without a staff vacancy occurring?

Inspector III to IV, and H P I to II, Engineer I to II, and Scientist I to II

V. LICENSING

A. Technical Quality of Licensing Actions (Category I)

NRC Guidelines: The RCP should assure that essential elements of applications have been submitted to the agency, and which meet current regulatory guidance for describing the isotopes and quantities to be used, qualifications of persons who will use material, facilities and equipment, and operating and emergency procedures sufficient to establish the basis for licensing actions. Prelicensing visits should be made for complex and major licensing actions. Licenses should be clear, complete, and accurate as to isotopes, forms, quantities, authorized uses, and permissive or restrictive conditions. The RCP should have procedures for reviewing licenses prior to renewal to assure that supporting information in the file reflects the current scope of the licensed program.

Questions:

1. How many specific licenses are currently in effect?

Approximately 1,250

2. a. How many new licenses (not amendments in entirety) have been issued since the agreement became effective.

22.

b. How many were major licenses?

One (Interstate Nuclear Services, a nuclear laundry).

3. How many specific licenses were terminated since the agreement?

34.

4. How many amendments were issued during the review period?

   154.

5. Identify unusual or complex licenses issued since the last review, including name and license number.

   Interstate Nuclear Services (INS) - nuclear laundry - IL-1008-01

6. Note any variance in licensing policies and procedures granted since the last review.

   Authorization for all group medical licensees for up to 15 mCi (rather than 3 mCi) for calibration and reference sources per 10 CFR 35 revision.

7. Do you require license applicants to submit details on their radwaste packaging and shipping procedures?

   Yes.

8. a. When do you require licensees to submit contingency plans?

   We use the same criteria as NRC. All applicable licenses had already submitted plans before June 1, 1987.

   b. List the licensees who have been required to submit contingency plans.

   Allied Chemical, General Electric in Morris, Amersham, and ADCO.

9. How many prelicensing visits were made during this review period?

   None since June 1. None for new applications. Prelicensing action visits were made to ADCO, Chem-Nuclear, and Ralph Davis, M.D. (pre-termination).

10. What criterion does the State use to determine the need for a prelicensing visit?

    a. When proposed operations are highly "hardware" or "facility" dependent or are uniquely technical or extraordinary.

    b. When proposed operations present potential for hazard(s) of high personnel exposure, facility or personnel contamination or material release to environment.

c. When proposed operations might result in high profile for public interest or concern.

11. How do you ensure up-to-date information has been submitted prior to a license renewal?

Review age of previous submitted procedures, compliance history, licensee staff turnover; compare old procedures to latest guidance and changes in applicable technology; complete file review including new procedures.

12. Do license files contain all necessary data required to evaluate an application prior to issuing a license?

Yes

13. Has the State taken any unusual licensing action with respect to licensees operating under multiple jurisdiction?

No

14. Prepare a table as below showing the State's major licensees with name, number and type.

INCLUDE:

- Broad (Type A) Licenses
- LLW Disposal Licenses
- LLW Brokers
- Major Manufacturers and Distributors
- Uranium Mills
- Large Irradiators (Pool Type or Other)
- Other Licenses With a Potential Significant Environmental Impact
- Other Licensees You Consider to be "Major" Licensees

Name	License Number	Type
See Attachment I.		

B. Adequacy of Product Evaluations (Category I)

NRC Guidelines: RCP evaluations of manufacturer's or distributor's data on sealed sources and devices outlined in NRC, State, or appropriate ANSI Guides, should be sufficient to assure integrity and safety for users. The RCP should review manufacturer's information in labels and brochures relating to radiation health and safety, assay, and calibration procedures for adequacy. Approval documents for sealed source or device designs should be clear, complete and accurate as to isotopes, forms, quantities, uses, drawing identifications, and permissive or restrictive conditions.

Questions:

1. How many new and revised evaluations were made of sealed sources and devices during the review period?

   Five (5) evaluations received since June 1, 1987.

2. How many SS&D evaluations have been made for which approval documents have not yet been prepared?

   Evaluations completed; documents in draft stage.

3. How does the RCP evaluate manufacturer's data on SS&D's to ensure integrity and safety for users?

   RMRM guide, applicable ANSI Guides, NRC Reg. Guide 10.10 and 10.11.

4. Do you determine whether the manufacturer's information on labels and brochures relating to health, safety, assay, and calibration procedures is adequate on all products?

   Yes

C. Licensing Procedures (Category II)

NRC Guidelines: The RCP should have internal licensing guides, checklists, and policy memoranda consistent with current NRC practice. License applicants (including applicants for renewals) should be furnished copies of applicable guides and regulatory positions. The present compliance status of licensees should be considered in licensing actions. Under the NRC Exchange-of-Information program, evaluation sheets, service licenses, and licenses authorizing distribution to general licensees should be submitted to NRC on a timely basis. Standard license conditions comparable with current NRC standard license conditions should be used to expedite and provide uniformity in the licensing process. Files should be maintained in an orderly fashion to allow fast, accurate retrieval of information and documentation of discussions and visits.

Questions:

1. Has the RCP developed its own licensing procedures or does it use NRC guides? Please provide copies for review.

   Uses NRC guides but is developing own.

2. What licensing guides, checklists and policy memoranda are made available to the staff?

   All NRC SRP's, Reg. Guides and checklist, IDNS checklists for medical, non-medical, portable and semi-portable gauge applications.

3. What guides and/or regulatory position statements are furnished to license and renewal applicants?

   Those mentioned in #2 above when requested and for new applicants. When guides are rewritten, a guide will be sent with each renewal/expiration notice.

4. Describe the system for advising classes of licensees of new licensing procedures and regulations.

   Mass mailout to all appropriate classes of licensees.

5. a. How are licensing actions coordinated with the compliance staff?

      Copies of applications and correspondence are sent to inspection staff. Head, Licensing Section does not approve amendments when compliance action is pending.

   b. Are relicensing actions taken while enforcement action is pending?

      No, unless action is needed to correct a violation.

6. For what length of time are various categories of licenses issued?

   5 years

7. a. Does the RCP use standard licensing conditions?

      Yes

   b. If so, how does the RCP assure they are comparable with those used by NRC?

      By comparison with NRC standard conditions and review by NRC State Agreements Program.

8. Are the licensing conditions on file in the RCP office and with NRC?

   Yes. See Attachment J.

9. What SS&D sheets, service, distribution and "E" licenses are available for RCP staff use?

   All

10. Describe your practices for distributing SS&D sheets, as well as GL distribution and service licenses, to the NRC.

    Transmitted within 30 days to State Agreements Program.

11. Describe your procedures for maintaining the license files (How are files and folders arranged? Are telephone contacts and visits documented? Who is responsible for filing materials in folders?).

    See Attachment K.

    Yes - Licensing Staff responsible; except in Chicago, the Inspection Staff.

12. Are there opportunities for license reviewers to accompany inspectors?

    Yes

VI. COMPLIANCE

A. Status of Inspection Program (Category I)

NRC Guidelines: The State RCP should maintain an inspection program adequate to assess licensee compliance with State regulations and license conditions. The RCP should maintain statistics which are adequate to permit Program Management to assess the status of the inspection program on a periodic basis. Information showing the number of inspections conducted, the number overdue, the length of time overdue and the priority categories should be readily available. There should be at least semiannual inspection planning for the number of inspections to be performed, assignments to senior vs. junior staff, assignments to regions, identification of special needs and periodic status reports. When backlogs occur, the program should develop a plan to reduce the backlog. The plan should iden- tify priorities for inspections and establish target dates and milestones for assessing progress.

Questions:

1. How is statistical information maintained about the inspection program to permit periodic assessment of its status by RCP management?

Data input by Section Head of I & E on commercial data base system.

2. Prepare a table as below, indicating the number of inspections made in the review period, by category and priority.

License Category	Scheduled Frequency	Inspection Priority	Number of Inspections
-	-	-	-
-	-	-	-
See Attachment L.			
-	-	-	-

3. Prepare a table (or tables) as below which identify the Priority 1, 2, and 3 licensees with overdue inspections. Include the license category, the due date, and the number of months the inspection is overdue. (If list is extensive, a comparable computer printout is acceptable.)

Licensee	Category	Priority	Due Date	Months Overdue
-	-	-	-	-
-	-	-	-	-
See Attachment M.1				
-	-	-	-	-

4. Prepare a table as below indicating the number of overdue license inspections for Priorities 4 through 7.

License Category	Priority	Number Overdue
-	-	-
-	-	-
See Attachment M.2		
-	-	-

5. How are inspection schedules planned and how are the dates and personnel assignments made?

Inspector consultation with I & E Section Head or Chicago I & E Head.

B. Inspection Frequency (Category I)

NRC Guidelines: The RCP should establish an inspection priority system. The specific frequency of inspections should be based upon

the potential hazards of licensed operations, e.g., major processors, broad licensees, and industrial radiographers should be inspected approximately annually -- smaller or less hazardous operations may be inspected less frequently. The minimum inspection frequency including for initial inspections should be no less than the NRC system.

Questions:

1. Enclose a copy of the State s priority system.

   See Appendix A of Attachment N (Materials Inspection Program)

2. Who assigns licenses to the priority categories?

   Head, Inspection and Enforcement Section with concurrence of Division Chief.

3. Discuss any significant variances in the State's priorities from the NRC priority system.

   A more frequent priority is planned for some categories until one inspection is conducted on each licensee in those categories and reassessment of preferred frequency is completed.

4. Is the inspection priority system designed to assure that the more hazardous and/or complex operations are inspected at an appropriate frequency?

   Yes

5. Describe the State's policy for unannounced inspections and exceptions to the policy.

   See Attachment N.

6. Describe the State's policy for conducting follow-up inspections.

   See Attachment N.

7. a. Does the RCP inspect out of state firms working in the State under reciprocity or under State licensure?

      Yes

   b. How many reciprocity notices were received?

c. How many were inspected since the last review?

None. Most were lead paint analyzers and moisture/density gauges.

C. Inspector's Performance and Capability (Category I)

NRC Guidelines: Inspectors should be competent to evaluate health and safety problems and to determine compliance with State regulations. Inspectors must demonstrate to supervision an understanding of regulations, inspection guides, and policies prior to independently conducting inspections. The compliance supervisor (may be RCP manager) should conduct annual field evaluations of each inspector to assess performance and assure application of appropriate and consistent policies and guides.

Questions:

1. a. Does the senior inspector or supervisor periodically accompany the inspectors?

Yes

b. Are these accompaniments documented?

Yes

2. List the number of supervisory accompaniments of inspectors since the last review meeting and identify the persons accompanied and the supervisors.

Head, I & E - one; Head, Chicago I & E - two after training. Bruce Sanza - George Merrihew; Andy Gulczynski, John Papendorf and Robin Bauer

D. Responses to Incidents and Alleged Incidents (Category I)

NRC Guidelines: Inquiries should be promptly made to evaluate the need for onsite investigations. Onsite investigations should be promptly made of incidents requiring reporting to the Agency in less than 30 days (10 CFR 20.403 types). For those incidents not requiring reporting to the Agency in less than 30 days, investigations should be made during the next scheduled inspection. Onsite investigations should be promptly made of non-reportable incidents which may be of significant public interest and concern, e.g., transportation accidents. Investigations should include in depth reviews of circumstances and should be completed on a high priority basis. When appropriate, investigations should include reenactments and time-study measurements (normally within a few days). Investigation (or inspection) results should be documented and enforcement action taken when appropriate. State licensees and the NRC should be notified of

pertinent information about any incident which could be relevant to other licensed operations (e.g., equipment failure, improper operating procedures). Information on incidents involving failure of equipment should be provided to the agency responsible for evaluation of the device for an assessment of possible generic design deficiency. The RCP should have access to medical consultants when needed to diagnose or treat radiation injuries. The RCP should use other technical consultants for special problems when needed.

Questions:

1. How does the RCP respond to incidents and alleged incidents?

   See Attachment O.

2. Are major incidents (10 CFR 20.403 types requiring reporting in less than 30 days) investigated on a priority basis?

   Yes

3. Are other incidents followed up in the next scheduled inspection?

   Yes

4. Are non-reportable incidents that may be of significant public interest and concern promptly investigated?

   Yes

5. How many incident investigations were conducted during the review period?

   June 1 through November 1, 1987 - 2 NARM, 4 byproduct

6. Attach as an appendix a summary of each incident investigated. Include documentation of investigation results, enforcement action when appropriate, any reenactment and time motion studies, as well as notification of the NRC and state licensees of incident information that may have been relevant to other licensed operations.

   See copies in Attachment P.

7. Were any incidents attributed to generic-type equipment failure?

   Possibly, see MQS report in Attachment P. The State of the manufacturer has been notified.

8. What action was or would be taken by the RCP pertaining to incidents attributable to generic equipment failures in regard

to notification of the NRC, other licensees and the regulatory agency which approved the device?

Notify state that evaluated device, NRC, and licensees with similar devices.

9. If a failure should occur in equipment manufactured by a State licensee, what action would be taken to:

a. stop the manufacture or force changes in design?

Modify license or issue order.

b. assure retrofit of existing devices?

Modify license or issue order.

10. When are other State licensees and the NRC notified of pertinent information about an incident?

When implications are known to be substantial or when sufficient information is known that could benefit them.

11. a. Are medical consultants available and used when necessary?

Yes

b. Is the State aware of the availability of medical consultants from NRC?

Yes, REACT/S.

12. Explain any use of other technical consultants for special problems encountered in incident investigations.

N/A We have not used any yet. NRC or DOE would be called for assistance.

