



UNITED STATES  
NUCLEAR REGULATORY COMMISSION  
REGION II  
101 MARIETTA STREET, N.W., SUITE 2900  
ATLANTA, GEORGIA 30323-0199

November 19, 1993

MEMORANDUM FOR: John J. Surmeier, Acting Assistant Director  
for State Agreements Program  
Office of State Programs

FROM: Richard L. Woodruff, RSAO, RII *RLW*

SUBJECT: GEORGIA REVIEW REPORT FOR 1993

Enclosed is the subject review report and review references. The package contains the documents as outlined below.

- ✓ 1. Control sheet
- 2. Summary Letter Report:
  - Comment Letter
  - Enclosure 1, "Application of Guidelines for NRC Review"
  - Enclosure 2, "Summary of Assessments and Comments"
- ✓ 3. Review References:
  - Appendix A, Questionnaire with State Responses
  - Appendix B, State Organizational Charts
  - Appendix C, Reviewer Explanatory Comments and Observations
  - Appendix D, License File Reviews
  - Appendix E, Compliance File Reviews
  - Copy of previous review visit report

Richard L. Woodruff

cc: Georgia file

GA93REV.RLW

REVIEW CONTROL SHEET

1. Radiation Control Program:	Georgia
2. Type of Review:	Routine
3. Dates of Review: Year	1993
a. RCP Office Review	10/18-22 and 11/2-5
b. Field Evaluations	10/7
c. Regional or Other Office or Site Visits	NA
d. Visits to State-Licensed Facilities	NA
e. Exit Meeting	11/05
4. Total Field Evaluations	1      Total Licensee Visits 0
5. Period of Review: From	10/18/91    To 11/05/93
6. Staff Days in State: Total	10
a. Regional SAO	10
b. Other Regional Representatives	0
c. Other SP Representatives	0
d. Other NRC Representatives	0
e. Other Review Participants	0
7. Review hours devoted to technical assistance or staff training:	12

Control.ga

APPENDIX A

EVALUATION OF AGREEMENT STATE RADIATION CONTROL PROGRAM

PART I  
PROGRAM GUIDELINES AND  
STATE QUESTIONNAIRE UPDATE

Name of State Program Georgia

Reporting Period from: October, 1991 to October, 1993

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. States regulating the disposal of low-level radioactive waste in permanent disposal facilities must have statutes that provide authority for the issuance of regulations for low-level waste management and disposal. The statutes should also provide regulatory program authority and provide for a system of checks to demonstrate that conflicts of interest between the regulatory function and the developmental and operational functions shall not occur.<sup>1</sup>

Questions:

1. What changes were made to the State's statutory authority to regulate agreement materials, low level waste disposal, or uranium mill operations in the reporting period?

Ans: None

2. Are your regulations subject to a "Sunset" or equivalent law? If so, explain and include the next expiration date for your regulations.

Ans: No

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<sup>1</sup>The level of separation (e.g., separate agencies) should be determined for each State individually.

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 should have 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. What is the effective date of the last compatibility-related amendment to the State's regulations?

Ans: May 22, 1991

2. Referring to the latest NRC chronology of amendments, identify those that have not been adopted by the State, explain why they were not adopted, and discuss actions being taken to adopt them.

Ans: Rules identified as compatibility items in the latest NRC chronology of amendments have been adopted with the exception of 10 CFR Part 20. The rule has been drafted, comments have been solicited from licensees and other interested parties, and a proposed rule for this part has been drafted. This rule, as well as the entire Chapter of Rules will be considered at a public hearing scheduled for November 12, 1993. The proposed rules will be presented to the Board of Natural Resources for adoption at their December 7 and 8, 1993 Board meeting.

3. Identify the person responsible for developing new or amended regulations affecting agreement materials.

Ans: Thomas E. Hill, Program Manager

II. ORGANIZATION

Under the Appendix B title sheet provided at the end of this document, please enclose copies of your organization charts as follows:

- a) organization chart(s) showing the position of the radiation control program (RCP) within the State organization and its relationship to the Governor, other State and local RCPs (if any), and comparable health and safety programs.
- b) Internal organization charts for the Bureau of Radiological Health and the Bureau of Solid and Hazardous Waste. If applicable, include regional offices and contract agencies.

All charts should be current, dated, and include names and titles for all positions.

Ans: See Appendix B

A. Location of the Radiation Control Program Within the 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.

Questions:

1. During the reporting period, did the management, program name, or location of the RCP within the State organization change?

Ans: No

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 licensing and inspection policies, procedures and supervision.

## Questions:

1. What changes occurred in the organization of the RCP during the reporting period?

Ans: None

2. If changes occurred, how have they affected the RCP and its effectiveness?

Ans: Not applicable

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. If legal assistance was utilized during the reporting period, briefly describe the circumstances.

Ans: One request for imposition of a civil penalty was forwarded for legal review.

2. Was the legal assistance satisfactory during this period? If not, what were the problems?

Ans: Legal assistance was satisfactory.

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 on 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. Please list the names, affiliations, and terms of the technical committee(s) members.

Ans: A. Environmental Radiation Advisory Committee

1. Melvin Carter, Ph.D., Consultant
2. Charles Wakomo, EPA, Region IV
3. Phillip Stohr, NRC, Region II
4. Robert Rohrer, Ph.D., Consultant

All Environmental Advisory Committee appointments are permanent.

B. Medical Advisory Committee

1. Oliver A. Sorsdahl, M.D.  
Ga. Baptist Medical Center  
Nuclear Medicine
2. Jon H. Trublood, Ph.D.  
Medical College of Georgia  
Medical Physics
3. R. Roger Sankey, Ph.D.  
Saint Joseph's Hospital  
Medical Physics
4. Kenneth L. Haile, Jr., M.D.  
Marietta, GA 30060  
Radiation Oncology
5. Randolph E. Patterson, M.D.  
Crawford Long Hospital  
Nuclear Cardiology
6. Lloyd Schnuck, Jr., M.D.  
Candler General Hospital  
Nuclear Medicine

Medical Advisory Committee appointments are permanent.

2. If an advisory committee or consultant was used during the reporting period, briefly describe each circumstance (i.e., the subject, the need, the result, and the manner obtained - by meeting, phone call, or letter).

Ans: Medical Advisory Committee -

Veterinary Teletherapy - UGA - information on the training and experience of the Veterinary Radiation Oncologist was forwarded to members of the committee and their recommendations were received during follow-up telephone conversations.

Metastron - Sr<sup>89</sup> licensing recommendations were solicited from members of the committee via telephone.

Rules and Regulations - revisions - advance copies of Rule .05, "Use of Radionuclides in the Healing Arts" were mailed to members of the Advisory Committee and their comments were solicited.

Oncoscint - biologic - licensing recommendations were solicited from members of the committee via telephone call.

Consultant - A consultant was hired to perform a confirmatory survey at the RSI facility in Decatur Georgia.

#### E. Contractual Assistance (Category II)

NRC Guidelines: Because of the diversity and complexity of low-level radioactive waste disposal licensing and regulation, States regulating the disposal of low-level radioactive waste in permanent disposal facilities should have procedures and mechanisms in place for acquisition of technical and vendor services necessary to support these functions that are not otherwise available within the RCP. The RCP should avoid the selection of contractors which have been selected to provide services associated with the LLW facility development or operations.

1. Please describe the procedures that are in place for the acquisition of technical and vendor services or provide a copy for review.

Ans: Not applicable

2. If the State has utilized outside contractors since the last review, please provide a listing of the contractors, the project under contract, and the status of the project.

Ans: Not applicable

### III. MANAGEMENT AND ADMINISTRATION

#### A. Quality of Emergency Planning (Category I)

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. Other than the communications list, when was the emergency plan last revised?

Ans: State of Georgia Radiological Emergency Plans

- a) State Base Plan - June, 1993
- b) Plant Hatch - September, 1993
- c) Plant Farley - November, 1992
- d) Savannah River - June, 1993
- e) Plant Vogtle - July, 1993
- f) Ingestion Pathway - April, 1992
- g) Georgia Tech - January, 1989
- h) Transportation - April, 1993 (new)

2. If the plan was revised since the last review, what changes were made?

Ans: The updated plans reflect changes in telephone numbers and editorial improvements.

3. If the plan was substantially revised during the reporting period, was the NRC provided the opportunity to comment on the revision while it was in draft form?

Ans: The plan was not substantially revised during the reporting period.

4. When was the emergency communication list last reviewed or revised?

Ans: The emergency communication list was updated in September, 1993.

5. When and how was the plan last tested?

On September 15, 1993, the plan was tested at the Plant Hatch Emergency Response Exercise.

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, follow-up or special inspections (including pre-licensing visits) and responses to incidents and other emergencies, instrumentation and other equipment to support the RCP, administrative costs in operating the program including rental charges, printing costs, laboratory services, computer and/or word processing support,

preparation of correspondence, office equipment, hearing costs, etc. as appropriate. States regulating the disposal of low-level radioactive waste facilities should have adequate budgetary resources to allow for changes in funding needs during the LLW facility life cycle. After appropriations, the sources of program funding should be stable and protected from competition from or invasion by other State programs. 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. Show the amount for funds for the Radiation Control Program(s), i.e., Radioactive Materials Program (RMP) and Environmental Radiation Program (ERP) for the current fiscal year obtained from:

	<u>RCP Funds</u>
State general fund	None (RMP) + \$400,000 (ERP)
a. Fees	\$643,545 projected
b. Federal grants and contracts (identify)	\$35,600 Env. Rad. Program for NRC IM
c. Other	\$302,692 (DOE) for ERP EM/EP at SRS
d. Total:	\$643,545 (RMP) + \$739,292 (ERP) = \$1,382,837

2. Show the total amounts in the current RCP budget allocated for the following (if contract costs are incurred, please include):

	<u>RCP Budget</u>
a. Administration:	Approximately \$65,000 + \$50,000 for Env. Radiation Program
b. Radioactive materials:	\$643,545 projected
c. X-ray:	Not applicable
d. Environmental surveillance:	\$494,000 for the Env. Rad. Program

- e. Emergency planning: \$165,292
- f. Other (radon, non-ionizing, operator credentialing, etc., please identify): Not applicable
- g. Total: \$643,545 projected (RMP) + \$739,292 (ERP) = \$1,382,837

3. What percentage of your radioactive materials program is supported by fees?

Ans: 100 percent.