13. Were there any incidents since the last review meeting that met Abnormal Occurrence Report (AOR) criteria?

No

E. Enforcement Procedures (Category I)

NRC Guidelines: Enforcement Procedures should be sufficient to provide a substantial deterrent to licensee noncompliance with regulatory requirements. Provisions for the levying of monetary penalties are recommended. Enforcement letters should be issued within 30 days following inspections and should employ appropriate regulatory language clearly specifying all items of noncompliance and health and safety matters

identified during the inspection and referencing the appropriate regulation or license condition being violated. Enforcement letters should specify the time period for the licensee to respond indicating corrective actions and actions taken to prevent recurrence (normally 20-30 days). The inspector and compliance supervisor should review licensee responses. Licensee responses to enforcement letters should be promptly acknowledged as to adequacy and resolution of previously unresolved items. Written procedures should exist for handling escalated enforcement cases of varying degrees. Impounding of material should be in accordance with State administrative procedures. Opportunity for hearings should be provided to assure impartial administration of the radiation control program.

Questions:

1. Describe the State's enforcement procedures.

   Same as in program statement except as noted in questions 2-16 below.

2. If the RCP can apply civil penalties, explain the procedures for keying monetary penalties to violations.

   Being developed. New rule to be promulgated.

3. Describe the State's provisions for criminal penalties.

   Same as in program statement.

4. Describe the policies in effect for issuing field forms equivalent to NRC form 591 or letters for enforcement action.

   See Attachment Q.

5. Are there written procedures for handling escalated enforcement cases? Please provide copies for review.

   See Attachment Q.

6. Can the State issue Orders; including Emergency Orders?

   Yes

7. Can the RCP impound radioactive material?

   Yes

8. Do State administrative procedures permit the opportunity for hearings in major enforcement cases?

   Yes

9. If during the review period the State has issued orders, applied civil penalties, sought criminal penalties, impounded sources, or held formal enforcement hearings, identify these cases and enclose copies of the pertinent State enforcement correspondence or orders:

Name of License	License Number	Type of Enforcement Action	Date of Action
–	–	–	–
–	–	None –	–
–	–	–	–

10. Are enforcement letters issued within 30 days of the inspection?

    Yes

11. Are enforcement letters written in regulatory language and reference regulations and license conditions?

    Yes

12. Do the enforcement letters clearly differentiate between noncompliance items and health and safety recommendations?

    Yes

13. If applicable, do the letters separate actions subject to the State radiation control act and State OSHA regulations?

    N/A

14. a. Are enforcement letters issued by inspectors or supervisors?

    Division Chief

    b. If issued by inspectors, do they undergo supervisory review prior to dispatch?

    N/A

15. Do enforcement letters require the licensee to respond within a stated time period? Note the period.

    Yes - 30 days

16. a. Are licensee's responses to enforcement letters reviewed by the inspector and the supervisor?

    Yes

b. Are they acknowledged?

Yes

17. Has the State taken escalated enforcement action against licensees who operate in multiple jurisdictions.

No

F. Inspection Procedures (Category II)

NRC Guidelines: Inspection guides, consistent with current NRC guidance, should be used by inspectors to assure uniform and complete inspection practices and provide technical guidance in the inspection of licensed programs. NRC Guides may be used if properly supplemented by policy memoranda, agency interpretations, etc. Written inspection policies should be issued to establish a policy for conducting unannounced inspections, obtaining corrective action, following up and closing out previous violations, interviewing workers and observing operations, assuring exit interviews with management, and issuing appropriate notification of violations of health and safety problems. Procedures should be established for maintaining licensees' compliance histories. Oral briefing of supervision or the senior inspector should be performed upon return from nonroutine inspections. For States with separate licensing and inspection staffs, procedures should be established for feedback of information to license reviewers.

Questions:

1. Has the RCP developed its own inspection guides or does it use NRC guides?

See Attachment R.

2. Are current copies of the internal inspection forms and guides on file in the RCP office and with NRC? Attach revisions or new guides developed since the last review.

Yes

3. Are inspectors furnished copies of inspection guides?

Yes

4. Discuss the use or non-use of inspection policy memoranda, interpretations, etc., to supplement inspection guides.

Used as needed for particular cases and situations. Each staff member maintains a personal copy.

5. Are there written procedures establishing policy for:

   a. unannounced inspections? Yes, see Attachment N.
   b. obtaining corrective action? Yes, see Attachment Q
   c. following-up and closing out previous citations of violations? Yes, see Attachment R.
   d. exit interviews with management? Yes, see Attachment R.
   e. issuing notices of violations and findings of health and safety problems? Yes, see Attachment Q.
   f. categorizing the seriousness of violations? Yes, see Attachment R.

   Please provide copies of these procedures for review.

   See Attachments as stated in a - f above.

6. What procedures have been established for maintaining licensee's compliance histories?

   Data base system for number of violations. License file has separate section for I & E.

7. Does the senior inspector or supervisor orally debrief the inspector upon return from inspections?

   Yes

8. What procedures are there for providing feedback from inspectors to licensing?

   Inspectors call license reviewer or Head, Licensing Section and discuss problems detected in license.

G. Inspection Reports (Category II)

NRC Guidelines: Findings of inspections should be documented in a report describing the scope of inspections, substantiating all items of noncompliance and health and safety matters, describing the scope of licensees' programs, and indicating the substance of discussions with licensee management and licensee's response. Reports should uniformly and adequately document the results of inspections including confirmatory measurements, status of previous non-compliance and identify areas of the licensee's program which should receive special attention at the next inspection. Reports should show the status of previous noncompliance and the independent physical measurements made by the inspector.

Questions:

1. How do inspection reports document the inspection that was conducted and the inspection findings? Explain how the reports substantiate noncompliance and health and safety matters and describe the scope of the licensee's program.

See Attachment R.

2. Do the reports

   a. relate the discussions held with license management and interviews with workers?

      Yes

   b. include independent measurements conducted by the inspector?

      Yes

   c. document follow-up of previous citations of violations made by the inspector?

      Yes

   d. identify areas of the licensee's program needing special attention at the next inspection?

      Yes

3. Are inspectors routinely inspecting radwaste package preparation and shipping practices and do the reports document the results?

   Yes

H. Confirmatory Measurements (Category II)

NRC Guidelines:

Confirmatory measurements should be sufficient in number and type to ensure the licensee's control of materials and to validate the licensee's measurements. RCP instrumentation should be adequate for surveying license operations (e.g., survey meters, air samplers, lab counting equipment for smears, identification of isotopes, etc.). RCP instrumentation should include the following types: GM Survey Meter: 0-50 mr/hr; Ion Chamber Survey Meter: several r/hr; micro-R-Survey Meter; Neutron Survey Meter: Fast & Thermal; Alpha Survey Meter: 0-100,000 c/m; Air Samplers: Hi and Low Volume: Lab Counters: Detect 0.001 uc/wipe; Velometers; Smoke tubes; Lapel Air Samplers. Instrument calibration services or facilities should be readily available and appropriate for instrumentation used. Licensee equipment and facilities should not be used unless under a service contract. Exceptions for other State Agencies, e.g., a State University, may be made. Agency instruments used for surveys and confirmatory measurements should be calibrated within the same time interval as required of the licensee being inspected.

Questions:

1. Discuss the State's policy for conducting independent measurements as a part of each inspection (e.g., air samples, wipe samples, air flows, dose rates). Are these measurements documented in the inspection report?

   It is policy that independent measurements are made during each inspection and documented in the inspection report. These measurements range from simple dose rate measurements using a portable survey meter at facilities such as gauge licensees, to air-sampling, contamination studies using wipe tests, and dose rate measurements at larger facilities (e.g., manufacturers and broad scope licensees). Measurements shall be sufficient to verify the accuracy of licensee measurements.

   Yes.

2. List the instrumentation that is readily available to the RCP for surveying licensed operations and conducting appropriate independent measurements.

   Same as in program statement.

3. Describe the method used for calibrating survey instruments and the frequency of calibration.

   Same as in program statement.

VII. OTHER ASPECTS OF THE STATE'S RADIATION CONTROL PROGRAM

A. Non-Agreement Sources of Radiation

Questions:

1. Are the licensing and inspection procedures for NARM the same as for agreement materials?

   Yes

2. Give the number of X-ray machine (or tube) and accelerator registrants by category, e.g., dental, medical, industrial, etc.

This is a totally separate program at equal level (a Division) in the Department.

X-RAY FACILITIES WHICH IDNS REGULATES

Facility Category	Facility Class	Registered Facilities	Number of X-ray Tubes
Dental	A	5197	11,811
Hospitals	C	270	4,796
Medical Clinics	B	1033	1,563
Chiropractic	B	804	810
Medical (Private Practices)	B	408	524
Veterinary	A	545	613
Podiatric	B	429	459
School	C	64	309
Portable X-ray Services	C	65	112
Industrial	C	431	1,116
Accelerators			75
Medical		76	76
Other		18	18
TOTAL	9246		22,113

VALUES AS OF JANUARY 1987

3. How many machine and accelerator inspections were made in the last year (or other appropriate interval)?

Between July 1, 1986 and June 30, 1987 - 6006 tubes by state inspectors and 4350 tubes by non-state inspectors.

4. Does the State license X-ray or nuclear medicine technologists?

Yes - A separate Division performs this function. 9700 accredited in FY87.

B. Environmental Monitoring Program

Questions:

1. To indicate the scope of the environmental monitoring program, describe:

a. types of media sampled
b. the number and locations of stations sampled
c. the frequency of sample collection
d. the analyses run on each type of sample

See Attachment S.

2. Is a copy of the latest environmental surveillance report available for review?

   Yes

C. Other Areas

This section of the review is for the use of either the reviewer or the RCP to address issues pertaining only to the individual State, to new areas of concern, or to generic or State-specific issues raised by NRC staff.

1. Other Generic Issues

Questions:

a. For radiography inspections, to what extent do you make inspections at temporary job sites?

   25% of license inspections are to include temporary job sites.

b. Are you finding Ir-192 contamination on radiographic equipment?

   No

c. What are the State's plans to adopt the low-level waste (LLW) manifest rule (if not already adopted)?

   Already adopted.

d. For States with LLW disposal sites, what are the State's plans to implement 10 CFR 61?

   Already in regulations.

e. Will your State have access to a LLW disposal site after January 1986. If not, what contingency plans are there for after January 1986?

   Yes - N/A

f. Have copies of 10 CFR 61 and NRC technical positions on waste form and classification been distributed to State licensees? If there has been feedback please provide documentation.

   Not done by IDNS but assumed done by NRC before June 1, 1987. Copies of Illinois regulations have been distributed.

g. Have there been any applications or approvals for incineration, compacting or disposal?

None since Chem-Nuclear, Inc. which was completed before June 1, 1987.

h. What use is being made of IE information notices?

Circulated to all staff. Distributed to licensees when deemed appropriate by Division Chief or Office Manager.

i. Identify any group of materials licensees for which the State has increased the frequency of inspection due to problems with that general category. Please discuss the nature of those problems.

None, N/A

j. With respect to medical licensees, is the State making any effort during inspections of nuclear pharmacies to determine whether the licensee is actually conducting the required molybdenum breakthrough tests, i.e., what is the State doing in addition to record reviews to establish compliance or noncompliance with the requirement?

Yes - Licensee asked to demonstrate knowledge of procedure or inspector observes performance of procedure. Inspections usually done early in the day so observation is possible.

k. Is the State mounting any special effort to look at the possibility of reconcentration of radionuclides in sanitary sewers and sewage treatment plants as part of the regular inspection program? If so, please describe.

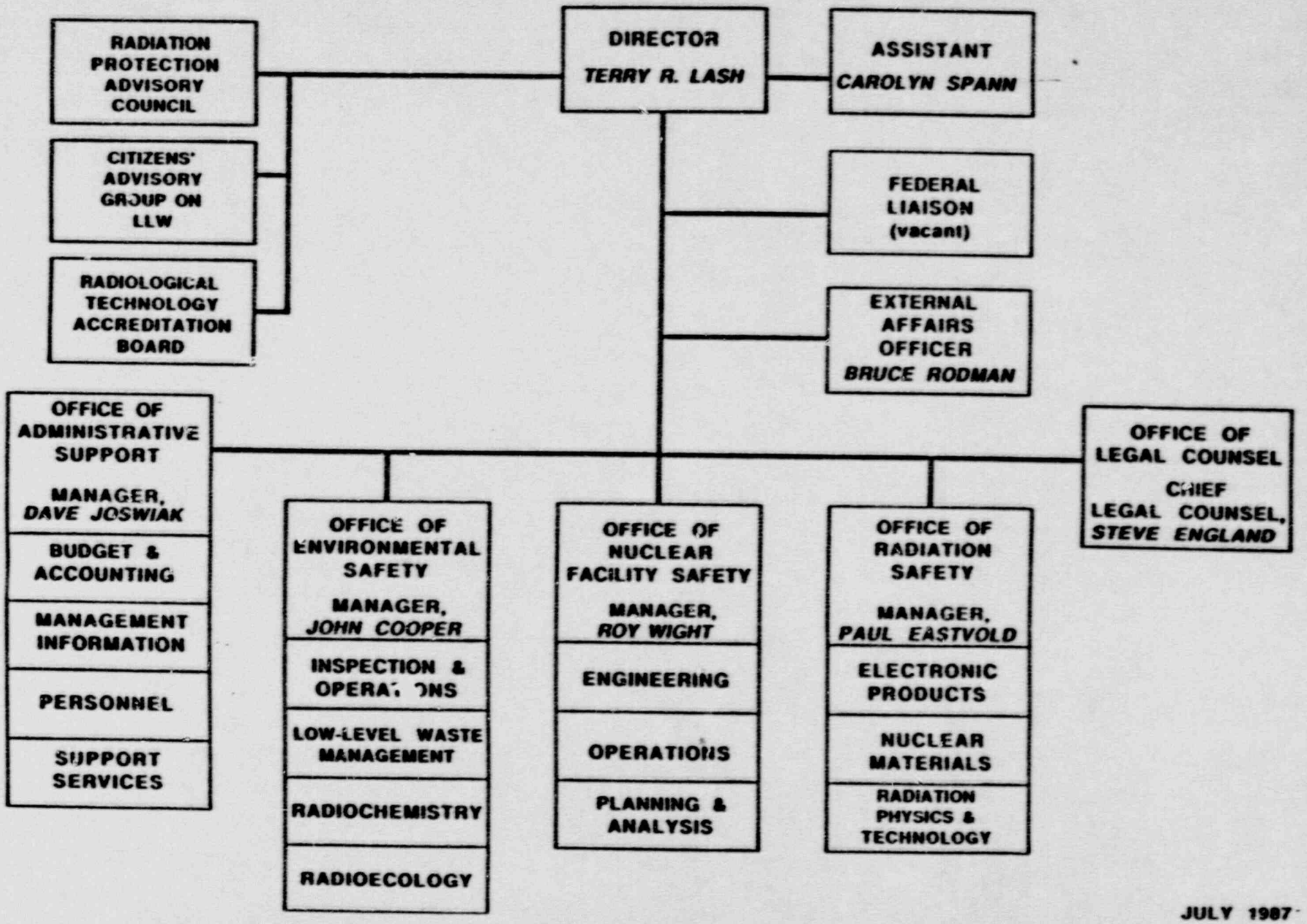
We are monitoring the literature. Several studies have been done particularly in Chicago area. Occasional special studies are done, such as for new types of facilities (e.g., nuclear laundries).

Index of Attachments to Appendix A

A,B	Organization Charts
C,D	Advisory Committees*
E	(Not Used)
F	Administrative Procedures Manual*
G	Freedom of Information Legislation and Procedures*
H	Salary Comparison Study*
I	Major Materials Licensees in Illinois
J	Standard License Conditions*
K	Filing Procedures*
L	Inspection Data
M.1,M.2	Overdue Inspections
N	Materials Inspection Priorities
O	Investigations and Special Surveys Procedures*
P	Summary of Incidents*#
Q	Compliance and Enforcement Procedures*
R	Inspection Procedures*
S	Environmental Monitoring Summary*
T	Executive Order Number 3-1977*
U	Training Summary*
V	Registration, Quarterly Report and Overexposure Procedures*
W	License Issuance Cover Letter*
X	Licensing Policies and Interpretations*
Y	Current and Active Licensing Memoranda*
Z	Memo re Overdue Inspection
AA	Memo re ALARA Inspection Documentation
AB	Memo re Sampling of Sewerage Sludge
AC	Memo re License Checklists

*Attachment has been reviewed by the reviewer and a copy is retained in the Regional files.
#Copy sent to AEOD 12/21/87.

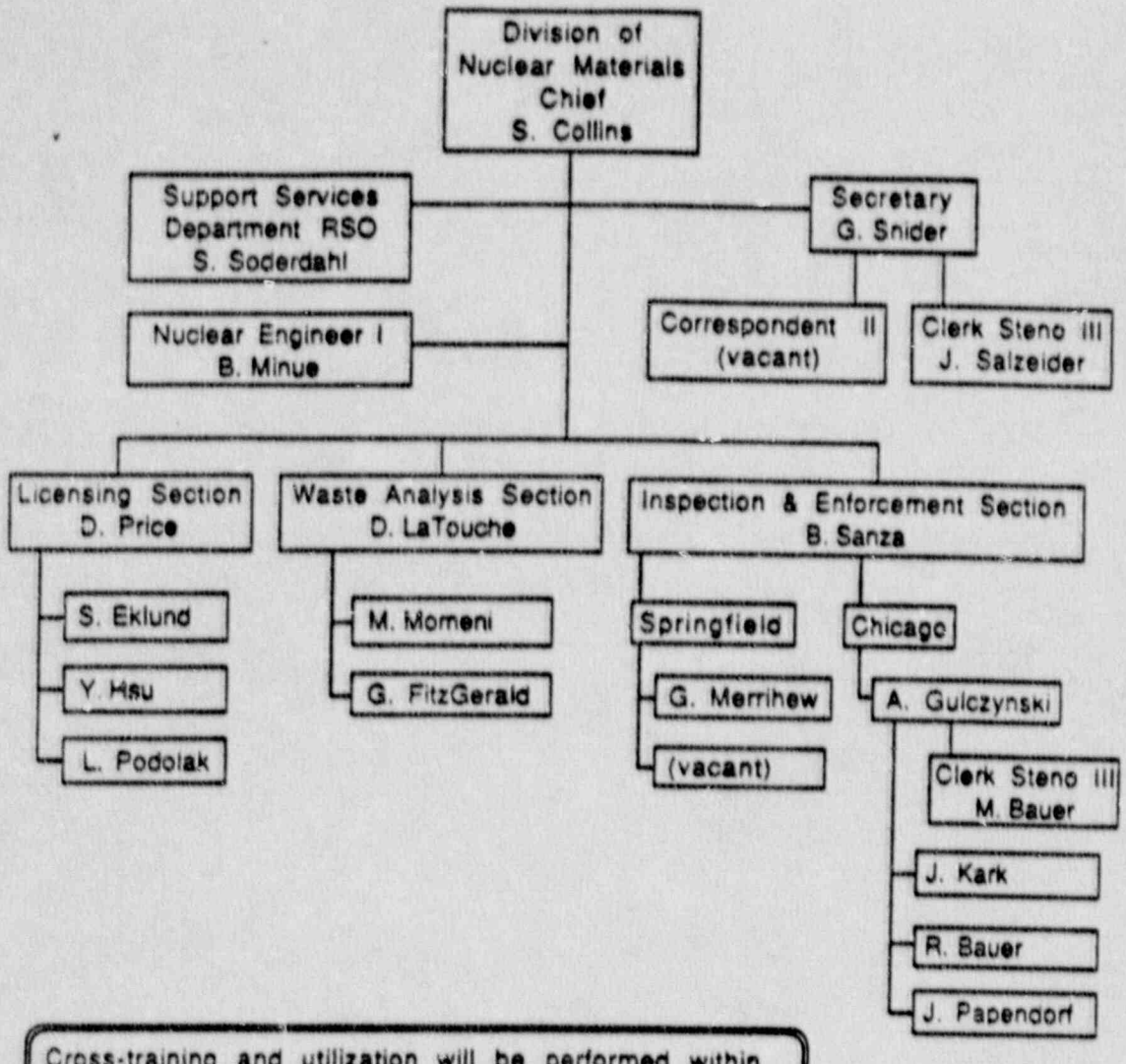
ILLINOIS DEPARTMENT OF NUCLEAR SAFETY



ATTACHMENT A

JULY 1987

ATTACHMENT B



Cross-training and utilization will be performed within and across sections as much as possible.

Waste Analysis Section supports License Section reviews as requested/needed.

Licensing and Inspection & Enforcement Sections support Waste Analysis Section efforts as requested/needed.

Approved 10/1/87

ATTACHMENT B
(continued)

LLW Facility Licensing

Docketing Applications	Nuclear Materials Division
Technical Review	Office of Environmental Safety - Geology, Hydrology, Engineering, Modeling, LLW Policy, LLW Disposal, Operations, Environmental Monitoring, and Environmental Impact Review
Regulatory Compliance	Nuclear Materials Division - Health Physics, Operational Radiation Safety
License Format and Maintenance	Nuclear Materials Division
Licensing Fees	Office of Administration
Consistency with State and Compact Requirements	Manager, Office of Environmental Safety

ATTACHMENT C

Radiation Protection Advisory Council (RPAC)
July, 1987

Franklin S. Alcorn, M.D.
Rush-Presbyterian-St. Luke's Medical Center
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1753 W. Congress Parkway
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Ex Officio Members

Gwen Martin, Director
Tom Wallin (Representative)
Illinois Department of Labor
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217/782-4102

Mary B. Bushnell, Chairman
Mary Frances Squires (Representative)
Illinois Commerce Commission
Director of Legislative and Intergovernmental Affairs
527 East Capitol
Springfield, Illinois 62706
217/785-2449

ATTACHMENT C
(continued)

Medical Use Advisory Board

Charge

The Medical Use Advisory Board (MUAB) is appointed by the Director of the Department of Nuclear Safety as a subcommittee of the Radiation Protection Advisory Council. It is the duty of MUAB to review the policies and programs of the Department as they apply to use of radiation sources in or on humans. It is also the Board's duty to provide broad guidance in regulating the medical use of radiation sources and to assist in standards development and policy formulation. MUAB shall consider specific medical questions referred to it by Department staff. It shall render expert opinion regarding medical uses of radiation sources and the qualifications of individuals seeking to use radiation sources in the healing arts.

July 13, 1987

ATTACHMENT C
(continued)

Industrial Use Advisory Board

Charge

The Industrial Use Advisory Board (IUAB) is appointed by the Director of the Department of Nuclear Safety as a subcommittee of the Radiation Protection Advisory Council. It is the duty of IUAB to review the policies and programs of the Department as they apply to use of radiation sources for industrial applications. It is also the Board's duty to provide broad guidance in regulating the non-medical use of radiation sources and to assist in standards development and policy formulation. The IUAB shall consider specific questions referred to it by Department staff. It shall render expert opinion regarding industrial uses of radiation sources and qualifications of individuals seeking to use radiation sources for industrial applications.

ATTACHMENT C
(continued)

Advisory Groups and Boards

Citizens' Advisory Group on Low-Level Radioactive Waste

The Director established this advisory group in 1985 to provide the Department with ideas and recommendations on all topics pertinent to low-level radioactive waste management and disposal in Illinois, including site selection criteria, developer selection criteria, waste treatment standards and public involvement. The Citizens' Advisory Group is an important part of the Department's effort to provide for meaningful public participation on low-level radioactive waste management issues. The Group met five times in 1986.

Current Members

Melanie Baise; Illinois South Project
Bernard M. Berta; Grundy County Board
Cindy Bloom; Radiation Safety Services
Del Butterfield; Commonwealth Edison Co.
Susan Head; Illinois Farm Bureau
Robert Henkin, M.D.; Loyola University Medical Center
Joanna Hoelscher; Citizens for a Better Environment
Jack Honey; Allied Corporation
Gerhardt Jaspers; Southern Illinois University
Herb Klynstra
David Kraft; Nuclear Energy Information Services
Linda McLean; Medi-Physics, Inc.
A.T. McMaster
Carolyn Raffensperger; Sierra Club
Eugene Rennels; Mayor, West Chicago
Virginia Scott; Illinois Environmental Council

Former Members

Gretchen Monti; The League of Women Voters
Norman Peter; Illinois Association of County Boards
Dale Ritter; Department of Geology, Southern Illinois University
John Sherman; Illinois South Project

Organizational affiliations are indicated for identification purposes only.

Facilitators

Gloria Craven; Gloria Craven & Associates
Fran Irwin; The Conservation Foundation
Grant Thompson; The Conservation Foundation

Radiation Protection Advisory Council

This Council provides technical advice and assistance to the Department on all aspects of its radiation protection programs. The seven-member Council is appointed by the Governor and the members' backgrounds reflect varied interests in nuclear energy and ionizing radiation within the State.

Members

Franklin S. Alcorn, M.D.; Rush-Presbyterian-St. Luke's Medical Center
Herman Cember, Ph.D.; Northwestern University
Thomas L. Gilbert, Ph.D.; The Argonne National Laboratory
Allen F. Hrejsa, Ph.D.; Lutheran General Hospital
Lawrence H. Lanzl, Ph.D.; Rush-Presbyterian-St. Luke's Medical Center
George H. Miley, Ph.D.; University of Illinois
Jill White Sullivan, M.D.; St. John's Hospital, SIU School of Medicine

Organizational affiliations are indicated for identification purposes only.

ATTACHMENT C
(continued)

Ex Officio Members

Illinois Department of Labor
Gwen Martin, Director

Illinois Commerce Commission
Mary B. Bushnell, Chairman

Radiologic Technology Accreditation Board

This 12-member advisory Board is appointed by the Governor, and the members represent various aspects of the medical uses of radiation. The Board consults with and makes recommendations to the Department on the rules and procedures of accrediting radiologic technologists.

Members

Barbara Burnham, R.T.; LaGrange Memorial General Hospital
Raymond L. DelFava, M.D.; St. Francis Hospital
Arnold Feldman, Ph.D.; The Methodist Medical Center of Illinois
Thomas W. Fenger, B.S., R.T.(N); St. Francis Hospital Medical Center
Edwin J. Harris, D.P.M.
Mack W. Hollowell, M.D.
Lawrence Levin, D.C.
Edward May, M.D.; Condell Memorial Hospital
Charles M. Schoenfeld, D.D.S.; American Dental Association, Council on Materials, Instruments and Equipment
Alan J. Stutz, M.D.; St. John's Hospital
Phyllis Thompson, B.A., R.T.(T); College of St. Francis
Claudette G. Varricchio, D.S.N., R.N.; Niehoff School of Nursing, Loyola University

Organizational affiliations are indicated for identification purposes only.

Technical Advisory Panel on Evaluation of Alternative Low-Level Waste Disposal Systems

This Advisory Panel is composed of seven experts with a variety of backgrounds pertinent to evaluating advanced concepts for the design of alternative low-level waste disposal facilities. The Director appointed the Technical Advisory Panel to provide assistance to the Department in evaluating disposal facility design for the low-level radioactive waste disposal facility. Selecting the disposal facility design components best suited to the specific needs of Illinois and the Central Midwest Compact Region is of foremost importance in assuring the long-term safety and environmentally-sound management of low-level radioactive waste.

Members

E. William Colglazier, Ph.D.; University of Tennessee
Fred Donath, Ph.D.; The Earth Technology Corporation
Ted Greenwood, Ph.D.; Columbia University
J. Howard Kittel; The Argonne National Laboratory (Retired)
Richard Lester, Ph.D.; Massachusetts Institute of Technology
John Till, Ph.D.; Radiological Assessments Corporation
Paul Ziemer, Ph.D.; Purdue University

Organizational affiliations are indicated for identification purposes only.