4. Discuss any changes in program funding that occurred during the reporting period, the reasons for the changes (new programs, change in emphasis, statewide reduction, fee cost recovery percentage, etc.), and how the changes affected the program.

Ans: The change in radioactive materials program funding was to increase the fee cost recovery percentage to 100 percent. The change became effective July 1, 1992.

5. Overall, is funding sufficient to support all of the program needs? If not, what are the problem areas?

Ans: Yes, funding is sufficient

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. In addition, States regulating the disposal of low-level radioactive waste facilities in permanent disposal facilities should have access to laboratory support for radiological and non-radiological analyses associated with the licensing and regulation of low-level waste disposal, including soils testing, testing of environmental media, testing of engineering properties of waste packages and waste forms, and testing of other engineering materials used in the disposal of low-level radioactive waste. Access to laboratory support should be available on an "as needed" basis for nonradiological analyses to confirm licensees' and applicants' programs and conditions for nonradiological testing should be prescribed in plans or procedures.

Questions:

1. Describe changes in your laboratory support, such as new instruments, cutbacks, etc., in this period.

Ans: None

2. Have there been problems in obtaining timely and accurate lab results? If yes, discuss the circumstances and how the problem might be corrected.

Ans: No

D. Administrative Procedures (Category II)

NRC Guidelines: The RCP should establish written internal procedures to assure that the staff performs its duties 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, exchange of information and other functions required of the program. Administrative procedures are in addition to the technical procedures utilized in licensing, and inspection and enforcement.

Questions:

1. Briefly list the changes, such as new procedures, updates, policy memoranda, etc., made in your written administrative procedures during the reporting period. Include internal processing of license applications, inspection policies, decommissioning and license termination, fee collection, contacts with media, conflict of interest policies for employees, and exchange of information procedures.

Ans: No changes have been made in written internal procedures. Using quality teams, all internal procedures will be reviewed and revised as appropriate during the next two years. Written guidance was provided to Associates in licensing beta emitters and biologics used in nuclear medicine.

2. Briefly list any new procedures, policy, etc., that have been implemented with respect to the implementation of the regulatory functions under the current organization.

Ans: Not applicable

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, low-level radioactive waste disposal facilities, large scope-Type A Broad, potential for significant releases to the environment) should receive second party review (supervisory, committee, consultant). Supervisory review of inspections, reports and enforcement actions should also be performed. For the implementation of very complex licensing actions, such as initial license review, license renewals and licensing actions associated with a low-level radioactive waste disposal facility, there should be an overall Project Manager responsible for the coordination and compilation of the diverse technical reviews necessary for the completion of the licensing action. The Project Manager should have training or experience in one or more of the main disciplines related to the technical reviews which the Project Manager will be coordinating such as health physics, engineering, earth science or environmental science. When regional offices or other government agencies are utilized, program management should conduct periodic audits of these offices.

## Questions:

1. How many management reviews of license cases were performed in this period?

Ans: All Atlanta Office licensing actions are reviewed by the Program Manager. A total of 1,193 licensing actions were completed for the review period. 990 licensing actions were completed by the Atlanta Office.

2. Were all license reviewers included in the cases selected for management review? If not, explain.

Ans: Yes

3. What audits were made of regional and contract offices?

Ans: The southern regional office was audited by the Program Manager on September 29, 1993.

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 (300-400 licenses) programs. Similar services should be available to regional offices, if utilized. States should have a license document management system that is capable of organizing the volume and diversity of materials associated with licensing and inspection of radioactive materials. Professional staff should not be used for fee collection and other clerical duties.

## Questions:

1. Has the secretarial and clerical support been adequate during this period? If not, explain.

Ans: Yes

2. What word processing, data base, and spread sheet programs are you using?

Ans: Word Perfect 5.1  
Symphony 2.2  
Lotus 1-2-3

G. Public Information (Category I)

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 clearly personal nature. Opportunity for public hearings should be provided in accordance with UMTRCA and applicable State administrative procedure laws during the process of major licensing actions associated with UMTRCA and low-level radioactive waste in permanent disposal facilities.

## Questions:

1. Have changes occurred in the manner in which you handle public information?

Ans: No

IV. PERSONNELA. 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 including the director of the radiation protection program should be commensurate with the type of licenses issued and inspected by the State. For States regulating uranium mills and mill tailings, staff training and experience should also include hydrology, geology, and structural engineering.<sup>2</sup> For programs which regulate the disposal of low-level radioactive waste in permanent facilities, staff training and experience should include civil or mechanical engineering, geology, hydrology, and other earth science, and environmental science. In both types of materials, staff training and experience guidelines apply to available contractors and resources in State agencies other than the RCP. Written job descriptions should be prepared so that professional qualifications needed to fill vacancies can be readily identified.

Questions:

1. Please list all new technical personnel in the Radioactive Materials Program and the Division of Radioactive Waste Management, indicate the degree they received, if applicable, and additional training and years of experience in health physics, engineering, geology, hydrology, etc..

Ans: Ralph McCoy - nuclear navy experience.

Rodriquez Harrell - B.S. in Biology, 15 years experience in radiological chemistry.

Lauren McGaughey - M.M.Sc. in Radiological Science, 13 years (part time) consulting in Medical Radiological Physics.

Cynthia Townsend - M.S. Health Physics.

B. Staffing Level (Category II)

NRC Guidelines: Professional 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. The two professionals available to operate the RCP should not be supervisory or management personnel. 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. States which regulate the disposal of low-level radioactive waste in

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<sup>2</sup> Additional guidance is provided in the Criteria for Guidance of States and NRC in Discontinuance of NRC Regulatory Authority and Assumption Thereof by States Through Agreement (46 FR 7540, 36969 and 48 FR 33376).

permanent disposal facilities should allow a baseline RCP staff effort of 3-4 professional technical person-years (in addition to the two professionals for the basic RCP indicated in the first bullet of this indicator). However, in some cases, the level of site activity may be such that a lower level is adequate, particularly if contractor support is on call. In any event, staff resources should be adequate to conduct inspections on a routine basis during operations of the LLW facility, including inspection of incoming shipments and licensee site activities and to respond to emergencies associated with the site. During periods of peak activity additional staff or specialty consultants should be available on a timely basis.

Questions:

1. Complete a table listing the professional (technical) person-years of effort applied to the agreement or radioactive material program by individual. Include the name, position, and fraction of time spent in the following areas: administration, materials licensing & compliance, emergency response, LLW, U-mills. If these regulatory responsibilities are divided between offices, the table should be consolidated to include all personnel contributing to the radioactive materials program and the radioactive waste management program. If consultants were used to carry out the program's RAM responsibilities, include their efforts. The table heading should be:

<u>NAME</u>	<u>POSITION</u>	<u>AREA OF EFFORT</u>	<u>FTE%</u>
T. Hill	Program Manager	Administration	100
J. Morris	Env. Rad. Spec. Prin.	Licens./Complan.	100
H. Copeland	Env. Rad. Spec. Prin.	Administration	100
C. Maryland	Rad. Hlth. Spec. Prin.	Licens./Complan.	100
R. McCoy	Rad. Hlth. Spec. Prin.	Licens./Complan.	100
C. Townsend	Rad. Hlth. Spec. Sr.	Licens./Complan.	100
R. Harrell	Rad. Hlth. Spec. Sr.	Licens./Complan.	100
L. McGaughey	Rad. Hlth. Spec. Sr.	Licens./Complan.	100

2. Is the staffing level adequate to meet normal and special needs and backup? If not, explain.



Ans: Yes for normal and special needs. It is not adequate for greater than 24 hour backup in the event of a prolonged emergency at a nuclear power facility.

3. Do you currently have vacancies? If so, when do you expect to fill them?

Yes, one vacancy, to be filled in approximately 3 months.

C. Staff Supervision (Category II)

MRC 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 your senior personnel assigned to monitor the work of junior personnel.

Ans: Thomas E. Hill, Program Manager

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. 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. The RCP staff should be afforded opportunities for training that is consistent with the needs of the program.

Questions:

1. Prepare a table listing all of the training courses, workshops, seminars, symposia, etc. that your materials personnel and your radioactive waste management personnel have attended since the last review. The table heading should be:

<u>Student</u>	<u>Course</u>	<u>Sponsor</u>	<u>Dates</u>
C. Maryland	10 CFR Part 20	NRC	2/19-20/92
	Transportation	NRC	3/23-27/92
	Word Perfect 5.1	DNR	6/4-5/92
	Right To Know	DNR	6/26/92
	Three C Program	DNR	1/93

	Total Quality Mgmt.	DNR	8/9-10/93
T. Hill	Computer Trng. (DOS)	DNR	11/91
	Word Perfect 5.1	DNR	12/91
	10 CFR Part 20	NRC	2/19-20/92
	Right To Know	DNR	6/26/92
	Spokesperson Trng.	Ga. Power	7/22/92
	Three C Program	DNR	11/2/92
	Total Quality Mgmt.	DNR	2/8-12/93
H. Copeland	Right To Know	DNR	6/26/92
	Three C Program	DNR	4/15/93
	Total Quality Mgmt.	DNR	8/2-3/93

<u>Student</u>	<u>Course</u>	<u>Sponsor</u>	<u>Dates</u>
J. Morris	Computer Trng. (DOS)	DNR	9/92
	Word Perfect 5.1	DNR	12/92
J. Morris	Right To Know	DNR	6/93
	Three C Program	DNR	7/93
R. McCoy	Computer (Symphony 2.2)	DNR	3/16-17/92
	Right To Know	DNR	4/3/92
	Word Perfect 5.1(Intro)	DNR	5/4-5/92
	Licensing Procedures	NRC	5/11-15/92
	Word Perfect 5.1(Inter)	DNR	6/4-5/92
	Inspection Procedures	NRC	7/27-31/92
	Three C Program	DNR	11/92
	Emergency Response Trng	FEMA	3/2-15/93
	Indus. Radiography	NRC	5/17-21/93
	Total Quality Mgt.	DNR	8/2-3/93
W. Slocumb	Computer Trng. (DOS)	DNR	11/91
	Word Perfect 5.1	DNR	12/91
	Medical Uses of R.N.	NRC	1/92
	RESRAD Version 4.3	EPA,DOE	3/23-24/92
	Rad. Protect. Trng.	DOE	3/31/92
	Licensing Procedures	NRC	5/11-15/92
	Right To Know	DNR	6/26/92
	Three C Program	DNR	3/93
S. Mott	Computer Trng. (DOS)	DNR	9/91
	Computer (Symphony 2.2)	DNR	12/91
	10 CFR Part 20	NRC	2/19-20/92
	Right To Know	DNR	6/26/92
	Three C Program	DNR	3/93
	10 CFR Part 20	NRC	8/3-4/93
R. Harrell	10 CFR Part 20	NRC	8/3-4/93
	Total Quality Mgmt.	DNR	8/11-12/93
	Word Perfect 5.1	DNR	9/7-8/93
L. McGaughey	10 CFR Part 20	NRC	8/3-4/93
	Word Perfect 5.1	DNR	8/12-13/93
	Total Quality Mgmt.	DNR	9/1-2/93
C. Townsend	Word Perfect 5.1	DNR	9/7-8/93

2. If any of your materials or radioactive waste management staff currently need NRC training, please identify the employees and the courses needed.