ATTACHMENT D

Medical Use Advisory Board (MUAB)
November 4, 1987

Name	Address	Field
Dr. Ernest W. Fordham	Rush-Presbyterian-St. Luke's Medical Center 1753 West Congress Parkway Chicago, IL 60612	Nuclear Medicine
Dr. Steven M. Pinski	Micheal Reese Hospital 29th Street & Ellis Avenue Chicago, IL 60616	Nuclear Medicine
Dr. Malcolm D. Cooper	University of Chicago 5841 South Maryland Avenue Chicago, IL 60637	Nuclear Medicine
Dr. Jeanette Moulthrop	Evanston Hospital 2650 Ridge Avenue Evanston, IL 60201	Nuclear Medicine
Dr. Jeff L. Smoron	St. Joseph's Hospital 77 North Airlite Street Elgin, IL 60123	Radiation Therapist
Dr. Lawrence H. Lanzl	5750 South Kenwood Avenue Chicago, IL 60637	Medical Physics
Dr. Allen F. Hrejsa	Lutheran General Hospital 1775 Dempster Street Park Ridge, IL 60068	Medical Physics
Dr. Stephen Andresen	Carle Clinic 602 West University Urbana, IL 61801	Radiation Therapist
Dr. Franklin S. Alcorn	Rush-Presbyterian-St. Luke's Medical Center Dept. of Diagnostic Radiology and Nuclear Medicine 1753 West Congress Parkway Chicago, IL 60612	Radiologist

ATTACHMENT D
(continued)

Dr. Jill White Sullivan	St. John's Hospital SIU School of Medicine 800 East Carpenter Springfield, IL 62701	Radiologist

Attachment 2

ILLINOIS DEPARTMENT OF NUCLEAR SAFETY
DIVISION OF NUCLEAR MATERIALS
ILLINOIS LICENSE MANAGEMENT SYSTEM

DATE: 11/09/87

MAJOR LICENSEES IN ALPHABETICAL ORDER PAGE: 1

FACILITY NAME	LICENSE NO.	LICENSE CATEGORY
ABBOTT LABS.	12-00621-03	003A - 85000 MANUFACTURING AND/OR DISTRIBUTION
ABBOTT LABS.	12-00621-08	003K - 85000 MANUFACTURING AND/OR DISTRIBUTION
ABBOTT LABS.	12-00621-02	003L - 80200 RESEARCH & DEVELOPMENT - TYPE B BROAD
ADCO SERV., INC.	12-11286-01	004B - 83000 WASTE REPACKAGING AND REPROCESSING
ADCO SERVICES INC	80-00304-01	004C - 83000 WASTE REPACKAGING AND REPROCESSING
ALNOR INSTRUMENTS COMPANY	80-00319-01	003J - 85000 MANUFACTURING AND/OR DISTRIBUTION
AMERICAN DENTAL ASSOC.	12-09088-02	003M - 80100 RESEARCH & DEVELOPMENT - TYPE A BROAD
AMERICAN FIRE & ELECTRIC IND..	12-23581-01	003P - 85000 MANUFACTURING AND/OR DISTRIBUTION
AMERICAN SCIENTIFIC PRODUCTS	80-00386-01	003I - 85000 MANUFACTURING AND/OR DISTRIBUTION
AMERSHAM CORP.	12-12836-04	003K - 85000 MANUFACTURING AND/OR DISTRIBUTION
AMERSHAM CORP.	12-12836-03	003D - 85000 MANUFACTURING AND/OR DISTRIBUTION
AMERSHAM CORP.	12-12836-02	003I - 07253
AMERSHAM CORP.	12-12836-05	003D - 85000 MANUFACTURING AND/OR DISTRIBUTION
AMERSHAM CORP.	12-12836-01	003A - 85000 MANUFACTURING AND/OR DISTRIBUTION
AMERSHAM CORPORATION	80-00290-01	003A - 85000 MANUFACTURING AND/OR DISTRIBUTION
AMOCO CORP.	12-13837-01	003L - 80100 RESEARCH & DEVELOPMENT - TYPE A BROAD
ARMOUR PHARMACEUTICAL CO.	12-01371-03	003P - 80100 RESEARCH & DEVELOPMENT - TYPE A BROAD
ATOMIC ENERGY OF CANADA LTD.	12-18482-01	003P - 85000 MANUFACTURING AND/OR DISTRIBUTION
AUGUSTANA COLLEGE	12-17738-01	003M - 81300 ACADEMIC - TYPE C BROAD
BALL PACKAGING PRODUCTS, INC.	13-02557-01	003B - 29600 ANALYTICAL INSTRUMENT
BECKMAN INSTRUMENTS, INC.	12-15201-02	003P - 85000 MANUFACTURING AND/OR DISTRIBUTION
CHEM-NUCLEAR SYS., INC.	12-21214-02	004A - 82000 WASTE BURIAL
CHEM-NUCLEAR SYSTEMS, INC.	39-23004-03	004B - 83000 WASTE REPACKAGING AND REPROCESSING
CHICAGO, UNIVERSITY OF	12-00509-03	007B - 52100 MEDICAL - BROAD
CHILDREN'S MEMORIAL HOSPITAL	12-02184-05	007B - 52100 MEDICAL - BROAD
CHILDRENS MEMORIAL HOSPITAL	80-00221-01	007B - 52100 MEDICAL - BROAD
CHRIST HOSPITAL	12-09239-01	007B - 52100 MEDICAL - BROAD
CLINTON WATCH CO.	12-12687-01	003H - 85000 MANUFACTURING AND/OR DISTRIBUTION
CMI INTL. CORP.	12-24607-01	003B - 85000 MANUFACTURING AND/OR DISTRIBUTION
CONRAC CORP.	12-19060-01	003B - 85000 MANUFACTURING AND/OR DISTRIBUTION
COOK COUNTY HOSPITAL	80-00209-01	007B - 52100 MEDICAL - BROAD
COOK CTY. HOSPITAL	12-00010-05	007C - 52100 MEDICAL - BROAD
E. I. DU PONT DE NEMOURS & CO.	20-00320-19	003A - 85000 MANUFACTURING AND/OR DISTRIBUTION
E. I. DUPONT DENEMOURS AND CO.	80-00419-01	003D - 85000 MANUFACTURING AND/OR DISTRIBUTION
EVANSTON & GLENBROOK HOSPITALS	12-00437-01	007B - 52100 MEDICAL - BROAD
FANSTEEL, INC.	67-09110-00	002D - 95000 RARE EARTH EXTRACTION AND PROCESSING
FJW IND.	12-24671-01	003B - 85000 MANUFACTURING AND/OR DISTRIBUTION
FYRNETICS, INC.	12-16856-01	003H - 85000 MANUFACTURING AND/OR DISTRIBUTION
G. D. SEARLE & CO.	12-00701-02	003M - 80100 RESEARCH & DEVELOPMENT - TYPE A BROAD
GENERAL INSTRUMENT CORP.	12-19460-02	003I - 85000 MANUFACTURING AND/OR DISTRIBUTION
GENERAL INSTRUMENT CORP.	12-16676-01	003B - 85000 MANUFACTURING AND/OR DISTRIBUTION
GENERAL INSTRUMENT CORP.	12-16676-02	003H - 85000 MANUFACTURING AND/OR DISTRIBUTION
GTE PRODUCTS CORP.	20-15464-05	003I - 85000 MANUFACTURING AND/OR DISTRIBUTION
HONEYWELL, INC.	12-12267-02	003B - 85000 MANUFACTURING AND/OR DISTRIBUTION
HONEYWELL, INC.	12-12267-03	003H - 85000 MANUFACTURING AND/OR DISTRIBUTION
HUGHES OPTICAL PRODUCTS, INC.	12-21323-01	003B - 85000 MANUFACTURING AND/OR DISTRIBUTION
IIT RES. INST.	12-00171-04	003L - 80100 RESEARCH & DEVELOPMENT - TYPE A BROAD
IIT RESEARCH INSTITUTE	80-00766-01	003L - 80100 RESEARCH & DEVELOPMENT - TYPE A BROAD
ILLINOIS DEPT. OF NUCLEAR SAFE	12-20084-01	003L - 00000 BROADSCOPE UNLIMITED USE
ILLINOIS INST. OF TECHNOLOGY	12-00527-18	003L - 81100 ACADEMIC - TYPE A BROAD
ILLINOIS MASONIC MEDICAL CTR.	12-02349-05	007C - 52100 MEDICAL - BROAD
ILLINOIS STATE UNIVERSITY	12-01372-02	003M - 81300 ACADEMIC - TYPE C BROAD
ILLINOIS, UNIVERSITY OF AT CHI	12-00088-06	007B - 52100 MEDICAL - BROAD
INDICATOR LITES, INC.	12-24595-01	003B - 85000 MANUFACTURING AND/OR DISTRIBUTION

FACILITY NAME	LICENSE NO.	LICENSE CATEGORY
INTERSTATE NUCLEAR SERVICES	86-01008-01	0006 - 69000 NUCLEAR LAUNDRY
ISOMEDIX, INC.	29-15364-02	003D - 71300 OPEN IRRADIATOR - 10,000 CI
ISOMEDIX, INC.	29-19769-05	003P - 71300 OPEN IRRADIATOR - 10,000 CI
JENCO ENGINEERING CO.	86-01082-01	003R - 85000 MANUFACTURING AND/OR DISTRIBUTION
KAY-RAY, INC.	12-11184-01	003E - 85000 MANUFACTURING AND/OR DISTRIBUTION
KAY-RAY, INC.	12-11184-02	003J - 85000 MANUFACTURING AND/OR DISTRIBUTION
KERR-MCGEE CORP.	71-05830-09	002E - 85000 RARE EARTH EXTRACTION AND PROCESSING
LAKE FOREST COLLEGE	12-11003-04	003M - 81100 ACADEMIC - TYPE A BROAD
LCN CLOSERS	12-19544-02	003H - 85000 MANUFACTURING AND/OR DISTRIBUTION
LCN CLOSERS	12-19544-01	003B - 85000 MANUFACTURING AND/OR DISTRIBUTION
LIXI, INC.	80-00438-01	003L - 80100 RESEARCH & DEVELOPMENT - TYPE A BROAD
LIXI, INC.	12-18215-01	003B - 85000 MANUFACTURING AND/OR DISTRIBUTION
LIXI, INC.	12-18215-02	003D - 85000 MANUFACTURING AND/OR DISTRIBUTION
LOYOLA UNIVERSITY MEDICAL CTR	80-00249-01	007B - 52100 MEDICAL - BROAD
LOYOLA UNIVERSITY MEDICAL CTR.	12-11355-04	007B - 52100 MEDICAL - BROAD
LOYOLA UNIVERSITY OF CHICAGO	12-02570-09	003M - 81100 ACADEMIC - TYPE A BROAD
LOYOLA UNIVERSITY OF CHICAGO	80-00281-01	003L - 81100 ACADEMIC - TYPE A BROAD
MASSAC MEMORIAL HOSPITAL	12-24313-01	007B - 52200 MEDICAL - SPECIFIC
MEDI-PHYSICS, INC.	12-13813-01	003B - 85000 MANUFACTURING AND/OR DISTRIBUTION
MEDI-PHYSICS, INC.	80-00212-01	003A - 85000 MANUFACTURING AND/OR DISTRIBUTION
MEDI-PHYSICS, INC.	12-13813-03	003D - 85000 MANUFACTURING AND/OR DISTRIBUTION
MICHAEL REESE HOSPITAL & MEDIC	12-00074-05	003M - 52100 MEDICAL - BROAD
MICHAEL REESE HOSPITAL & MEDIC	12-00074-04	007B - 52100 MEDICAL - BROAD
MICHAEL REESE MEDICAL CENTER	80-00169-01	007B - 52100 MEDICAL - BROAD
NATIONAL ELECTRONICS, INC.	12-19879-02	003I - 85000 MANUFACTURING AND/OR DISTRIBUTION
NITTAN CORP.	12-16029-01	003H - 85000 MANUFACTURING AND/OR DISTRIBUTION
NITTAN CORP.	12-16029-02	003B - 85000 MANUFACTURING AND/OR DISTRIBUTION
NORTHEASTERN ILLINOIS UNIVERSI	12-01034-04	003M - 81100 ACADEMIC - TYPE A BROAD
NORTHERN ILLINOIS UNIVERSITY	12-10513-03	007L - 81100 ACADEMIC - TYPE A BROAD
NORTHWESTERN MEMORIAL HOSPITAL	86-01077-02	007T - 52100 MEDICAL - BROAD
NORTHWESTERN UNIVERSITY	80-00223-01	003L - 81100 ACADEMIC - TYPE A BROAD
NORTHWESTERN UNIVERSITY	12-00382-03	003L - 81100 ACADEMIC - TYPE A BROAD
NUCLIN DIAGNOSTICS, INC.	12-18228-02	003K - 85000 MANUFACTURING AND/OR DISTRIBUTION
NUCLIN DIAGNOSTICS, INC.	12-18228-01	003B - 85000 MANUFACTURING AND/OR DISTRIBUTION
PACKARD INSTRUMENT CO. INC.	80-00238-01	003C - 85000 MANUFACTURING AND/OR DISTRIBUTION
PACKARD INSTRUMENT CO.	12-04933-04	003J - 85000 MANUFACTURING AND/OR DISTRIBUTION
PACKARD INSTRUMENT CO.	12-04933-06	003I - 85000 MANUFACTURING AND/OR DISTRIBUTION
PACKARD INSTRUMENT CO., INC.	12-04933-02	003B - 85000 MANUFACTURING AND/OR DISTRIBUTION
PITTWAY CORP.	12-15023-01	003B - 85000 MANUFACTURING AND/OR DISTRIBUTION
PITTWAY CORP.	12-15023-02	003H - 85000 MANUFACTURING AND/OR DISTRIBUTION
RADIATION STERILIZERS, INC.	04-19644-01	003G - 71300 OPEN IRRADIATOR - 10,000 CI
RELIABLE ELECTRIC/UTILITY PROD	12-12675-01	003B - 85000 MANUFACTURING AND/OR DISTRIBUTION
RELIABLE ELECTRIC/UTILITY PROD	12-12675-03	003H - 85000 MANUFACTURING AND/OR DISTRIBUTION
RES. PRODUCTS INTL. CORP.	12-16244-02	003I - 85000 MANUFACTURING AND/OR DISTRIBUTION
RES. PRODUCTS INTL. CORP.	12-16244-01	003P - 85000 MANUFACTURING AND/OR DISTRIBUTION
RICHARDSON ELECTRONICS LTD.	12-09745-02	003I - 85000 MANUFACTURING AND/OR DISTRIBUTION
RICHARDSON ELECTRONICS LTD.	12-09745-01	003B - 85000 MANUFACTURING AND/OR DISTRIBUTION
RIXSON/FIREMARK, INC.	12-19060-02	003H - 85000 MANUFACTURING AND/OR DISTRIBUTION
RUSH PRESBYTERIAN ST. LUKES	80-00227-01	007B - 52100 MEDICAL - BROAD
RUSH-PRESBYTERIAN-ST. LUKE'S	12-00929-13	007B - 52100 MEDICAL - BROAD
S. F. APPLIANCE LTD.	69-02580-00	002B - 85000 MANUFACTURING AND/OR DISTRIBUTION
SARGENT-WELCH SCIENTIFIC CO.	12-06661-02	003I - 85000 MANUFACTURING AND/OR DISTRIBUTION
SEATT CORP.	12-15537-02	003H - 85000 MANUFACTURING AND/OR DISTRIBUTION
SEATT CORP.	12-15537-01	003B - 85000 MANUFACTURING AND/OR DISTRIBUTION