Ans: Ralph McCoy needs Radiation Protection Engineering and the 5 week Health Physics Course.

Lauren McGaughey, Rodriquez Harrell, and Cynthia Townsend need Licensing Procedures, Inspection Procedures, Medical Uses of Radionuclides, Industrial Radiography and the 5 week Health Physics Course.

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 technical staff who left the Agreement program during this period and, if possible, give the reasons for the turnovers.

Ans: Patrick Cochran - Advancement & Salary  
 William Slocumb - Transfer to Env. Rad. Program  
 Elizabeth Drinnon - Transfer to Water Monitor Program  
 Sharon Mott - Personal Reasons

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. Additionally, in States which regulate the disposal of low-level radioactive waste in permanent disposal facilities, the RCP should assure that essential elements of waste disposal applications meet State licensing requirements for waste product and volume, qualifications of personnel, facilities and equipment, operating and emergency procedures, financial qualifications and assurances, closure and decommissioning procedures and institutional arrangements in a manner sufficient to establish a basis for licensing action. Licensing activities should be adequately documented including safety evaluation reports, product certifications or similar documentation of the license review and approval process. 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. Update the list of the State's major licensees. In addition to the name, license number and type, please indicate if the license is new or was terminated (action). Include:
  - o Broad Licenses
  - o LLW Disposal
  - o LLW Brokers (All Types)
  - o Manufacturers and Distributors
  - o Uranium Mills
  - o Irradiators (Other than Self-Contained)
  - o Nuclear Pharmacies
  - o Other Licenses With a Potential Significance for Environmental Impact

The table heading should be:

<u>Licensee Name</u>	<u>License Number</u>	<u>License Type</u>
University of Georgia	GA 103-1	Broad Scope
Georgia Institute of Technology	GA 147-1	Broad Scope
Emory University	GA 153-1	Broad Scope
Medical College of Georgia	GA 7-1	Broad Scope
Analytics, Incorporated	GA 742-1	Services & Distr.
Valmet Automation (USA), Inc.	GA 458-2	Services & Distr.
	GA 458-3G	of GL Gauges
	GA 458-4G	
Johnson-Yokogawa Corp. of America	GA 1192-1	Distr. of Specific License Gauges
Nortech Systems, Ltd.	GA 858-1	Receive, distribute, survey, install, & relocate specific license gauges.
Ahlstrom Machinery, Inc.	GA 832-1	Service & distribute GL devices.
Interstate Nuclear Services	GA 894-1	Nuclear Laundry
Theragenics Corporation	GA 881-2	Mfg. & Distribution of therapy seeds
Andersen Samplers, Inc.	GA 1055-2	Distribution of GL devices.
Div. Pharm. Servcs.of Mid.Ga.,Inc.	GA 891-1	Radiopharmacy
Mallinckrodt Diag.Imag.Servs.,Inc.	GA 877-1	Radiopharmacy
Primary Source of Augusta, Inc.	GA 823-2	Radiopharmacy
MPI Pharmacy Services	GA 1166-1	Radiopharmacy

Syncor International Corporation	GA 467-1	Radiopharmacy
Syncor International Corporation	GA 467-2	Radiopharmacy
Siempelkamp Corporation	GA 1080-1	Distr. of specific license devices
Atlan-Tech, Inc.	GA 888-2	Distr. & services
Brainard-Kilman Drill Co.	GA 318-1	Distr. & services
Smith-Kline Beecham Clinical Lab.	GA 123-1	Distribution
	GA 123-2	
Carr Scarborough Microbiologicals	GA 793-1	Mfr. & distrib.
Dupont Merck Pharmaceutical Co.	GA 738-1	Distribution
Sci. Prod. Div.-Baxter Scientific	GA 872-1	Distribution

2. Identify any major, unusual, or complex licenses issued or renewed in this period.

Ans: Emory Univ. P.E.T. Cyclotron  
Crawford Long Cyclotron  
Kennestone P.E.T.  
University of Georgia  
Emory University  
Theragenics - Cyclotron

3. Have any new or amended licenses affected the list of licensees requiring contingency plans?

Ans: No

4. Discuss any variances in licensing policies and procedures or exemptions from the regulations granted during the period.

Ans: None

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 on 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. Approval documents for radioactive waste packages, solidification and stabilization media, or other vendor products used to treat radioactive waste for disposal should be complete and accurate as to the use, capabilities, limitations, and site specific restrictions associated with each product.

Questions:

1. Prepare a table listing new and revised SS&D registrations of sealed sources and devices issued during the reporting period. The table heading should be:

<u>SS&amp;D Registry Number</u>	<u>Manufacturer, Distributor or Custom User</u>	<u>Type of Device or Source</u>	<u>Indicate if NARM</u>	<u>Indicate if Agreement Material</u>
GA-161D001-S	Atlan-Tech	S.C.Gamma Irrad.	No	Yes
GA-161D102-S	Atlan-Tech	B. Calibrator	No	Yes
GA-107D001-S	Automata	Area Wt. Gauge	No	Yes
GA-571D101-G	Honeywell	Basis Wt. Gauge	No	Yes
GA-269D101-S	Elekta	Teletherapy	No	Yes
GA-698S801-S	U. of Ga.	Photo.Calib.Std.	No	Yes

2. List the applications for SS&D registrations for which registry documents have not yet been issued.

Ans: Valmet Automation (USA), Inc.  
Tapio Technologies, Inc.

3. Please provide a listing of approval documents for any radioactive waste packages, solidification and stabilization media, or other vendor products used to treat radioactive waste, that the State has approved since the last review.

Ans: Not applicable

C. Licensing Procedures (Category II)

NRC Guidelines: The RCP should have internal licensing guides, checklists, and policy memoranda consistent with current NRC practice. In States which regulate the disposal of low-level radioactive waste in permanent disposal facilities, the RCP should have program specific licensing guides, plans and procedures for license review and policy memoranda which relate to specific aspects of waste disposal. The program should include the preparation of safety evaluation reports, product certifications, or similar documentation of license review and approval process. 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 and persons exempt from licensing 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. What changes were made in your written licensing procedures (new procedures, updates, policy memoranda, etc.) during the reporting period for materials licenses and for the radioactive waste licenses?

Ans: All licensing guides have been updated and are currently in draft or final form.

VI. COMPLIANCEA. 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 inspection program in all States should provide for the inspection of licensee's waste generation activities under the State's jurisdiction. In States which regulate the disposal of low-level radioactive waste in permanent disposal facilities, the RCP should include provisions for pre-operational, operational, and post-operational facility inspections. The inspections should cover all program elements which are relevant at the time of the inspection and be performed independently of any resident inspector program. In addition, inspections should be conducted on a routine basis during the operation of the LLW facility, including inspection of incoming shipments and licensee site activities. 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 versus junior staff, assignments to regions, identification of special needs and periodic status reports. When backlogs occur the program should develop and implement a plan to reduce the backlog. The plan should identify priorities for inspections and establish target dates and milestones for assessing progress.

## Questions:

1. Prepare a table identifying the Priority 1, 2, and 3 licenses with inspections that are overdue by more than 50% of their scheduled frequency. Include the licensee name, inspection priority, the due date, and the number of months the inspection is overdue. The list should include initial inspections that are overdue. The table heading should be:

<u>Licensee Name</u>	<u>Insp. Freq.</u> <u>(Years)</u>	<u>Due Date</u>	<u>Months O/D</u>
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Ans: None overdue

2. Describe your action plan for completing your overdue inspections. If there is a backlog of
- (1) inspections with an inspection frequency of 3 years or less that are overdue by more than 50% of their scheduled frequency, or
  - (2) inspections with lower inspection frequencies that are overdue by more than 100% of their scheduled frequency,

please include with the questionnaire a written action plan for eliminating the backlog. The written action plan should contain inspection priorities, numerical and time frame goals for reducing the backlog, provide a method to measure the program's progress, and provide for management review of the program's success in meeting the goals.

Ans: Since November 1990, the program has not had an inspection backlog. An action plan for overdue inspections is not required.

3. How many on-site close-out inspections prior to license termination were made during the reporting period?

Ans: One

4. How many on-site close-out inspections are pending at this time?

Ans: None

5. How many reciprocity notices were received in the reporting period?

Ans: 475

6. How many reciprocity inspections were conducted?

Ans: One

7. Other than reciprocity licensees, how many field inspections of radiographers were performed?

Ans: 2

8. What percentage is this of your total number of radiographer licensees?

Ans: 15 percent

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. Identify individual licensees or groups of licensees the State is inspecting more frequently than called for in the State's inspection priority system and discuss the reason for the change.

Ans: Periodically, because of a large number of items of noncompliance, a licensee may be scheduled for inspection earlier than the priority designation for that type of license would require. However, there are no licensees who are routinely scheduled for earlier inspections.

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. For the inspection of complex licensed activities such as permanent low-level radioactive waste disposal facilities, a multidisciplinary team approach is desirable to assure a complete compliance assessment. 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. Prepare a table showing the number and types of supervisory accompaniments made during the reporting period. Include:

<u>Supervisor</u>	<u>Inspector</u>	<u>License Category</u>	<u>Date</u>
T. Hill	W. Slocumb	Teletherapy	3/93
T. Hill	C. Maryland	Inst. Medical	6/93
T. Hill	R. McCoy	Inst. Medical	6/93
T. Hill	J. Morris	Inst. Medical	9/93

2. Were all inspectors accompanied at least annually by the compliance supervisor during the reporting period? If not, explain.