ILLINOIS DEPARTMENT OF NUCLEAR SAFETY
DIVISION OF NUCLEAR MATERIALS
ILLINOIS LICENSE MANAGEMENT SYSTEM

DATE: 11/09/87
MAJOR LICENSEES IN ALPHABETICAL ORDER PAGE: 3

FACILITY NAME	LICENSE NO.	LICENSE CATEGORY	
SIEMENS GAMMASONICS, INC.	12-00369-01	003A - 85000	MANUFACTURING AND/OR DISTRIBUTION
SIEMENS GAMMASONICS, INC.	80-00299-01	003A - 85000	MANUFACTURING AND/OR DISTRIBUTION
SOILTEST, INC.	12-13783-01	003P - 85000	MANUFACTURING AND/OR DISTRIBUTION
SOUTHERN ILLINOIS UNIVERSITY	80-00498-01	003L - 81100	ACADEMIC - TYPE A BROAD
SOUTHERN ILLINOIS UNIVERSITY	80-00484-01	003L - 81100	ACADEMIC - TYPE A BROAD
SOUTHERN ILLINOIS UNIVERSITY	12-01109-08	003L - 81100	ACADEMIC - TYPE A BROAD
SUMMA PHARMACY OF CHICAGO	80-00606-01	003C - 66000	NUCLEAR PHARMACY
SUMMA PHARMACY OF CHICAGO INC.	66-01052-01	003C - 66000	NUCLEAR PHARMACY
SYNCOR CORP.	12-21416-01	003C - 66000	NUCLEAR PHARMACY
SYNCOR CORP.	12-19333-02	003C - 66000	NUCLEAR PHARMACY
SYNCOR CORPORATION	80-00492-01	003C - 66000	NUCLEAR PHARMACY
SYNCOR CORPORATION	12-24733-01	003C - 66000	NUCLEAR PHARMACY
SYNCOR CORPORATION	80-00609-01	003C - 66000	NUCLEAR PHARMACY
SYNCOR CORPORATION	80-00558-01	003C - 66000	NUCLEAR PHARMACY
TELEDYNE ISOTOPES, INC.	12-01843-04	003L - 80100	RESEARCH & DEVELOPMENT - TYPE A BROAD
TEST-ER, INC.	12-24609-01	003B - 80400	RESEARCH & DEVELOPMENT - SPECIFIC
TEST-ER, INC.	12-23580-01	007I - 85000	MANUFACTURING AND/OR DISTRIBUTION
TEST-ER, INC.	80-00604-01	003D - 85000	MANUFACTURING AND/OR DISTRIBUTION
TM ANALYTIC, INC.	12-21482-01	007I - 85000	MANUFACTURING AND/OR DISTRIBUTION
TM ANALYTIC, INC.	12-21482-03	003R - 85000	MANUFACTURING AND/OR DISTRIBUTION
TM ANALYTIC, INC.	12-21482-02	007H - 85000	MANUFACTURING AND/OR DISTRIBUTION
TRAVENOL LABS., INC.	12-06570-01	003L - 80100	RESEARCH & DEVELOPMENT - TYPE A BROAD
UNIV OF ILLINOIS AT CHICAGO	80-00488-01	007B - 52100	MEDICAL - BROAD
UNIVERSITY OF CHICAGO	80-00129-01	003L - 81100	ACADEMIC - TYPE A BROAD
UNIVERSITY OF CHICAGO HOSPITAL	80-00204-01	007B - 52100	MEDICAL - BROAD
UNIVERSITY OF ILLINOIS	12-00330-05	003L - 81100	ACADEMIC - TYPE A BROAD
UROLOGIC SURGICAL DEVICES CORP	86-01019-01	003D - 85000	MANUFACTURING AND/OR DISTRIBUTION
VCH INCORPORATED	12-19460-01	003P - 85000	MANUFACTURING AND/OR DISTRIBUTION
WESTINGHOUSE ELETRIC CORP.	12-20378-01	003P - 83000	WASTE REPACKAGING AND REPROCESSING

Number of Inspections Performed 6/1/87 to 12/7/87 Item (2.)

Attachment L

LICENSE CATEGORY	DEFINITION	INSPECTION PRIORITY	
29200	INSTRUMENT CALIBRATION - INHOUSE ONLY	4.0	3
29300 count	LABORATORY ANALYSIS	4.0	2
29600 count	ANALYTICAL INSTRUMENT	4.0	5
29700 count	GAS CHROMATOGRAPH	4.0	12
29800 count	X-RAY FLUORESCENCE ANALYZER	4.0	1
29900 count	ALNOR DEW POINT TESTER	4.0	3
52100 count	MEDICAL - BROAD	1.0	8
52200 count	MEDICAL - SPECIFIC	3.0	53
52400 count	MEDICAL - PRIVATE PRACTICE	3.0	9
00	BRACHYTHERAPY	2.0	1
56000 count	TELETHERAPY	2.0	3
58000 count	VETERINARY MEDICINE	3.0	1
62000 count	GENERAL LICENSE	5.0	4
64000 count	FIXED GAUGE	4.0	22
65000 count	PORTABLE GAUGE	4.0	17
66000 count	NUCLEAR PHARMACY	1.0	3
68000 count	MOBILE NUCLEAR MEDICINE SERVICE	2.0	1
71300 count	OPEN IRRADIATOR - >10,000 CI	1.0	1
00 count	WIRELINE SERVICE	2.0	2
79200 count	SURVEY INSTRUMENT CALIBRATION SERVICE	2.0	1

79400	LEAK TESTING AND INSTR. CALIB. SERVICE (3N + 3P)	2.0	
count			2
79600	MEDICAL SYSTEM SERVICE	3.0	
count			1
79700	FULL H.P. CONSULTING SERVICE (3N + 3P)	2.0	
t			2
80400	RESEARCH & DEVELOPMENT - SPECIFIC	3.0	
count			7
81100	ACADEMIC - TYPE A BROAD	1.0	
count			3
81400	ACADEMIC - SPECIFIC	3.0	
count			4
85000	MANUFACTURING AND/OR DISTRIBUTION	1.0	
count			9
87100	INDUSTRIAL RADIOGRAPHY - FIXED FACILITY	1.0	
count			4
87200	INDUSTRIAL RADIOGRAPHY - TEMPORARY JOB SITES	1.0	
count			5
93100	SOURCE MATERIAL - SHIELDING	4.0	
count			1
94000	SPECIAL NUCLEAR MATERIAL	4.0	
count			3
			193

Overdue Inspections By Priority

Attachment M.1

INSPECTION PRIORITY	LICENSE NO.	FACILITY NAME	LICENSE CATEGORY	DUE DATE	MONTHS OVERDUE
1.0					
	~~12-12675-03~~	~~RELIABLE ELECTRIC/UTILITY PROD~~	~~85000~~	~~08/15/83~~	~~52~~
	12-16244-01	RES. PRODUCTS INTL. CORP.	85000	01/15/84	47
	~~12-16244-02~~	~~RES. PRODUCTS INTL. CORP.~~	~~85000~~	~~01/15/84~~	47
	12-02570-09	LOYOLA UNIVERSITY OF CHICAGO	81100	01/15/84	47
	~~12-15537-02~~	~~SEATT CORP.~~	~~85000~~	~~02/15/84~~	46
	12-01843-04	TELEDYNE ISOTOPES, INC.	80100	05/14/84	43
	12-18482-01	ATOMIC ENERGY OF CANADA LTD.	85000	10/14/84	38
	12-21482-03	TM ANALYTIC, INC.	85000	12/14/84	36
	12-21482-01	TM ANALYTIC, INC.	85000	12/14/84	36
	12-21482-02	TM ANALYTIC, INC.	85000	12/14/84	36
	12-13813-01	MEDI-PHYSICS, INC.	85000	01/14/85	35
	12-18228-02	NUCLIN DIAGNOSTICS, INC.	85000	01/14/85	35
	12-21323-01	HUGHES OPTICAL PRODUCTS, INC.	85000	01/14/85	35
	12-19060-01	CONRAC CORP.	85000	02/14/85	34
	12-19060-02	RIXSON/FIREMARK, INC.	85000	02/14/85	34
	12-10513-07	NORTHERN ILLINOIS UNIVERSITY	81100	03/15/85	33
	12-00701-02	G. D. SEARLE & CO.	80100	03/15/85	33
	39-23[illegible]94-03	CHEM-NUCLEAR SYSTEMS, INC.	83000	04/02/85	32
	12-06661-02	SARGENT-WELCH SCIENTIFIC CO.	85000	05/15/85	31
	86-01033-01	JEMCO ENGINEERING CO.	85000	07/15/85	29
	12-01371-07	ARMOUR PHARMACEUTICAL CO.	80100	08/15/85	28
	12-15201-02	BECKMAN INSTRUMENTS, INC.	85000	09/15/85	27
	12-12836-05	AMERSHAM CORP.	85000	10/15/85	26
	12-04933-06	PACKARD INSTRUMENT CO.	85000	11/15/85	25
	12-04933-02	PACKARD INSTRUMENT CO., INC.	85000	11/15/85	25
	12-04933-04	PACKARD INSTRUMENT CO.	85000	11/15/85	25
	12-06570-01	TRAVENOL LABS., INC.	80100	01/15/86	23
	12-19879-02	NATIONAL ELECTRONICS, INC.	85000	01/15/86	23
	80-00386-01	AMERICAN SCIENTIFIC PRODUCTS	85000	02/08/86	22
	~~12-11355-04~~	~~LOYOLA UNIVERSITY MEDICAL CTR.~~	~~52100~~	~~02/15/86~~	22
	80-00438-01	LIXI, INC.	80100	02/28/86	21
	12-11184-02	KAY-RAY, INC.	85000	03/15/86	21
	12-00621-08	ABBOTT LABS.	85000	03/15/86	21
	12-18215-02	LIXI, INC.	85000	04/15/86	20
	12-16676-02	GENERAL INSTRUMENT CORP.	85000	05/15/86	19
	12-09088-02	AMERICAN DENTAL ASSOC.	80100	05/15/86	19
	12-16676-01	GENERAL INSTRUMENT CORP.	85000	05/15/86	19
	~~93-01037-02~~	~~NORTHWESTERN MEMORIAL HOSPITAL~~	~~52100~~	~~06/15/86~~	18
	12-19544-02	LCN CLOSERS	85000	06/15/86	18
	12-19544-01	LCN CLOSERS	85000	06/15/86	18
	80-00419-01	E. I. DUPONT DENEMOURS AND CO.	85000	07/01/86	17
	12-11184-01	KAY-RAY, INC.	85000	07/15/86	17
	12-00527-18	ILLINOIS INST. OF TECHNOLOGY	81100	09/15/86	15
	12-00171-04	IIT RES. INST.	80100	09/15/86	15
	86-01044-04	AMERSHAM CORP.	85000	10/15/86	14
	69-02580-00	S. F. APPLIANCE LTD.	85000	10/15/86	14
	12-16856-01	FYRNETICS, INC.	85000	12/15/86	12
	12-12675-01	RELIABLE ELECTRIC/UTILITY PROD	85000	12/15/86	12
	12-18228-01	NUCLIN DIAGNOSTICS, INC.	85000	01/15/87	11
	12-11003-04	LAKE FOREST COLLEGE	81100	01/15/87	11
	12-16029-02	NITTAN CORP.	85000	01/15/87	11
	12-16029-01	NITTAN CORP.	85000	01/15/87	11
	12-15537-01	SEATT CORP.	85000	01/15/87	11
	12-00330-09	UNIVERSITY OF ILLINOIS	71200	01/15/87	11
	12-00330-05	UNIVERSITY OF ILLINOIS	81100	01/15/87	11
	12-21416-01	SYNCOR CORP.	66000	02/15/87	10
	12-09745-01	RICHARDSON ELECTRONICS LTD.	85000	02/15/87	10
	[illegible]	RICHARDSON ELECTRONICS LTD.	85000	02/15/87	10

[illegible]	[illegible] CORP.	[illegible]	[illegible]	[illegible]
12-00382-03	NORTHWESTERN UNIVERSITY	81100	04/15/87	8
12-23580-01	TEST-ER, INC.	85000	04/15/87	8
12-23581-01	AMERICAN FIRE & ELECTRIC IND.,	85000	05/15/87	7
12-12687-01	CLINTON WATCH CO.	85000	05/15/87	7
~~12-02360-02~~	~~GUNITE CORPORATION~~	87100	06/15/87	6
12-19460-01	VCH INCORPORATED	85000	06/15/87	6
12-19460-02	GENERAL INSTRUMENT CORP.	85000	06/15/87	6
80-00484-01	SOUTHERN ILLINOIS UNIVERSITY	81100	06/26/87	5
12-00437-01	EVANSTON & GLENBROOK HOSPITALS	52100	07/15/87	5
12-11286-01	ADCO SERV., INC.	83000	07/15/87	5
12-00088-06	UNIVERSITY OF ILL AT CHICAGO	52100	07/15/87	5

count
2.0

86-01024-01	UNIVERSITY OF CHICAGO III	71100	09/14/80	87
86-01024-02	UNIVERSITY OF CHICAGO III	71100	09/14/90	87
80-00514-01	TELEDYNE ISOTOPES	78000	04/24/83	[illegible]
12-10513-04	NORTHERN ILLINOIS UNIVERSITY	71100	11/15/83	[illegible]
12-19296-01	UNITED BLOOD SERV.	71100	03/14/84	[illegible]
12-20227-01	PRM CORP.-MIDWEST CALIBRATION - VII	79400	10/14/84	36
12-00527-19	ILLINOIS INST. OF TECHNOLOGY	71100	12/14/84	34
86-01041-01	GOOD SAMARITAN HOSPITAL	55000	01/14/85	33
42-19912-01	BELL PETROLEUM SURVEYS	77000	10/13/85	26
12-01127-01	SILVER CROSS HOSPITAL	56000	10/14/85	26
86-01074-01	MEDICAL DIAGNOSTICS.	68000	10/14/85	26
12-00610-02	ST. JOSEPH MEDICAL CENTER	55000	10/14/85	26
12-20362-01	STANDARD NUCLEAR CONSULTANTS L	79400	12/14/85	24
12-11702-02	GAMMIE NUCLEAR SERV. CO., INC.	79300	01/14/86	23
12-00963-03	ST. FRANCIS HOSPITAL	56000	02/14/86	22
12-06570-02	TRAVENOL LABS., INC.	71100	02/14/86	22
12-00710-03	AUGUSTANA HOSPITAL	56000	02/14/86	22
12-09567-03	LUTHERAN GENERAL HOSPITAL	56000	03/15/86	21
86-01067-01	SWEDISH AMERICAN HOSPITAL	56000	03/15/86	21
12-09239-02	CHRIST HOSPITAL	56000	03/28/86	20
48-20341-01	DIAGNOSTIC SERVICES, INC.	68000	04/03/86	20
12-03536-04	HINSDALE SANITARIUM & HOSPITAL	56000	04/15/86	20
12-03032-03	ST. JOSEPH HOSPITAL	56000	05/15/86	19
12-17335-01	MEDX, INC./ISO-DATA, INC.	79200	05/15/86	19
12-12418-02	THOREK HOSPITAL & MEDICAL CTR.	56000	05/15/86	19
86-01045-01	ST. MARY'S HOSPITAL	55000	06/15/86	18
12-02497-02	SWEDISH COVENANT HOSPITAL	56000	07/15/86	17
12-05435-03	RESURRECTION HOSPITAL	56000	07/15/86	17
12-01678-02	FAYETTE CTY. HOSPITAL	56000	07/15/86	17
12-12101-02	HERRIN HOSPITAL	55000	08/02/86	16
80-00159-01	THOREK HOSPITAL & MED. CTR.	55000	08/03/86	16
12-00780-04	BLESSING HOSPITAL	56000	08/15/86	16
12-10906-01	PRECISION WELL PERFORATING COR	77[illegible]0	08/15/86	16
12-13194-01	SNYDER DRILLING & WELL SERV.	770[illegible]	08/15/86	16
12-00010-01	COOK CTY. HOSPITAL	56000	09/15/86	15
12-19038-01	WOODDELL LOGGING, INC.	77000	09/15/86	15
12-03415-01	LITTLE CO. OF MARY HOSPITAL	56000	09/15/86	15
12-23312-01	PIONEER LOGGING, INC.	77000	09/15/86	15
12-08614-01	STAR JET OIL WELL SERV., INC.	77000	09/15/86	15
86-01025-01	ST. JOSEPH'S HOSPITAL	56000	10/15/86	14
80-00228-01	ST. JOSEPH MEDICAL CENTER	55000	10/19/86	14
80-00208-01	LOUIS A. WEISS MEMORIAL HOSP.	55000	10/22/86	14
12-06289-02	ELMHURST MEMORIAL HOSPITAL	56000	11/15/86	13
12-01372-02	ILLINOIS STATE UNIVERSITY	81300	11/15/86	13
12-02418-02	LOUIS A. WEISS MEMORIAL HOSPIT	56000	12/15/86	12
80-00118-01	LUTHERAN GENERAL HOSPITAL	55000	01/14/87	11
12-02349-04	ILLINOIS MASONIC MEDICAL CTR.	56000	01/15/87	11
12-23345-01	CUSTOM WIRELINE SERV.	77000	01/15/87	11
12-14132-03	ST. ELIZABETH MEDICAL CTR.	56000	01/15/87	11
12-11355-03	LOYOLA UNIVERSITY MEDICAL CTR.	56000	02/15/87	10
12-11355-05	LOYOLA UNIVERSITY MEDICAL CTR.	71100	02/15/87	10
[illegible]	[illegible]	[illegible]	[illegible]	[illegible]

12-00621-02	ABBOTT LABS.	80200	03/15/87	9
12-00621-09	ABBOTT LABS.	71100	03/15/87	9
12-24348-01	WAUKEGON RADIATION THERAPY CTR	56000	04/15/87	8
12-24320-01	UNITED WIRELINE SERV., INC.	77000	04/15/87	8
12-00929-15	RUSH-PRESBYTERIAN-ST. LUKE'S	71100	05/15/87	7
12-00929-01	RUSH-PRESBYTERIAN-ST. LUKE'S	56000	05/15/87	7
12-20424-01	RADIATION SAFETY SERV.	79400	05/15/87	7
				60
12-00330-10	UNIVERSITY OF ILLINOIS III	52200	03/14/80	9
86-01084-01	CHICAGO STATE UNIVERSITY XII	80400	01/14/82	71
12-18470-01	SOUTHERN ILLINOIS UNIVERSITY XI	81400	04/15/83	56
12-18469-01	SOUTHERN ILLINOIS UNIVERSITY VI	81400	06/15/83	54
12-18835-01	METPATH, INC.	80400	11/14/84	37
12-07524-02	CHICAGO DEPARTMENT OF HEALTH	80400	01/14/85	35
12-15780-01	ILLINOIS, UNIVERSITY OF	81400	03/14/85	33
12-06692-01	FORRO SCIENTIFIC CO.	80400	04/14/85	32
12-18786-01	ILLINOIS, UNIVERSITY OF	81400	07/14/85	29
12-08914-04	EASTERN ILLINOIS UNIVERSITY	81400	12/14/85	24
12-06289-01	ELMHURST MEMORIAL HOSPITAL	52200	02/14/86	22
12-10479-05	ILLINOIS INST. FOR DEVELOPMENT	81400	05/14/86	19
12-14098-01	VAINISI DVM., SAMUEL J.	58000	05/14/86	19
12-16809-01	GOOD SHEPHERD HOSPITAL	52200	06/14/86	18
12-16705-01	ORLAND PARK EQUINE HOSPITAL LT	58000	07/14/86	17
12-20110-01	ROSECAN MD., MARVIN	52400	09/14/86	15
12-07431-02	MCDONOUGH DISTRICT HOSPITAL	52200	10/14/86	14
12-01127-02	SILVER CROSS HOSPITAL	52200	10/14/86	14
12-17622-01	KATHERINE SHAW BETHEA HOSPITAL	52200	11/14/86	13
12-10419-02	ST. MARY'S HOSPITAL	52200	11/14/86	13
12-15935-01	COMMUNITY HOSPITAL OF OTTAWA	52200	11/14/86	13
12-15777-03	TRAVENOL LABS., INC.	80400	12/14/86	12
12-03755-01	MEMORIAL HOSPITAL	52200	12/14/86	12
12-15777-01	TRAVENOL LABS., INC.	80400	12/14/86	12
12-18872-01	GLENWOOD MEDICAL GROUP	52200	01/14/87	11
12-00351-03	ST. ANTHONY HOSPITAL & MED CTR	52200	01/14/87	11
12-14091-02	HARVARD COMMUNITY MEMORIAL HOS	52200	01/14/87	11
12-01211-07	GREENBERG RADIOLOGY CLINIC	52200	01/14/87	11
12-18658-01	CARDIO-MED LTD.	52200	01/14/87	11
12-12767-01	INGALLS MEMORIAL HOSPITAL	52200	01/14/87	11
12-10094-01	ST. FRANCIS HOSPITAL	52200	02/14/87	10
12-11920-02	LORETTO HOSPITAL	52200	02/14/87	10
12-09675-01	RAVENSWOOD HOSPITAL MEDICAL CT	52200	02/14/87	10
12-13612-01	MARTHA WASHINGTON HOSPITAL	52200	02/14/87	10
12-00710-02	AUGUSTANA HOSPITAL	52200	02/14/87	10
12-05257-02	SOUTH SHORE HOSPITAL	52200	02/14/87	10
86-01126-01	MEMORIAL HOSP. FOR MCHENRY CTY	52200	02/14/87	10
86-01039-01	DU PONT CRITICAL CARE	80400	02/14/87	10
12-09155-01	MACNEAL MEMORIAL HOSPITAL	52200	02/14/87	10
count				39
count				169

Attachment H.2

INSPECTION PRIORITY	LICENSE NO.	FACILITY NAME	LICENSE CATEGORY	DUE DATE	MONTHS OVDERDUE
4.0					
	34-01541-01	MARATHON OIL CO. XV	29600	02/15/71	202
	12-02542-02	FMC SPECIALTIES GROUP	29700	06/15/73	174
	12-13801-01	GREENVILLE COLLEGE	65000	01/15/76	147
	86-01029-01	DU PAGE, COLLEGE OF	94000	12/15/77	126
	68-05200-00	ILLINOIS, UNIVERSITY OF	93000	01/15/78	119
	12-08698-02	GENERAL FOODS CORP.	29700	04/15/80	92
	66-06800-00	BRADLEY UNIVERSITY	94000	11/15/80	85
	12-08948-01	ILL. DEPT. OF PUBLIC HEALTH	29700	11/15/80	85
	68-12500-00	CPC INTERNATIONAL, INC.	93000	09/15/81	75
	12-17590-01	GULF COAST LABS., INC.	29700	11/15/81	73
	66-08790-00	LAKE FOREST COLLEGE	94000	11/15/81	73
	66-07330-00	ROSARY COLLEGE	94000	11/15/81	73
	86-01124-01	CALUMET STEEL CO.	64000	12/15/81	72
	12-08942-02	QUAKER OATS CO.	29700	01/15/82	71
	45-11921-01	U. S. GYPSUM CO.	64000	01/15/83	59
	86-01096-01	DAILY ANALYTICAL LABS.	29700	02/15/83	58
	66-16340-00	COPLEY MEMORIAL HOSPITAL	94000	03/15/84	45
	12-10308-01	KRAFT, INC.	64000	03/15/84	45
	12-17347-01	AQUALAB, INC.	29700	09/15/85	27
	12-20067-01	NORTHROP CORP.	29700	09/15/85	27
	12-18666-01	TEI ANALYTICAL, INC.	29700	09/15/85	27
	47-17959-01	AMERICAN ELECTRIC POWER SERV.	65000	09/15/85	27
	12-18540-01	HELENE CURTIS IND., INC.	29700	10/15/85	26
	12-18653-01	EVANSTON, CITY OF	29700	10/15/85	26
	12-00626-02	AT&T TECHNOLOGIES, INC.	64000	11/15/85	25
	12-13902-02	LIQUID CARBONIC CORP.	29700	11/15/85	25
	12-10199-01	NATIONAL LOSS CONTROL SERV.	29700	11/15/85	25
	86-01064-01	NALCO CHEMICAL CO.	64000	12/15/85	24
	66-12230-00	SANDWICH HIGH SCHOOL	94000	03/15/86	21
	86-01036-01	CHICAGO, CITY OF	29700	03/15/86	21
	86-01091-01	ADVANCED ASPHALT CO.	65000	03/15/86	21
	12-10700-01	ILLINOIS EMERGENCY SERV. & DIS	63000	04/15/86	20
	12-20164-01	A. L. LABS., INC.	64000	04/15/86	20
	12-20175-01	GREAT LAKES INTL., INC.	64000	04/15/86	20
	12-20262-01	R. V. FITZSIMMONS & ASSOC., IN	29700	06/15/86	18
	12-09116-03	ILLINOIS DEPT. OF TRANSPORTATI	65000	08/15/86	16
	86-01017-01	ILL. ENVIR. PROTECTION AGENCY	29700	08/15/86	16
	12-20199-01	MACON CTY. HIGHWAY DEPARTMENT	65000	10/15/86	14
	86-01018-01	PIATT CTY., DEPARTMENT OF HIGH	65000	10/15/86	14
	12-20244-01	HARLAN E. MOORE HEART RES. FOU	29300	10/15/86	14
	12-20264-01	CIORBA GROUP, INC.	65000	11/15/86	13
	12-11030-04	MACMURRAY COLLEGE	29600	11/15/86	13
	12-20151-01	DEWITT CTY. HIGHWAY DEPARTMENT	65000	11/15/86	13
count					43
count					43

Attachment N

SECTION I - MATERIALS INSPECTION PROGRAM

This section outlines the inspection program for licensees authorized to possess and use licensed material for radiography, medical programs, academic and industrial uses, waste disposal operations, manufacturing and distribution of products, leak testing, calibration, other types of services, and transportation related thereto. It describes general policies for the materials inspection program, including priorities for inspection, and defines some specific requirements for inspection of materials licensees.

A. Types of Inspections

1. Initial Inspections

Inspections of all specific licensees shall be conducted within six months after material is received and operations under the license have begun. Initial inspections of new licensees should be announced in order to determine whether operations have commenced.

2. Routine, Periodic Inspections

Inspections of licensees shall be conducted at intervals corresponding to their inspection priority. Priority 1 = each year; Priority 2 = each 2 years; Priority 3 = each 3 years; Priority 4 = each 4 years; Priority 5 = each 5 years. These should be unannounced unless prior notification of no more than 48 hours would enable more complex facilities to assemble documents to be reviewed by inspectors.