Ans: No. Workload and priority did not allow in 1992. The Program Manager reviews all inspection reports and letters of noncompliance. Inspectors were accompanied in 1993.

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

NRC Guidelines: Inquiries should be promptly made to evaluate the need for on-site investigations. On-site 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. On-site 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. In this reporting period, did any incidents occur that involved equipment or source failure or approved operating procedures that were deficient?

Ans: No

If so,

- a. How and when were other State licensees who might be affected notified?
- b. Was the NRC notified?

For incidents involving failure of equipment or sources, was information on the incident provided to the agency responsible for evaluation of the device for an assessment of possible generic design deficiency? Please provide details for each case.

Ans: Not applicable

If the RCP utilized medical or technical consultants for an emergency during the reporting period, please describe the circumstances for each case.

Ans: Not applicable

In the reporting period, were there any cases involving possible criminal wrongdoing that were looked into or are presently undergoing review? If so, please describe the circumstances for each case.

Ans: Not applicable

5. Please provide a copy of your written procedures for reporting events data and misadministrations to NRC.

Ans: Available

6. Please describe how you inform your licensees about the importance of reporting accurate and timely events information, including misadministration reporting.

Ans: Bulletins are mailed to the appropriate licensees.

7. Please have copies of all misadministrations and events available for discussion and review.

Ans: Available

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. If during the reporting period the State issued orders, applied civil penalties, sought criminal penalties, impounded sources, or held formal enforcement hearings, identify these cases and give a brief summary of the circumstances and results for each case.

Ans: Consent Orders were negotiated with Southern Zinc, a subsidiary of U. S. Zinc. and with Emory University, GA 153-1. An Administrative Order was issued to MedCross Inc., GA 1218-1. Calibration and reference sources were received from Clinical Medical Equipment, GA 770-1.

Southern Zinc, who is not a licensee, signed a consent order agreeing to decontaminate their zinc recovery facility. Portions of their facility had become contaminated with depleted uranium. The consent order also included provisions for the determination of any hazardous constituents. Participants in the negotiation not only included representatives of the Radioactive Materials Program but also included representatives of the Hazardous Materials and the Environmental Radiation Programs.

Emory University signed a consent order agreeing to provide sufficient resources to administer a comprehensive radiation safety program. Inspection had identified shortcomings in the number of staff which affected their ability to operate an effective radiation safety program.

MedCross was issued an Administrative Order as the result of the identification of a large number of violations of the rules and regulations and license conditions during an initial inspection. The Program also requested the imposition of civil penalties. This request was later dropped after the licensee came into compliance. The Program's request for civil penalties was premature as the licensee was not initially provided an opportunity to correct the noncompliance.

Clinical Medical Equipment Co. declared bankruptcy. Their calibration and other sources were turned over to the Department. The sources were <sup>57</sup>Cobalt E vials and button sources.

2. Discuss changes made in the enforcement procedures during the reporting period.

Ans: None

3. Briefly describe the enforcement program used to regulate permittees that transfer radioactive waste to the LLW site.

Ans: Not applicable

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 licensee 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. What changes were made to your written inspection procedures during the reporting period?

Ans: None

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 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. What changes were made in the formats of your reports or inspection forms during this period?

Ans: No substantive changes have been made in the format of reports or forms, but word processed forms and inspection reports are now routinely generated.

#### 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. In States which regulate the disposal of low-level radioactive waste in permanent disposal facilities, access to testing should be available on an "as needed" basis for confirming licensees' and applicants' programs for measurements related to nonradiological aspects of facility operations such as soils and materials testing and environmental sampling and analysis to demonstrate compliance with 10 CFR Part 61 or compatible Agreement State regulations and ensure facility performance. Conditions for nonradiological testing should be prescribed in plans or procedures. RCP instrumentation should include the following types:

GM Survey Meter: 0-50 mr/hr  
Ion Chamber Survey Meter: up to several R/hr  
Neutron Survey Meter: Fast & Thermal  
Alpha Survey Meter: 0-100,000 c/m  
Air Samplers: Hi and Low Volume  
Lab Counters: Detect 0.001 c/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 should be calibrated at intervals not greater than that required to licensees being inspected.

(Note: Additional types of instrumentation that are highly desirable are thin window plastic or NaI detectors for low energy gammas and "micro-R" meters with audio signal for searching for lost gamma emitter sources.)

#### Questions:

1. Describe any changes in your instrumentation or methods of calibration in this reporting period.

Ans: Changes have been made in the methods of instrument calibration during this reporting period. Instrument calibrations are now being performed either by the manufacturer or by the State of South Carolina calibration facility.

SPECIAL TOPICS OF CURRENT INTEREST

If you like, describe your program's successes, problems or difficulties that occurred during this reporting period.



PART II  
PROGRAM STATISTICS

For calendar year ending December 31, 1992

\*1. How many specific licenses are currently in effect? Ans: 517

2. During the last calendar year,

how many new licenses were issued? Ans: 23

how many licenses were terminated? Ans: 65

how many licenses were renewed? Ans: 63

how many amendments were issued? Ans: 656 (493 of these were administrative amendments).

how many SS&D evaluations were completed? Ans: 2

How many prelicensing visits were made during this past calendar year?

Ans: 4

How many new licenses (or major amendments) were hand delivered to the licensee?

Ans: 1

How many materials incidents, other than unfounded allegations, occurred during the last calendar year?

Ans: 19

How many on-site investigations of incidents were conducted during the last calendar year?

Ans: 14

\* How many incidents required NRC notification, either by telephone or by written report?

Ans: 3

\* How many of the incidents required Abnormal Occurrence Reports?

Ans: None

\* How many of the incidents involved leaking from sealed sources?

Ans: None

\* How many misadministrations occurred during the last calendar year?

Ans: 3

How many civil penalties were imposed during the last calendar year?

Ans: None

How many orders were issued during the last calendar year?

Ans: One administrative order.

How many technical FTE's (not including administrative, clerical or unfilled vacancies) are currently assigned to the:

Radioactive materials program? 6

Low-Level waste program? N/A

Uranium mills program? N/A

Compute the professional/technical person-year effort of person-years per 100 licenses (excluding management above the direct RAM supervisor, vacancies and personnel assigned to mills and burial site licenses). Count only time dedicated to radioactive materials.

Ans: 6 person-yr per 517 licenses = 86 licenses/person-yr. This gives a ratio of 1.16 person-yr/100 licenses.

List the RCP salary schedule as follows:

<u>Position Title</u>	<u>Annual Salary Range</u>
Radiological Health Spec., Sr.	\$25,068 - \$39,936
Radiological Health Spec., Prin.	\$28,428 - \$45,282
Environ. Radiation Spec., Prin.	\$29,640 - \$47,238
Program Manager	\$32,262 - \$51,498

Please complete the following table using the license categories as shown, and including the total number of specific licenses in each category, the priority or inspection frequency, the number of inspections made during the review period, and the number of overdue inspections in each category. (In Priorities 1-3, include those overdue by more than 50% of their scheduled inspection frequency; in lower priorities, include those overdue by more than 100% of their scheduled frequency.)

NOTE: There were no overdue inspections in calendar year 1992.

	<u>CODE</u>	<u>GA. LICENSE</u>	<u>INSP. FREQ (YRS.)</u>	<u>NO. OF LICENSES</u>	<u>NO. OF INSP.</u>
1	A	ACADEMIC, NON-BROAD	6	12	2
2	B	BONE MINERAL ANALYZER	4	2	1
3	BAA	ACADEMIC, TYPE A BROAD	2	5	2
4	BAB	ACADEMIC, TYPE B BROAD	2	0	0
5	BAC	ACADEMIC, TYPE C BROAD	5	0	0
6	BM	BROAD MEDICAL	1	0	0
7	CAL	CALIBRATION SERVICE	3	6	1
8	CAM	GAMMA CAMERA QC CHECK	3	3	1
9	CTE	CONTAMINATED EQUIPMENT	7	2	0
10	DEC	DECONTAMINATION SERVICE	2	0	0
11	DEX	DISTRIBUTION, NARM EXEMPT	5	0	0
12	DGL	NON-MEDICAL DISTRIBUTION, GL	3	12	0
13	DS	MFG. & DISTRIBUTION, NON-BROAD, SPECIFIC	3	4	3
14	DSA	MFG. & DISTRIBUTION, TYPE A BROAD, SPECIFIC	1	0	0
15	DSB	MFG. & DISTRIBUTION, TYPE B BROAD, SPECIFIC	3	0	0
16	DSC	MFG. & DISTRIBUTION, TYPE C BROAD, SPECIFIC	5	0	0
17	DU	DEPLETED URANIUM	7	6	0
18	E	EYE APPLICATOR	4	10	2
19	EM	EMERGENCY MANAGEMENT	7	2	0
20	ER	EMERGENCY RESPONSE	7	0	0
21	FF	FIELD FLOODING STUDIES	3	0	0
22	FG	FIXED GAUGE, MEASURING SYSTEM	5	74	17
23	GC	GAS CHROMATOGRAPH	6	24	4
24	GI	GAMMA IRRADIATOR, SELF-SHIELDED	3	2	3
25	GIP	GAMMA IRRADIATOR, POOL	1	0	0
26	GL	GENERAL LICENSE	7	27	0
27	IRB	INDUSTRIAL RADIOGRAPHY, FIXED & MOBILE	1	3	3
28	IRF	INDUSTRIAL RADIOGRAPHY, FIXED	1	0	0
29	IRM	INDUSTRIAL RADIOGRAPHY, MOBILE	1	12	8
30	IVG	IN VITRO, GENERAL	5	0	0
31	IVS	IN VITRO, SPECIFIC	5	10	0
32	L	LIXISCOPE	4	0	0
33	LAB	LABORATORY	6	2	0
34	LG	GAUGE, LABORATORY	6	1	0
35	LT	LEAK TEST SERVICE	7	18	0
36	M	MOBILE NUCLEAR MEDICINE	2	2	1
37	MDGL	MEDICAL DISTR., GENERAL	3	2	2
38	MDSG	MEDICAL DISTR., REAGENT KITS	5	0	0
39	MDSR	MEDICAL DISTR., RADIOPHARM., GENERATORS	3	0	0
40	MDSS	MEDICAL DISTR., SEALED SOURCES	3	0	0
41	MS	ANALYTICAL INSTRUMENTS, MEASURING SYSTEMS	6	1	0
42	NL	NUCLEAR LAUNDRY	3	1	0
43	NOR	NORM MATERIAL	3	1	0
44	NUC	NUCLEAR CARDIOLOGY	4	17	8
45	NUM	NUCLEAR MEDICINE	3	110	22
46	NUP	NUCLEAR PHARMACY	1	6	0