3. Follow-up Inspections

Follow-up inspections shall be conducted for cases involving willful or flagrant violations, repeated poor performance in an area of concern, or serious breakdown in management controls. Supervisory personnel shall determine whether a follow-up inspection shall be conducted after a review of each inspection and any subsequent action by the licensee. Each follow-up inspection shall be conducted within six months of the most recent inspection and should be unannounced.

4. Special Investigations

Special investigations shall be performed, as determined by supervisory personnel, to address abandonment, allegations, overexposures to personnel, and any other incidents involving radioactive material. The criteria for conducting these investigations are outlined in Section IV of this manual.

5. Close-out Surveys

Upon notification that a license has expired or is being processed for termination, a close-out survey may be performed to ensure that licensed material has been properly disposed of and that affected areas of the licensed facility may be safely released for unrestricted use. Each survey, if supervisory personnel deems it necessary, shall be conducted as soon as possible after the notification is received.

6. Reciprocity Inspections

It is the goal of the Department to inspect at least ten percent of the licensees who are authorized to perform activities under reciprocal recognition of a license issued by the United States Nuclear Regulatory Commision or another Agreement State. The priority for these inspections are for each licensee authorized to perform industrial radiography or wireline operations to be inspected on an annual basis. Those who are operating under their initial notification should be inspected before those whose operations have been observed by Departmental representatives. The performance of these inspections are dependent on available manpower and the efficiency of travel scheduling.

B. Inspection Priorities

1. Initial Assignment of Priority

When a new license is issued by the Department, it shall be assigned a priority for routine, periodic inspections based on the types, quantities and forms of material and authorized uses as they relate to the schedule of categories found in Appendix A. If the license involves more than one type of use, the type associated with the most frequent inspection shall be assigned. Assignment of Inspection priorities shall be performed by the Head, Inspection and Enforcement, with the concurrence of the Chief, Division of Nuclear Materials.

2. Change of Inspection Interval

Changes of inspection priority may be performed only by the Head, Inspection and Enforcement, with the concurrence of the Chief, Division of Nuclear Materials. The interval between inspections may be reduced on the basis of less than satisfactory performance by the licensee. The priority may be changed by supervisory personnel only after a review of current and prior findings from inspections or investigations. The interval may also be increased on the basis of consistent continued compliance demonstrated by the licensee.

C. Scheduling of Inspections

1. Basis for Scheduling

The date on which a routine inspection is actually performed shall be the basis for scheduling the next inspection. Within reasonable time frames, an inspection of a licensee may be completed earlier or later than scheduled (by its placement in the priority system) for the purpose of the efficiency realized in inspector travel time. The efficiencies of travel time should be balanced against the basic purpose of the inspection priorities, that is, effective use of manpower based on potential hazards in a license operation.

For industrial radiography licensees who are authorized to conduct radiography at temporary job sites, an inspection of a temporary job site should be conducted for at least 25% of these licensees. Attempts also should be made to accompany licensee's radiation safety personnel during quarterly audits of either temporary or permanent sites. The accompaniment of auditors may be on an announced basis.

2. Permissible Frequency of Inspection

To achieve the goals of cost saving and efficient use of staff time, inspections may be performed at a frequency different than that defined by the priority system. However, the frequency of inspection for a licensee should not vary by more than ± 25%.

APPENDIX A

Default Inspection Intervals (Years)

Schema Code	Definition	Default Interval
29100	Cathode Vacuum Tubes	4.0
29200	Instrument Calibration - In House Only	4.0
29300	Laboratory Analysis	4.0
29500	Storage Only	4.0
29600	Analytical Instrument	4.0
29700	Gas Chromatograph	4.0
29800	X-ray Flourescence Analyzer	4.0
29900	Alnor Dew Point Tester	5.0
52100	Medical - Broad	1.0
52200	Medical - Specific	3.0
52400	Medical - Private Practice	3.0
55000	Brachytherapy	2.0
56000	Teletherapy	2.0
58000	Veterinary Medicine	3.0
62000	General License	5.0
63000	Civil Defence	4.0
64000	Fixed Gauge	4.0
65000	Portable Gauge	4.0
66000	Nuclear Pharmacy	1.0
68000	Mobile Nuclear Medicine Service	2.0
69000	Nuclear Laundry	1.0
71100	Self Shielded Irradiator	2.0
71200	Open Irradiator - <10,000 Ci.	1.0
71300	Open Irradiator - >10,000 Ci.	1.0
77000	Wireline Service	2.0
78000	Wireline Service - Field Flooding Studies	2.0
79100	Leak Testing Service	2.0
79200	Survey Instrument Calibration Service	2.0
79300	Portable Gauge Maintenance and Repair	2.0
79400	Leak Test & Inst. Cal. Service (3N+3P)	2.0
79500	Dose Calibrator Calibration Service	2.0
79600	Medical System Service	3.0
79700	Full H.P. Consulting Service	2.0
79800	Decontamination and Decommissioning Service	1.0
80100	Research & Development - Type A Broad	1.0
80200	Research & Development - Type B Broad	2.0
80300	Research & Development - Type C Broad	2.0
80400	Research & Development - Specific	3.0
81100	Academic - Type A Broad	1.0
81200	Academic - Type B Broad	2.0
81300	Academic - Type C Broad	2.0
81400	Academic - Specific	3.0
82000	Waste Burial	1.0
83000	Waste Repackaging and Reprocessing	1.0
83600	Incineration - Noncommercial	1.0
85000	Manufacturing & Distributing	1.0
85500	Possession & Use incident to Exempt Dist.(NRC)	3.0

Schema Code	Definition	Default Interval
87000	Industrial Radiography	1.0
87100	Industrial Radiography - Fixed Facility	1.0
87200	Industrial Radiography - Temporary Job Sites	1.0
93000	Source Material	4.0
93100	Source Material - Shielding	4.0
94000	Special Nuclear Material	4.0
95000	Rare Earth Extraction and Processing	3.0

DEPARTMENT OF NUCLEAR SAFETY

office memorandum

TO: Paul Eastvold

FROM: Bruce Sanza

DATE: December 3, 1987

SUBJECT: Overdue By-product Inspections.

The last few monthly reports have shown an alarming number of priority one, two, and three license inspections to be overdue by more than 25% of an inspection interval. Closer scrutiny reveals that most of these inspections would not be overdue if the NRC's priority system was used as a standard.

Of the 86 priority one inspections currently regarded as overdue, none are NRC priority one. In addition, none of the 76 priority two inspections listed as overdue would be so by NRC standards.

There appear to be 32 inspections with a three year frequency which are overdue by NRC standards. Six of these are more than six months overdue and will be performed in the first quarter of 1988. The balance will be performed in the first half of the year.

In January of 1988 a planning session will be conducted with myself and Andy Gulczynski to help focus on the backlog and to develop a long range plan to reduce it. At that time, we will try to determine whether the Department's priority system is reasonable and appropriate. Any reccomendations will be submitted to you and Steve Collins.

bs

cc: Steve Collins

Attachment 2

DEPARTMENT OF NUCLEAR SAFETY

office memorandum

TO: Division of Nuclear Materials Inspection Staff.

FROM: Bruce Sanza, Head of Inspection and Enforcement.

DATE: December 14, 1987.

SUBJECT: Documentation of ALARA Program Review During Inspections.

Many group medical licenses which were written by the NRC refer to an ALARA program in the tie-down condition or in the application. In order to document that a review of the ALARA program was performed, each set of field notes for inspections of these licensees should indicate on the "comments" page that the review was performed. This will successfully address an item of concern which was identified during the Agreement State Program Review.

DJS

Attachment AA

TO: Paul Eastvold

FROM: Steve Collins SCC

DATE: December 14, 1987

SUBJECT: Request for Analysis of Samples by the Office of Environmental Safety

As a result of the attached U.S. NRC Inspection and Enforcement Manual, Temporary Instruction 2800/9, the Division of Nuclear Materials has determined that samples need to be collected and analyzed. The samples are needed from the sewage treatment plant (STP) sludges for the STPs that process sewage from the attached list of licensees. Most of these licensees may have a potential for releasing sufficient radionuclides into the sanitary sewerage systems such that reconcentration at STPs could pose a health and safety problem.

It is recommended that samples be collected, without the licensee's knowledge, two times during next year. The objective is to determine if there is a problem with reconcentration of radionuclides at STPs.

The container should be sealed to avoid odor problems. The sample size must be at least one litre (one quart).

We should identify the discrete radionuclides found in sludge. A brief written report of results of analyses, even if negative, is requested in order that the Division of Nuclear Materials may include the results in appropriate license files.

All...4 AR

ATTACHMENT

1. Abbott Laboratories
   1400 Sheridan Road
   North Chicago, Illinois 60064

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2. Amersham Corporation
   2636 South Clearbrook Drive
   Arlington Heights, Illinois 60005

3. Medi-Physics, Inc.
   3350 N. Ridge Avenue
   Arlington Heights, Illinois 60004

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4. Interstate Nuclear Services Corporation
   1006 Third Avenue
   Morris, Illinois 60450

6. S. F. Appliance
   613 W. Washington Street
   Morris, Illinois 60450

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7. Argonne National Lab
   Argonne, Illinois

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8. University of Chicago
   5841 South Maryland Avenue
   Chicago, Illinois 60637

9. Rush-Presbyterian St. Luke's Hospital
   1753 West Congress Parkway
   Chicago, Illinois 60612

10. Michael Reese Hospital and Medical Center
    2900 South Ellis Avenue
    Chicago, Illinois 60616

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11. University of Illinois at Urbana
    1109 South Lincoln Avenue
    Urbana, Illinois 61801

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12. Fermi National Lab
    Batavia, Illinois

UNITED STATES
NUCLEAR REGULATORY COMMISSION
OFFICE OF INSPECTION AND ENFORCEMENT
Washington, D.C. 20555

INSPECTION AND ENFORCEMENT MANUAL

DI

TEMPORARY INSTRUCTION 2800/9

RECONCENTRATION OF RADIONUCLIDES IN SANITARY SEWERAGE SYSTEMS

PROGRAM APPLICABILITY: 2600, 2800

2800/9-01 PURPOSE

To specify requirements for inspecting a specific set of licensees to determine if there is a problem with reconcentration of radionuclides at sewerage treatment plants. The previous TI 2800/5 did not require taking samples at sewerage treatment plants where reconcentration of nuclides would most likely occur.

2800/9-02 OBJECTIVE

To expedite inspections of certain licensees with a potential for reconcentration of radionuclides in sewerage systems. The regions also should be sensitive to this issue during routine inspections of other licensees if they have reason to believe that a potential for reconcentration may exist. For example, a survey of a nuclear laundry (Interstate Nuclear Services), showed contamination in treatment plant samples because the waste was suspended or dispersed in liquids. In addition to the licensees listed below, treatment plants should be sampled where nuclear laundries discharge their wastes.

2800/9-03 LICENSEES TO INSPECT

Following is a list of licensees that may have a real potential for releasing radionuclides into sanitary sewerage systems that later reconcentrate at sewerage treatment plants.

Large Materials Manufacturers	Fuel Cycle Licensees
Monsanto Chemical	Babcock and Wilcox (Apollo)
✓ Abbott Laboratories	Commerce, Dept. of (NBS)
✓ Amersham in Illinois - Am-241	Exxon Nuclear Co. (Richland)

DEPARTMENT OF NUCLEAR SAFETY

office memorandum

TO: Division of Nuclear Materials Staff

FROM: Steven C. Collins SCC

DATE: December 18, 1987

SUBJECT: NRC License Application Review Checklists

Herein is a listing of the attached set of checklists used by NRC licensing staff for the review of submittals from applicants and licensees. The Division of Nuclear Materials will be developing such checklists concurrent with the development of "Instructional Sets."

Until DNM checklists are available, it will be Division policy for reviewers to use a checklist from this set or an existing equivalent DNM checklist. Please compare any equivalent checklist you use with the one attached to ensure that all relevent points are covered in a review. A copy of each completed checklist shall be permanently filed in the license folder, immediately under the application or licensee submittal to which it applies.

License Type	For Review Of:
Teletherapy	New application
Teletherapy	Survey report
Teletherapy	Renewal application
Industrial Radiography	New & renewal applications
Portable Gauge	New & renewal applications
Insustrial Gauge Service	New & renewal applications
Well Logging	New & renewal applications
Broadscope	New & renewal applications
Academic	New & renewal applications
Limited Scope Distribution to Specific Licensees	New & renewal applications
Irradiator	New & renewal applications
Gas Chromatograph	New & renewal applications
In Vitro	New & renewal applications
Laboratory and Industrial Use of Small Quantities	New & renewal applications
Waste Disposal Broker	New & renewal applications
Civil Defense	New & renewal applications
Medical	New & renewal applications
Pu-Be Source Use	New & renewal applications
Redistribution of In Vitro Kits	New & renewal applications
Sr-90 Ophthalmic Applicator	New & renewal applications
Mobile Nuclear Medicine	New & renewal applications

SCC:DSP

Attachment AC

Date:	Subject:
1987	
FEB 6	"Authorized user" interpretation
FEB 9	Notification of local officials of license applications
JUN 22	Transitional licensing combination policy
JUL 6	Approval for non-radioactive kits
JUL 13	NARM "tie-down"
JUL 17	(Revised DEC 15) Reference & calibration sources for Groups
AUG 6	Filing procedures
AUG 14	New LLW legislation
SEP 28	Responsibilities for restructuring folders and filing
NOV 23	One-year financial surety exemption
DEC 18	License application review checklists

Appendix 5
Part 1 - License File Review

a. Routine reviews were made of the following licenses:

1. Licensee: UPA Technology
Address: Palos Hills, IL 60465
License No.: IL-01066-01
Issue Date: 8/20/87
Expiration Date: 3/31/92
Type of License Action: Initial (redraft of NRC license)
License Type: GL distribution

2. Licensee: Northwestern Memorial Hospital
Address: Chicago, IL 60611
License No.: IL-01037-02
Issue Date: 8/17/87
Expiration Date: 8/31/92
Type of License Action: Initial (redraft)
License Type: Medical broad renewal

3. Licensee: Kay Ray, Inc.
Address: Wheeling, IL 60090
License No.: IL-01010-01
Issue Date: 7/27/90
Expiration Date: 6/30/90
Type of License Action: Initial (redraft)
License Type: Manufacturer and distributor

4. Licensee: Kay Ray, Inc.
Address: Wheeling, IL 60090
License No.: IL-0101-02
Issue Date: 7/27/87
Expiration Date: 4/30/89
Type of License Action: Initial (redraft)
License Type: GL distribution

5. Licensee: Northwestern Memorial Hospital
Address: Chicago, IL 60611
License No.: IL-01037-01
Issue Date: 8/17/87
Expiration Date: 1/31/93
Type of License Action: Initial (redraft)
License Type: Teletherapy

6. Licensee: Nalco Chemical Co.
Address: Chicago, IL 60638
License No.: IL-01064-01
Issue Date: 8/31/87
Expiration Date: 5/31/92
Type of License Action: Initial (redraft)
License Type: Gauge

7. Licensee: Swedish American Hospital
Address: Rockford, IL 61101
License No.: IL-01067-01
Issue Date: 8/31/87
Expiration Date: 7/31/92
Type of License Action: Initial (redraft)
License Type: Teletherapy

8. Licensee: Gould Research Center
Address: Rolling Meadows, IL 60008
License No.: 12-20027-02
Issue Date: 8/3/87
Expiration Date: n/a
Type of License Action: Amendment (no.1)
License Type: Termination

9. Licensee: Teledyne Isotopes Midwest Laboratory
Address: Northbrook, IL 60062
License No.: IL-00470-01
Issue Date: 8/7/87
Expiration Date: n/a
Type of License Action: Amendment (no.3)
License Type: Termination

10. Licensee: St. Elizabeth Medical Center
Address: Granite City, IL 62040
License No.: IL-01061-02
Issue Date: 8/17/87
Expiration Date: 7/31/92
Type of License Action: Initial (redraft)
License Type: Medical Institution

11. Licensee: Central Community Hospital
Address: Chicago, IL 60636
License No.: IL-01062-01
Issue Date: 9/14/87
Expiration Date: 8/31/92
Type of License Action: Initial (redraft)
License Type: Medical Institution

12. Licensee: Cardio-Med., Inc.
Address: Arlington Hts., IL 60005
License No.: 12-18658-01
Issue Date: 9/28/87
Expiration Date: 1/31/91
Type of License Action: Amendment (no.22)
License Type: Medical Institution

13. Licensee: Amersham Corp.
Address: Arlington Heights, IL 60005
License No.: 12-12836-07MA
Issue Date: 8/28/87
Expiration Date: n/a

Type of License Action: Termination
License Type: MA Distribution

14. Licensee: Olney Central College
Address: Olney, IL 62450
License No.: IL-00445-01
Issue Date: 9/2/87
Expiration Date: n/a
Type of License Action: Termination
License Type: Gauge

b. The following "field files" used by the Springfield inspection staff were sampled for content:

Case No.	License No.
15	IL-01110-01
16	IL-01011-01
17	IL-01012-01
18	IL-01020-01
19	IL-01024-02
20	IL-01025-01
21	IL-01026-01
22	IL-01031-01
23	IL-01035-01
24	IL-01046-01
25	IL-01052-01
26	IL-01057-01

c. The following "Central Office" files in Springfield were sampled for content (Central Office files are official files):

Case No.	License No.
27	IL-01011-01
28	IL-01012-01
29	IL-01020-01
30	IL-01024-02
31	IL-01031-01
32	IL-03035-01

Appendix B
Part 1 - License File Review

Comment	Case No. 1	2	3	4	5	6	7	8	9	10	11	12	13	14
1. No checklist in file	X	X	X	X	X	X	X	X	X	X	X	X	X	X
2. Missing backup material for license	X		X	X										
3. (Not used)														
4. Need to append suffix "G" for distribution authorization to general licensees	X													
5. Hybrid License: Broad & Medical but not all broad activities meet broad license criteria		X												
6. Licensed renewal not used as an opportunity to upgrade license or correct deficiencies in license		X					X				X			
7. Threshold for I-131 bioassay 5 mCi (vs 1 mCi)		X												
8. Illegible copy of license (last page)			X											
9. Unexplained omission on license of authorized users						X								
10. Inadequate safety procedure							X							
11. Typo in application results in incorrect reference in procedure							X							
12. Termination Request: No documentation of IDNS decision to accept explanation for lost source								X						
13. Did not use phrase "in accordance with ..." to explain cause for licensing action	X	X	X	X	X	X	X	X		X	X			
14. No explanation in file or to licensee regarding replacement of NRC/NARM licenses by "Initial" Illinois license	X	X	X	X	X		X			X				
15. No cover letter used	X	X	X	X	X	X	X	X	X	X	X	X	X	X
16. No record of telecon													X	

Comment	Case No. 15	16	17	18	19	20	21	22	23	24	25	26
17. Files are complete (new licenses)	X											X
18. No references to underlying NRC and/or IL NARM licenses		X		X	X							
19. Application missing		X		X	X		X	X				
20. License missing							X					
21. Copies of previous inspection reports and/or enforcement correspondence missing			X	X			X	X	X	X		

	27	28	29	30	31	32
22. Application missing			X			
23. Previous inspection reports and/or correspondence missing	X	X	X	X	X	X

d. A review was made of 1 sealed source and device registration issued by Illinois. The file was complete and no technical comments were made:

Registration No: IL 495D101S
Name of Manufacturer/Distributor: Nuclear Data Inc.
Date of Registration: not noted

Appendix B
Part 2 - Inspection File Review

Routine reviews were made of the following inspection files:

1. Licensee: Health Physics Assoc.
   Address: Northbrook, IL
   License Nos.: 12-09160-01 (IL)
   IL-00244-01
   License Type: Service
   Date of Inspection: 10/1/87
   Type of Report: Form
   Type of Inspection: Routine
   Inspectors: Bauer and Pappendorf
   Report Reviewed:Gulczynski
   Enforcement Letter: 10/23/87
   Signed by: Collins
   Licensee response: 11/10/87
   State Acknowledgement: Not yet filed

2. Licensee: Aurora University Dept. of Physics
   Address: Aurora, IL 60506
   License Nos.: SNM-1964
   12-09392-02
   License Type: PuBe howitzer and calibration source
   Date of Inspection: 9/14/87
   Type of Report: Form
   Type of Inspection: Routine
   Inspectors: Papendorf
   Report Reviewed: Gulczynski
   Enforcement Letter: not yet filed
   Signed by: n/a
   Licensee response: n/a
   State Acknowledgement: n/a

3. Licensee: Pittway Corp.
   Address: Aurora, IL 60504
   License Nos.: 12-15023-01
   License Type: Manufacturer & distributor
   Date of Inspection: 9/14/87
   Type of Report: form
   Type of Inspection: unannounced routine
   Inspectors: Papendorf
   Report Reviewed: Gulczynski
   Enforcement Letter: 9/24/87 clear
   Signed by: Collins
   Licensee response: n/a
   State Acknowledgement: n/a

4. Licensee: University of Chicago
Address: Chicago, IL 60637
License Nos.: 12-00509-03, IL-00204-01, IL-00129-01
License Type: Broad medical
Date of Inspection:9/15, 16, 18/87
Type of Report: form
Type of Inspection: announced, routine
Inspectors: Gulczynski, Padonovi, Bauer
Report Reviewed: not noted
Enforcement Letter: 10/6/87
Signed by: Collins
Licensee response: not yet filed
State Acknowledgement: n/a

5. Licensee: Gottlieb Memorial Hospital
Address: Melrose Park, IL 60160
License Nos.: IL-00253-01, 12-13387-01
License Type: Nuclear Medicine
Date of Inspection: 10/9/87
Type of Report: form
Type of Inspection: unannounced, routine
Inspectors: Kark
Report Reviewed: Gulczynski
Enforcement Letter: 12/9/87
Signed by: Collins
Licensee response: not yet filed
State Acknowledgement: not yet filed

6. Licensee: St. Francis Hospital
Address: Litchfield, IL 62056
License Nos.: 12-16637-01
License Type: Nuclear Medicine
Date of Inspection: 10/20/87
Type of Report: form
Type of Inspection: unannounced, complete/routine
Inspectors: Merrihew
Report Reviewed: no record
Enforcement Letter: 11/3/87
Signed by: Collins
Licensee response: not yet filed
State Acknowledgement: not yet filed

7. Licensee: Community Memorial Hospital
Address: Staunton, IL 62008
License Nos.: 12-18647-01
License Type: Nuclear Medicine
Date of Inspection: 10/19/87
Type of Report: form
Type of Inspection: unannounced/complete/routine
Inspectors: Merrihew
Report Reviewed: no record
Enforcement Letter: 11/2/87, clear
Signed by:Collins

Licensee response: n/a
State Acknowledgement: n/a

8. Licensee: Hillsboro Hospital
Address: Hillsboro, IL 62049
License Nos.: 12-18552-01
License Type: Nuclear Medicine
Date of Inspection: 10/19/87
Type of Report: form
Type of Inspection: unannounced/complete/routine
Inspectors: Merrihew
Report Reviewed: no record
Enforcement Letter: 11/3/87, clear
Signed by: Collins
Licensee response: n/a
State Acknowledgement: n/a

9. Licensee: Edward A. Utlaut Memorial Hospital
Address: Greenville, IL 62246
License Nos.: 12-18550-01
License Type: Nuclear Medicine
Date of Inspection: 10/21/87
Type of Report: 10/21/87
Type of Inspection: form
Inspectors: Merrihew
Report Reviewed: no record
Enforcement Letter: 11/2/87, clear
Signed by: Collins
Licensee response: n/a
State Acknowledgement: n/a

10. Licensee: Radiation Sterilizers, Inc.
Address: Schaumburg, IL
License Nos.: 04-19644-01
License Type: Irradiator
Date of Inspection: 8/4/87
Type of Report: unannounced follow-up
Type of Inspection: narrative
Inspectors: Papendorf & Gulczynski
Report Reviewed: no record
Enforcement Letter: 8/17/87
Signed by: Collins
Licensee response: 9/4/87
State Acknowledgement: 10/5/87

11. Licensee: Amersham Corporation
Address: Arlington Heights, IL 60005
License Nos.: IL-00290-01, 12-12836-07, 12-12836-01, 12-12836-03
License Type: Manufacturer and distributor
Date of Inspection: 7/7-8/87
Type of Report: unannounced, complete
Type of Inspection: Form and Suppl. Memo
Inspectors: Papendorf & Padovani

Report Reviewed: 7/15/87
Enforcement Letter: 7/21/87, clear
Signed by: Collins
Licensee response: n/a
State Acknowledgement: n/a

12. Licensee: Jersey Community Hospital
Address: Jerseyville, IL 62052
License Nos.: 12-17684-01
License Type: Nuclear Medicine
Date of Inspection: 10/22/87
Type of Report: form
Type of Inspection: unannounced, complete, routine
Inspectors: Merrihew
Report Reviewed: no record
Enforcement Letter: 10/22/87
Signed by: Collins
Licensee response: 11/13/87
State Acknowledgement: pending review

	Comment	Cases 1	2	3	4	5	6	7	8	9	10	11	12
1.	Older Inspection report used which does not contain all necessary information	X											
2.	Previous NRC inspection reports not on file	X											
3.	Form does not provide for entries re management audits, only for safety committee	X	X	X	X	X	X	X	X	X	X	X	X
4.	ALARA not addressed					X	X	X	X	X			
5.	Report contained suggestion for content of next inspection			X									
6.	No documentation of close out of previous n/c's				X								
7.	No management representative present at exit (12 n/c's found)				X								
8.	No documentation of supervisory review and date				X		X	X	X	X	X		X
9.	No follow-up on internal memo identifying item needing review during next inspection					X							
10.	Scope of program not described	X	X	X	X	X	X	X	X	X	X	X	X
11.	Performed survey of patient									X			
12.	No documentation of reason for supervisors's deletion of a citation									X			
13.	Performed survey of patient undergoing therapy									X			

UNITED STATES
NUCLEAR REGULATORY COMMISSION
WASHINGTON, D. C. 20555

JAN 2

Dr. Terry R. Lash, Director
Illinois Department of Nuclear Safety
1035 Outer Park Drive
Springfield, Illinois 62704

Dear Dr. Lash:

This is to confirm the discussion Messrs. Joel Lubenau and Donald Nussbaumer held with you and your staff on December 18, 1987 following our initial review of the State's radiation control program.

As a result of our review of the Department's program and the routine exchange of information between the NRC and the State, the staff believes that the State's program for regulating agreement materials is adequate to protect the public health and safety and compatible with the Commission's program.

We commend the State for its successful implementation of the Agreement State program. This is a significant achievement given the size of the program, over 800 licenses. Messrs. Eastvold, Cooper and the entire materials staff are to be congratulated.

We noted in our review that Illinois has adopted an inspection frequency system which is more stringent than the NRC priority system. As a consequence a temporary backlog of overdue inspections exists which the State plans to eliminate in 1988. During the course of our review, we made a number of suggestions to enhance the effectiveness of the Agreement program, including minor revisions to IDNS administrative and licensing procedures manual and recording of inspection findings. The staff accepted the suggestions and incorporated them into the program documents prior to completion of our review.

Appendix C.

In accordance with NRC practice I am enclosing a second copy of this letter for placement in the State's Public Document Room or otherwise to be made available for public review. I appreciate the courtesy and cooperation extended to the NPC staff during the review.

Sincerely,

Original Signed by
Carlton Kammerer

Carlton Kammerer, Director
State, Local and Indian Tribe Programs
Office of Governmental and Public Affairs

cc: V. Stello, Executive Director for
Operations, NRC
A. Rert Davis, Regional Administrator, NRC
State Public Document Room
NRC Public Document Room