			INSP.	NO. OF	NO. OF
CODE	GA. LICENSE	FREQ (YRS.)	LICENSES	INSP.	
47	P PACEMAKER	7	2	0	
48	PG PORTABLE GAUGE, MEASURING SYSTEM	3	85	29	
49	PNC PRIVATE PRACTICE NUCLEAR, LIMITED THERAPY	3	0	0	
50	PNL PRIVATE PRACTICE NUCLEAR, DIAGNOSTIC ONLY	4	12	5	
51	R RADIUM	7	3	0	
52	RD RESEARCH & DEVELOPMENT, NON-BROAD	2	8	4	
53	RDA RESEARCH & DEVELOPMENT, TYPE A BROAD	2	0	0	
54	RDB RESEARCH & DEVELOPMENT, TYPE B BROAD	3	0	0	
55	RDC RESEARCH & DEVELOPMENT, TYPE C BROAD	5	0	0	
56	RT SEALED SOURCE THERAPY	3	8	5	
57	S STORAGE	7	3	2	
58	SM SOURCE MATERIAL	3	0	0	
59	SNMP SPECIAL NUCLEAR MATERIAL, POWER SOURCE	7	0	0	
60	SNMS SPECIAL NUCLEAR MATERIAL, SEALED SOURCE	5	0	0	
61	SNMU SPECIAL NUCLEAR MATERIAL, UNSEALED SOURCE	2	0	0	
62	T TELETHERAPY	1	12	5	
63	TS TELETHERAPY SERVICE	3	1	0	
64	V VETERINARY	5	0	0	
65	WDB WASTE DISPOSAL SERVICE, BURIAL	1	0	0	
66	WDI WASTE DISPOSAL SERVICE, INCINERATION	1	0	0	
67	WDP WASTE DISPOSAL SERVICE, PREPACKAGED	2	0	0	
68	WDPR WASTE DISPOSAL SERVICE, PROCESSING & REPACKAGING	1	0	0	
69	WL WELL LOGGING	3	0	0	
70	AL AFTERLOADER DEVICES	2	2	1	
71	GS GAUGE SERVICE	3	1	1	

PART IIA  
PROGRAM STATISTICSFor January 1, 1993 - October 15, 1993

1. How many specific licenses are currently in effect? . . . . . Ans: 517
2. During this calendar year,
  - how many new licenses were issued? . . . . . Ans: 31
  - how many licenses were terminated? . . . . . Ans: 31
  - how many licenses were renewed? . . . . . Ans: 66
  - how many amendments were issued? . . . . . Ans: 182
  - how many SS&D evaluations were completed? . . . . . Ans: 1
3. How many prelicensing visits were made during this past calendar year?  
Ans: 2
4. How many new licenses (or major amendments) were hand delivered to the licensee?  
Ans: 2
5. How many materials incidents, other than unfounded allegations, occurred during the last calendar year?  
Ans: 13
6. How many on-site investigations of incidents were conducted during the last calendar year?  
Ans: 11
7. How many incidents required NRC notification, either by telephone or by written report?  
Ans: 3
8. How many of the incidents required Abnormal Occurrence Reports?  
Ans: None
9. How many of the incidents involved leaking from sealed sources?  
Ans: None

10. How many misadministrations occurred during the last calendar year?

Ans: 9

11. How many civil penalties were imposed during the last calendar year?

Ans: None

12. How many orders were issued during the last calendar year?

Ans: Two consent orders.

13. How many technical FTE's (not including administrative, clerical or unfilled vacancies) are currently assigned to the:

- Radioactive materials program? . . . . . 6
- Low-Level waste program? . . . . . N/A
- Uranium mills program? . . . . . N/A

14. Compute the professional/technical person-year effort of person-years per 100 licenses (excluding management above the direct RAM supervisor, vacancies and personnel assigned to mills and burial site licenses). Count only time dedicated to radioactive materials.

Ans: 6 person-yr per 517 licenses = 86 licenses/person-yr. This gives a ratio of 1.16 person-yr/100 licenses.

15. List the RCP salary schedule as follows:

<u>Position Title</u>	<u>Annual Salary Range</u>
Radiological Health Spec., Sr.	\$25,068 - \$39,936
Radiological Health Spec., Prin.	\$28,428 - \$45,282
Environ. Radiation Spec., Prin.	\$29,640 - \$47,238
Program Manager	\$32,262 - \$51,498

16. Please complete the following table using the license categories as shown, and including the total number of specific licenses in each category, the priority or inspection frequency, the number of inspections made during the review period, and the number of overdue inspections in each category. (In Priorities 1-3, include those overdue by more than 50% of their scheduled inspection frequency; in lower priorities, include those overdue by more than 100% of their scheduled frequency.)

NOTE: There were no overdue inspections in calendar year 1993.

	<u>CODE</u>	<u>GA. LICENSE</u>	<u>INSP. FREQ (YRS.)</u>	<u>NO. OF LICENSES</u>	<u>NO. OF INSP.</u>
1	A	ACADEMIC, NON-BROAD	6	12	0
2	B	BONE MINERAL ANALYZER	4	2	1
3	BAA	ACADEMIC, TYPE A BROAD	2	5	3
4	BAB	ACADEMIC, TYPE B BROAD	2	0	0
5	BAC	ACADEMIC, TYPE C BROAD	5	0	0
6	BM	BROAD MEDICAL	1	0	0
7	CAL	CALIBRATION SERVICE	3	6	3
8	CAM	GAMMA CAMERA QC CHECK	3	2	1
9	CTE	CONTAMINATED EQUIPMENT	7	3	1
10	DEC	DECONTAMINATION SERVICE	2	0	0
11	DEX	DISTRIBUTION, NARM EXEMPT	5	0	0
12	DGL	NON-MEDICAL DISTRIBUTION, GL	3	13	4
13	DS	MFG. & DISTRIBUTION, NON-BROAD, SPECIFIC	3	4	1
14	DSA	MFG. & DISTRIBUTION, TYPE A BROAD, SPECIFIC	1	0	0
15	DSB	MFG. & DISTRIBUTION, TYPE B BROAD, SPECIFIC	3	0	0
16	DSC	MFG. & DISTRIBUTION, TYPE C BROAD, SPECIFIC	5	0	0
17	DU	DEPLETED URANIUM	7	8	0
18	E	EYE APPLICATOR	4	10	0
19	EM	EMERGENCY MANAGEMENT	7	1	0
20	ER	EMERGENCY RESPONSE	7	0	0
21	FF	FIELD FLOODING STUDIES	3	0	0
22	FG	FIXED GAUGE, MEASURING SYSTEM	5	73	11
23	GC	GAS CHROMATOGRAPH	6	23	2
24	GI	GAMMA IRRADIATOR, SELF-SHIELDED	3	2	2
25	GIP	GAMMA IRRADIATOR, POOL	1	0	0
26	GL	GENERAL LICENSE	7	28	0
27	IRB	INDUSTRIAL RADIOGRAPHY, FIXED & MOBILE	1	3	1
28	IRF	INDUSTRIAL RADIOGRAPHY, FIXED	1	0	0
29	IRM	INDUSTRIAL RADIOGRAPHY, MOBILE	1	11	7
30	IVG	IN VITRO, GENERAL	5	0	0
31	IVS	IN VITRO, SPECIFIC	5	9	1
32	L	LIXISCOPE	4	0	0
33	LAB	LABORATORY	6	2	0
34	LG	GAUGE, LABORATORY	6	1	1
35	LT	LEAK TEST SERVICE	7	18	1
36	M	MOBILE NUCLEAR MEDICINE	2	3	0
37	MDGL	MEDICAL DISTR., GENERAL	3	2	0
38	MDSG	MEDICAL DISTR., REAGENT KITS	5	0	0
39	MDSR	MEDICAL DISTR., RADIOPHARM., GENERATORS	3	0	0
40	MDSS	MEDICAL DISTR., SEALED SOURCES	3	0	0
41	MS	ANALYTICAL INSTRUMENTS, MEASURING SYSTEMS	6	1	1
42	NL	NUCLEAR LAUNDRY	3	1	0
43	NOR	NORM MATERIAL	3	1	0
44	NUC	NUCLEAR CARDIOLOGY	4	21	2
45	NUM	NUCLEAR MEDICINE	3	109	27
46	NUP	NUCLEAR PHARMACY	1	6	3

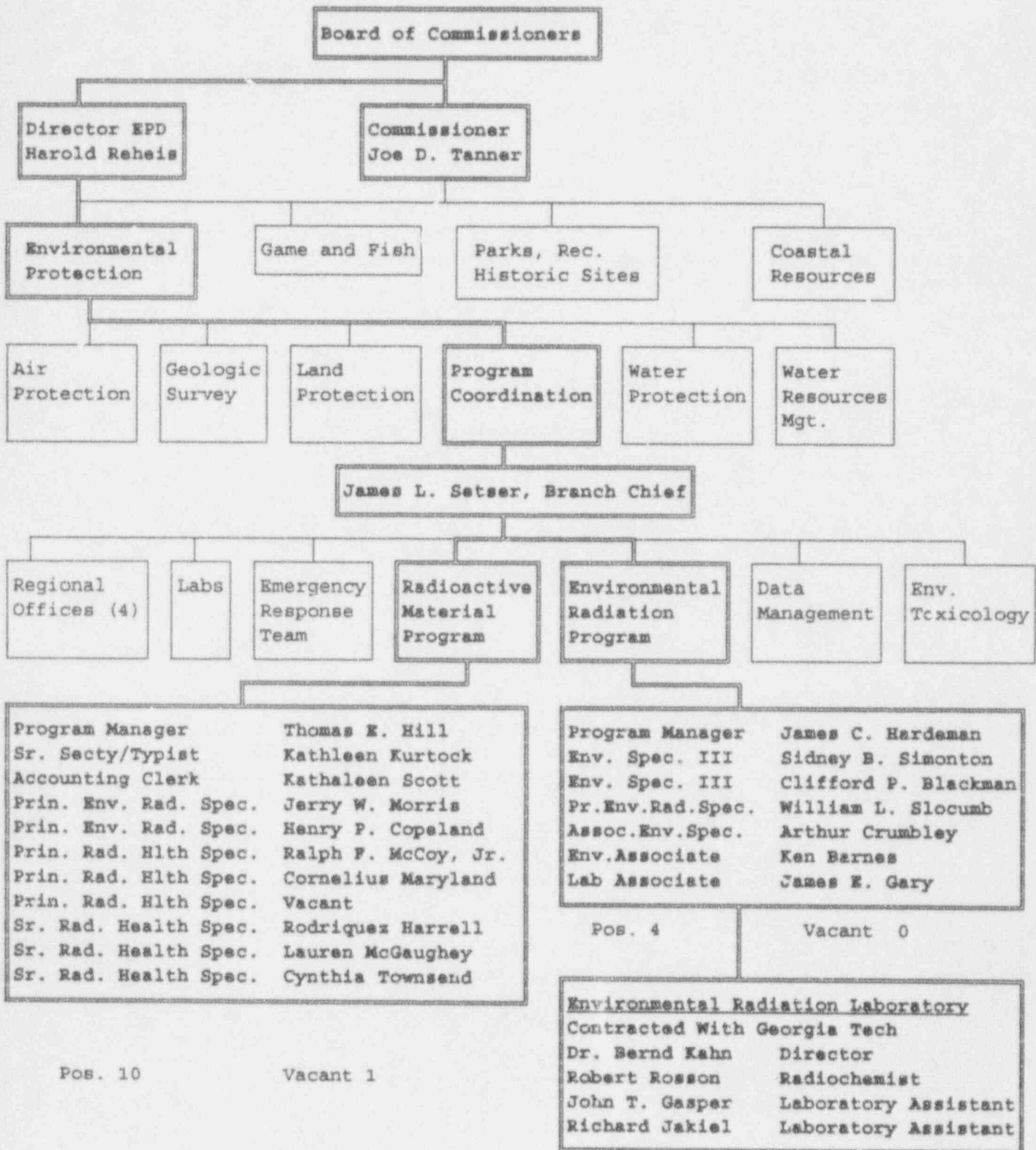
<u>CODE</u>	<u>GA. LICENSE</u>	<u>FREQ (YRS.)</u>	<u>LICENSES</u>	<u>INSP.</u>
47	P PACEMAKER	7	2	0
48	PG PORTABLE GAUGE, MEASURING SYSTEM	3	86	19
49	PNC PRIVATE PRACTICE NUCLEAR, LIMITED THERAPY	3	0	0
50	PNL PRIVATE PRACTICE NUCLEAR, DIAGNOSTIC ONLY	4	9	3
51	R RADIUM	7	2	4
52	RD RESEARCH & DEVELOPMENT, NON-BROAD	2	8	0
53	RDA RESEARCH & DEVELOPMENT, TYPE A BROAD	2	0	0
54	RDB RESEARCH & DEVELOPMENT, TYPE B BROAD	3	0	0
55	RDC RESEARCH & DEVELOPMENT, TYPE C BROAD	5	0	0
56	RT SEALED SOURCE THERAPY	3	10	6
57	S STORAGE	7	5	1
58	SM SOURCE MATERIAL	3	0	0
59	SNMP SPECIAL NUCLEAR MATERIAL, POWER SOURCE	7	0	0
60	SNMS SPECIAL NUCLEAR MATERIAL, SEALED SOURCE	5	0	0
61	SNMU SPECIAL NUCLEAR MATERIAL, UNSEALED SOURCE	2	0	0
62	T TELETHERAPY	1	11	4
63	TS TELETHERAPY SERVICE	3	1	0
64	V VETERINARY	5	0	0
65	WDB WASTE DISPOSAL SERVICE, BURIAL	1	0	0
66	WDI WASTE DISPOSAL SERVICE, INCINERATION	1	0	0
67	WDP WASTE DISPOSAL SERVICE, PREPACKAGED	2	0	0
68	WDPR WASTE DISPOSAL SERVICE, PROCESSING & REPACKAGING	1	0	0
69	WL WELL LOGGING	3	0	0
70	AL AFTERLOADER DEVICES	2	2	3
71	GS GAUGE SERVICE	3	1	0



APPENDIX B

ORGANIZATION CHARTS

Georgia Department of Natural Resources



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## APPENDIX C

### REVIEWER EXPLANATORY COMMENTS AND OBSERVATIONS

The following Indicator assessments, comments and recommendations were developed during the review. They are based upon the Appendix A Questionnaire, discussions with the Program staff members, observations, casework file reviews, and inspector accompaniments.

#### I. LEGISLATION AND REGULATIONS

##### A. Legal Authority (Category I)

###### Assessment:

There have been no changes to the State's statutory authority for the regulation of radioactive materials since the last review, and the requirements of this Indicator have been satisfied.

No comments or recommendations were offered under this Indicator.

##### B. Status and Compatibility of Regulations (Category I)

###### Assessment:

The State does not fully satisfy the requirements of this Program Indicator.

###### Comment:

The State's regulations are compatible with the NRC regulations up to the 10 CFR Parts 30, 40, and 70 amendments on "Emergency Planning" (54 FR 14061) that became effective on April 7, 1990.

The following regulations were identified during the review as being needed for compatibility and have been drafted by the State:

- o "Emergency Planning", 10 CFR Parts 30, 40, and 70 amendments that became effective on April 7, 1990 (54 FR 14061).
- o "Standards for Protection Against Radiation", 10 CFR Part 20 amendment (56 FR 61352) that was adopted on June 20, 1991, and will be needed by January 1, 1994.
- o "Notification of Incidents", 10 CFR Parts 20, 30, 31, 34, 39, 40, and 70 amendments (56 FR 40757) that became effective on October 15, 1991 and will be needed by October 15, 1994.
- o "Quality Management Program and Misadministrations", 10 CFR Part 35 amendment (56 FR 34104) that became effective on January 27, 1992 and will be needed by January 27, 1995.

The Radioactive Materials regulations, Chapter 391-3-17 have been completely revised and they are scheduled for a public hearing on November 12, 1993. The proposed regulations will then be sent to the Legislative Research Council for review. After 30 days the rules can be presented to the Board of Natural Resources for adoption. Once approved by the Board, the rules become effective twenty days after being filed with the Secretary of State's Office. The regulations are currently being projected to be approved by the Board during their February 1994 meeting, and would become effective sometime in March of 1994.

The above proposed regulations have been reviewed for compatibility and when adopted, they will be compatible with the NRC regulations through the "Quality Management Program and Misadministrations" regulations (56 FR 34104) that became effective on January 27, 1992.

**Recommendation:**

It was recommended that the State continue their efforts to amend their regulations that are needed for compatibility, and to notify the Region II Office when the rules needed for compatibility become effective.

**II. ORGANIZATION**

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

**Assessment:**

There have been no changes to the location of the RCP within the State Organization. The RCP satisfies the requirements of this Program Indicator.

No comments or recommendations were offered under this Indicator.

**B. Internal Organization of the RCP (Category II)**

**Assessment:**

There have been no changes in the internal organization of the RCP. The State satisfies the requirements of this Indicator.

No comments or recommendations were offered under this Indicator.

**C. Legal Assistance (Category II)**

**Assessment:**

The RCP has utilized legal assistance as needed, and the assistance was reported as satisfactory. The State satisfies the requirements of this Indicator.

No comments or recommendations were offered under this Indicator.

D. Technical Advisory Committees (Category II)

Assessment:

The RCP has established an Environmental Radiation Advisory Committee and a Medical Advisory Committee. The committees are utilized on an advisory basis and as needed, but formal meetings are not required. The RCP satisfies the requirements of this Indicator.

No comments or recommendations were offered under this Indicator.

E. Contractual Assistance (Category II)

Assessment:

This Indicator is applicable only to States having a permanent low-level radioactive waste facility.

III. MANAGEMENT AND ADMINISTRATION

A. Quality of Emergency Planning (Category I)

Assessment:

The RCP has been involved in numerous Emergency Exercises since the last review and the communication list has been updated. The RCP satisfies the requirements of this Guideline Indicator.

No comment or recommendation was offered under this Indicator.

B. Budget (Category II)

Assessment:

The materials program is 100 percent funded by fees and these funds are credited to a special fund. The RCP satisfies the requirements of this guideline indicator.

No comment or recommendation was offered under this indicator.

C. Laboratory Support (Category II)**Assessment:**

The RCP's Laboratory is a contractor laboratory located on the Georgia Institute of Technology campus. RCP satisfies the requirements of this guideline indicator.

No comment or recommendation was offered under this indicator.

D. Administrative Procedures (Category II)**Assessment:**

The RCP does not fully meet all of the requirements of this guideline indicator.

**Comment:**

The RCP should have written internal procedures to assure that the staff performs its duties as required and to provide a high degree of uniformity and continuity in regulatory practices. The RCP has established many internal procedures over the years and the staff is currently reviewing the administrative procedures developed by the Conference of Radiation Control Program Directors (E-15 Committee), and the Program Manager has committed to revising the internal procedures over the next two years. Discussions with the staff indicates that the staff have been trained in the administrative and technical procedures to the extent covered by the current procedures.

**Recommendation:**

We recommend that the plans to revise the internal administrative procedures be implemented and completed on schedule.

E. Management (Category II)**Assessment:**

The RCP manager does an excellent job in assessing the program resources, regulatory actions needed, and the actions being taken by the staff. The RCP satisfies the requirements of this guideline indicator.

No comment or recommendation was offered under this indicator.

F. Office Equipment and Support Services (Category II)**Assessment:**

The RCP appears to have adequate administrative support staff and computerized data information systems. The RCP satisfies the requirements of this guideline indicator.

No comment or recommendation was offered under this indicator.

G. Public Information (Category II)

Assessment:

The State operates under an "open records" law whereby "proprietary" information can be withheld as appropriate. The State does not operate under "sunset" provisions. The RCP satisfies the requirements of this guideline indicator.

No comment or recommendation was offered under this indicator.

IV. PERSONNEL

A. Qualifications of Technical Staff (Category II)

Assessment:

The Radioactive Materials staff all meet the requirements of this guideline indicator.

No comment or recommendation was offered under this indicator.

B. Staffing Level (Category II)

Assessment:

The Materials Program has 1.2 persons per 100 licenses, and has received approval to interview and hire one new trainee. We fully support this action. The RCP satisfies the requirements of this guideline indicator.

No comment or recommendation was offered under this indicator.

C. Staff Supervision (Category II)

Assessment:

Supervisory personnel are adequate to provide guidance and review of junior personnel. The Program satisfies the requirements of this guideline indicator.

No comment or recommendation was offered under this indicator.

D. Training (Category II)

Assessment:

All of the senior personnel have received the required training. The Program satisfies the requirements of this guideline indicator.

**Comment:**

The RCP has three relative new employees that need to be scheduled for the core courses, and Ralph McCoy needs the 5 week HP course. The new employees are Rodriguez Harrell, Lauren McGaughey, and Cynthia Townsend. These persons will be making application for the NRC sponsored courses and should be considered on a priority basis.

No recommendation was offered under this indicator.

**E. Staff Continuity (Category II)**

**Assessment:**

Some staff turnover has occurred; however, the turnover is not perceived as symptomatic of the RCP. The turnover occurred after the State experienced budget problems and before the RCP became fully funded through a fee assessment program. The requirements of this guideline indicator are being satisfied.

No comment or recommendation was offered under this indicator.

**V. LICENSING**

**A. Technical Quality of Licensing Actions (Category I)**

**Assessment:**

The RCP satisfies the requirements of this Guideline Indicator.

**Comment:**

Twenty-two license files were selected for casework review. This sample also included file reviews on several of the major licenses and the devices that have been approved since the previous review. The quality of the licensing actions was found to be excellent and only minor comments were developed on the casework. It was noted that license reviewers are also inspectors, and that the quality of work is enhanced by technical management review prior to the documents being issued to the licensee. The casework is listed under Appendix D. The Program does not have a licensing backlog.

No recommendation was offered under this indicator.

**B. Adequacy of Product Evaluations (Category I)**

**Assessment:**

Six device registrations were reviewed for this report period and no comments were developed. The RCP satisfies the requirements of this Guideline Indicator.

No comment or recommendation was offered under this indicator.

C. Licensing Procedures (Category II)

**Assessment:**

The Program essentially utilizes NRC policy guidance and procedures and appears to fully meet the requirements of this guideline indicator. Copies of standard licensing conditions, and license review checklists were provided to the Program on diskettes during the review.

No comment or recommendation was offered under this indicator.

VI. COMPLIANCE

A. Status of Inspection Program (Category I)

**Assessment:**

The Program does not have any inspections that are overdue for inspection. The Program satisfies the requirements of this guideline indicator.

No comment or recommendation was offered under this indicator.

B. Inspection Frequency (Category I)

**Assessment:**

The Program does not fully satisfy the requirements of this guideline indicator.

**Comment:**

All of the licenses are set up in the computer program to be inspected at or more frequent than similar NRC licenses. However, on July 2, 1993, the NRC issued an Interim Change to the inspection frequency for high and medium dose afterloaders, license codes 2230 and 2231. This information was not provided to the State prior to this review. The State has approximately 10 licenses that will be affected by this change in frequency.

**Recommendation:**

We recommend that the State review the list of afterloader brachytherapy licensees and develop a plan for their inspection at the revised inspection frequency schedule.



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

Assessment:

Inspector accompaniments and a review of the South Georgia (Brunswick) Office were conducted by the Program Manager during the previous calendar year. Based upon the review of casework and discussions with inspectors, the RCP satisfies the requirements of this guideline indicator.

Comment:

One Inspector accompaniment was performed during the review as follows:

Inspector:	Ralph McCoy
Licensee:	Delta Air Lines, Inc.
Location:	Atlanta, GA
License Number:	GA-2-1
License Type:	Industrial Radiography

The inspector was well prepared and conducted the inspection in accordance with State procedures.

No recommendation was offered under this indicator.

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

Assessments:

All of the incident files for the 1991 and 1992 years have been collected from the State previously for distribution to State Programs and the ABOD. The incidents (to date) for 1993 were received, reviewed, and are being distributed to the OSP and the ABOD. The RCP satisfies the requirements of this guideline indicator.

Comment:

The State's incident reporting system with emphasis on medical misadministrations was discussed with the Program Manager and the Program staff.

The RCP maintains logs of misadministrations, complaints, and events on the computer along with the summary forms that are used for file documentation. The administrative procedures for handling and reporting events were reviewed. The files indicate that fourteen events and ten misadministrations have occurred thus far during this calendar year. This increase in the number of misadministrations is not considered abnormal and probably is a result of increased licensee awareness of the reporting requirement.

The reporting requirements for misadministrations went into effect in May of 1991 along with the 1987 version of the SSRCR version of the misadministration rule. In addition, the State has mailed copies of a "Bulletin: Reporting of Misadministrations" (Bulletin Number 93-04) to all Medical licensees dated June 25, 1993. Also, the inspectors reportedly make inquiries of the Technologist, RSO's, and the Administrators during the inspections, and also review safety committee minutes, consultant reports, and other records as appropriate to determine if misadministrations have occurred. Records of misadministrations are recorded in the inspection report.

No recommendation was offered under this Guideline Indicator.

E. Enforcement Procedures (Category I)

**Assessment:**

The enforcement procedures and practices were reviewed, and the RCP satisfies the requirements of this Guideline Indicator.

No comment or recommendation was offered on this Indicator.

F. Inspection Procedures (Category II)

**Assessment:**

The RCP uses essentially the technical inspection guidance utilized by NRC. The RCP satisfies the requirements of this Guideline Indicator.

**Comment:**

Sixteen compliance files were reviewed as casework during this review and the results are summarized in Appendix E. The inspection procedures contained in MC 2800 and 87100 were provided to the State on diskette for update as appropriate.

No recommendations were offered under this Indicator.

G. Inspection Reports (Category II)

**Assessment:**

Only isolated, minor comments were developed from the review of the inspection reports, and these minor comments were discussed with the technical staff in a summary meeting. The RCP satisfies the requirements of this Guideline Indicator.

No comments or recommendations were developed under this Indicator.

H. Confirmatory Measurements (Category II)**Assessment:**

The RCP satisfies the requirements of this Guideline Indicator.

**Comment:**

The RCP has sufficient instrumentation including a portable MCA for confirmatory and independent measurements, and the survey instrumentation is being calibrated by the manufacturer and also by the Regional Calibration Facility operated by the South Carolina RCP.

No recommendations were offered under this Indicator.

## APPENDIX D

### REVIEW OF SELECTED LICENSE FILES

Twenty-two license files were selected for full review. The casework was reviewed in general for: (1) technical adequacy of application review; (2) significant errors and omissions; (3) utilization of licensing procedures; and (4) documentation.

The following licenses were reviewed and for purposes of this report, a numerical casework number was assigned to each license as follows:

#### Casework No. 01

Licensee: Mallinckrodt Medical, Inc.  
Location: Marietta, GA  
License No./Amendment: GA-877-1MD, Amendment 14  
Date Issued: 04-08-93  
Date Expires: 11-30-95  
License Type: Radiopharmacy

#### Case Work No.02

Licensee: Honeywell, Inc.  
Location: Atlanta, GA  
License No./Amendment: GA-832-1G, Amendment 24  
Date Issued: 07-23-93  
Date Expires: 12-31-93  
License Type: Distribution to GL's

#### Casework No.03

Licensee: Syncor International Corp.  
Location: Doraville, GA  
License No./Amendment: GA-467-1MD, Amendment 50  
Date Issued: 07-25-93  
Date Expires: 10-31-97  
License Type: Pharmacy

#### Casework No.04

Licensee: Seimpelkamp Corporation  
Location: Marietta, GA  
License No./Amendment: GA-1080-1, Amendment 04  
Date Issued: 06-28-93  
Date Expires: 06-30-98  
License Type: Distribution

#### Casework No.05

Licensee: Atlan-tec, Inc.  
Location: Roswell, GA  
License No./Amendment: GA-888-2  
Date Issued: 05-31-90  
Date Expires: 06-30-95  
License Type: Distribution and Services

Casework No. 06

Licensee: Atlan-tec, Inc.  
 Location: Roswell, GA  
 License No./Amendment: GA-888-1, Amendment 16  
 Date Issued: 11-14-90  
 Date Expires: 10-31-95  
 License Type: Calibration and testing

Casework No. 07

Licensee: Atlan-tec, Inc.  
 Location: Roswell, GA  
 License No.: GA-888-3  
 Date issued: 10-07-92  
 Date expires: 11-30-96  
 License Type: Irradiator R & D

Casework No. 08

Licensee: Johnson-Yokogawa Corporation  
 Location: Newman, GA  
 License No.: GA-1192-1, Amendment 2  
 Date Issued: 10-18-93  
 Date Expire: 09-30-95  
 License Type: Distribution to GLs

Casework No. 09

Licensee: Nortech Systems, Ltd.  
 Location: Marietta, GA  
 License No.: GA-858-1, Amendment 8  
 Date Issued: 08-03-92  
 Date Expires: Termination  
 License Type: Distribution and Service

Casework No. 10

Licensee: SmithKline Beecham Clinical Laboratories  
 Location: Tucker, GA  
 License No.: GA-123-1, Amendment 21  
 Date Issued: 12-14-92  
 Date Expires: 03-31-97  
 License Type: Laboratory

Casework No. 11

Licensee: Smithkline Beecham Clinical Laboratories  
 Location: Tucker, GA  
 License No.: GA-123-02, Amendment 03  
 Date Issued: 05-05-92  
 Date Expires: 03-31-97  
 License Type: Distribution to Specific Licensees

Casework No. 12

Licensee: Carr-Scarborough Microbiologicals  
Location: Decatur, GA  
License No.: GA-793-1, Amendment 8  
Date Issued: 09-14-92  
Date Expires: 08-31-97  
License Type: Manufacturing of In Vitro culture media

Casework No. 13

Licensee: DuPont Merck Pharmaceutical Co.  
Location: (Atlanta Facility)  
License No.: GA-738-1, Amendment 11  
Date Issued: 07-08-92  
Date Expires: 05-31-95  
License Type: Distribution to Specific licensees

Casework No. 14

Licensee: Scientific Products Division, Baxter Diag.  
Location: Stone Mountain, GA  
License No.: GA-872-1, Amendment 7  
Date Issued: 07-14-92  
Date Expires: 03-31-95  
License Type: Distribution to Specific Licensees

Casework No. 15

Licensee: Elekta Instruments, Inc.  
Location: Atlanta, GA  
License No.: GA-1153-1, Amendment 3  
Date Issued: 03-02-93  
Date Expires: 06-30-94  
License Type: Gamma Knife Service

Casework No. 16

Licensee: Newnan Hospital  
Location: Newnan, GA  
License No.: GA-135-2, Amendments 9,10,11, & 12  
Date Issued: 01-02-92  
Date Expires: 09-30-95  
License Type: Institutional Medical

Casework No. 17

Licensee: Cardiac Disease Specialist of Atlanta, PC  
Location: Atlanta, GA  
License No.: GA-1195-1, Amendment 3  
Date Issued: 07-10-92  
Date Expires: 03-31-96  
License Type: Cardiology (Custom Medical)

Casework No. 18

Licensee: Southern Regional Medical Center  
Location: Riverdale, GA  
License No.: GA-1039-1, Amendment 13  
Date Issued: 11-02-93  
Date Expires: 04-30-97  
License Type: Institutional Medical with Therapy

Casework No. 19

Licensee: South Georgia Medical Center  
Location: Valdosta, GA  
License No.: GA-112-1, Amendments 37,38,& 39  
Date Issued: 09-24-92  
Date Expires: 01-31-97  
License Type: Institutional Medical with Therapy

Casework No. 20

Licensee: South Georgia Medical Center  
Location: Valdosta, GA  
License No.: GA-112-2, Amendment 12  
Date Issued: 11-06-92  
Date Expires: 04-30-94  
License Type: Teletherapy

Casework No. 21

Licensee: Applied Technical Services, Inc.  
Location: Marietta, GA  
License No.: GA-896-1, Amendment 24  
Date Issued: 10-07-93  
Date Expires: 10-31-98  
License Type: Industrial Radiography, Temporary sites

Casework No. 22

Licensee: Atlanta Testing and Engineering, Inc.  
Location: Duluth, GA  
License No.: GA-488-1, Amendment 13  
Date Issued: 06-23-92  
Date Expires: 08-31-95  
License Type: Portable Gauges

## Summary Table

The following table lists the specific comments developed during the review of the numbered casework files above.

	<u>Specific Comments</u>	<u>Casework Number</u>
1.	This terminated license is still being carried on the major license listing as an active license.	9,
2.	Another facility diagram is needed for the renewal in its entirety application, or supporting information that the facility has not changed since the last renewal.	10, 13,



APPENDIX E

REVIEW OF SELECTED COMPLIANCE FILES

APPENDIX E

REVIEW OF SELECTED COMPLIANCE FILES

Summary and Conclusion

The State uses a computerized, field inspection form to document information obtained during the inspection. In general, the reports were reviewed to determine: (1) if the reports were sufficiently detailed to document that the license's program was sufficient to comply with the rules and regulations, and to protect public health and safety; and (2) if the inspections were complete and substantiated all items of noncompliance and recommendations. The files were reviewed to determine: (1) if appropriate enforcement actions were taken; (2) written in appropriate regulatory language; (3) timeliness of letters; (4) if adequate responses were received from the licensee to close out the enforcement actions.

Sixteen license compliance files were selected for review. For purposes of this report, a numerical casework code (1 through 16) was assigned to the following compliance files.

Case No. 01

Licensee:	Mallinckrodt Medical, Inc.
Location:	Marietta, GA
License No:	GA-877-1
License Type:	Pharmacy
Inspection Date:	03/26/93
Type of Inspection:	Routine
Inspectors:	Sharon M. Mott
Type of Report:	(Report missing from file)
Enforcement Letter/Date:	None
Licensee Response Date:	None
State Acknowledgement Date:	None

Case No. 02

Licensee:	Honeywell, Inc.
Location:	Atlanta, GA
License No:	GA-832-1G
License Type:	Distribution to GL's
Inspection Date:	02/02/93
Type of Inspection:	Routine
Inspectors:	Bill Slocumb
Type of Report:	Narrative
Enforcement Letter/Date:	NOV dated 02/16/93
Licensee Response Date:	03/9 and 13, and 04/22/93
State Acknowledgement Date:	07/23/93

Case No. 03

Licensee: Seimpelkamp Corporation  
 Location: Marietta, GA  
 License No: GA-1080-1  
 License Type: Distribution  
 Inspection Date: 01-22-92  
 Type of Inspection: Routine, announced  
 Inspectors: Elizabeth Drinnon  
 Type of Report: Narrative, standard format  
 Enforcement Letter/Date: NOV dated 01-31-92  
 Licensee Response Date: 01-26-93  
 State Acknowledgement Date: 11-14-91

Case No. 04

Licensee: Atlan-tec, Inc.  
 Location: Roswell, GA  
 License No: GA-888-3  
 License Type: Irradiator R & D  
 Inspection Date: 06-29-92  
 Type of Inspection: Initial, Announced  
 Inspectors: Cornelius Maryland and Ralph McCoy  
 Type of Report: Form, Narrative  
 Enforcement Letter/Date: Clear, dated 06-30-92  
 Licensee Response Date: NA  
 State Acknowledgement Date: NA

Case No. 05

Licensee: Atlan-tec, Inc.  
 Location: Roswell, GA  
 License No: GA-888-1  
 License Type: Calibration facility  
 Inspection Date: 03-29-93  
 Type of Inspection: Routine, Announced  
 Inspectors: Bill Slocumb  
 Type of Report: Form, Narrative  
 Enforcement Letter/Date: NOV dated 04-07-93  
 Licensee Response Date: 05-12-93  
 State Acknowledgement Date: 05-25-93

Case No. 06

Licensee: Carr-Scarborough Microbiologicals  
 Location: Decatur, GA  
 License No: GA-793-1  
 License Type: Manufacturer of In Vitro Kits  
 Inspection Date: 10-21-93  
 Type of Inspection: Announced, Routine  
 Inspectors: Neil Maryland, Ralph McCoy  
 Type of Report: Form, Narrative  
 Enforcement Letter/Date: Clear dated 11-01-93  
 Licensee Response Date: NA  
 State Acknowledgement Date: NA

Case No. 07

Licensee: DuPont Merck Pharmaceutical Company  
 Location: Atlanta, GA  
 License No: GA-738-1  
 License Type: Distribution to Specific licensee's  
 Inspection Date: 11-19-92  
 Type of Inspection: Routine, Announced  
 Inspectors: E. Drinnon  
 Type of Report: Form, narrative  
 Enforcement Letter/Date: Clear, dated 11-20-92  
 Licensee Response Date: NA  
 State Acknowledgement Date: NA

Case No. 08

Licensee: Newnan Hospital  
 Location: Newnan, GA  
 License No: GA-135-2  
 License Type: Institutional Medical  
 Inspection Date: 06-17-93  
 Type of Inspection: Routine, Announced  
 Inspectors: Ralph McCoy, Jr.  
 Type of Report: Form, Narrative  
 Enforcement Letter/Date: Clear, dated 07-07-93  
 Licensee Response Date: NA  
 State Acknowledgement Date: NA

Case No. 09

Licensee: Cardiac Disease Specialist of  
 Location: Atlanta, GA  
 License No: GA-1195-1  
 License Type: Cardiology  
 Inspection Date: 10-22-93  
 Type of Inspection: Initial, Announced  
 Inspectors: Cornelius Maryland, Ralph McCoy, Jr.  
 Type of Report: Form, Narrative  
 Enforcement Letter/Date: NOV dated 11-02-93  
 Licensee Response Date: Pending  
 State Acknowledgement Date: Pending

Case No. 10

Licensee: South Georgia Medical Center  
 Location: Valdosta, GA  
 License No: GA-112-1  
 License Type: Institutional Medical  
 Inspection Date: 12-02-92  
 Type of Inspection: Routine, Announced  
 Inspectors: Jerry W. Morris  
 Type of Report: Form  
 Enforcement Letter/Date: NOV dated 12-03-92  
 Licensee Response Date: 12-10-92  
 State Acknowledgement Date: 12-15-92

Case No. 11

Licensee: South Georgia Medical Center  
 Location: Valdosta, GA  
 License No: GA-112-2  
 License Type: Teletherapy  
 Inspection Date: 10-15-92  
 Type of Inspection: Routine, Announced  
 Inspectors: Jerry W. Morris  
 Type of Report: Form  
 Enforcement Letter/Date: NOV dated 10-21-92  
 Licensee Response Date: 11-03-92  
 State Acknowledgement Date: 11-09-92

Case No. 12

Licensee: Delta Air Lines, Inc.  
 Location: Atlanta, GA  
 License No: GA-2-1  
 License Type: Fixed Industrial Radiography  
 Inspection Date: 10-07-93  
 Type of Inspection: Routine, Announced  
 Inspectors: Ralph McCoy, Jr.  
 Type of Report: Form, Narrative  
 Enforcement Letter/Date: Clear, dated 10-21-93  
 Licensee Response Date: NA  
 State Acknowledgement Date: NA

Case No. 13

Licensee: Applied Technical Services, Inc.  
 Location: Marietta, GA  
 License No: GA-896-1  
 License Type: Industrial Radiography, Temporary locations  
 Inspection Date: 08-18-93  
 Type of Inspection: Routine, Announced, Field site  
 Inspectors: Cornelius Maryland and Ralph McCoy  
 Type of Report: Form, computer  
 Enforcement Letter/Date: NOV dated 08-24-93  
 Licensee Response Date: Pending  
 State Acknowledgement Date: Pending

Case No. 14

Licensee: Atlanta Testing and Engineering Co.  
 Location: Duluth, GA  
 License No: GA-488-1  
 License Type: Portable Gauge  
 Inspection Date: 06-19-92  
 Type of Inspection: Routine, Announced  
 Inspectors: Cornelius Maryland  
 Type of Report: Form, computer  
 Enforcement Letter/Date: NOV dated 06-22-92  
 Licensee Response Date: 06-30-92  
 State Acknowledgement Date: 07-13-92

Case No. 15

Licensee: Fannin Regional Hospital  
 Location: Blue Ridge, GA  
 License No: GA-708-1  
 License Type: Institutional Medical  
 Inspection Date: 08-17-93  
 Type of Inspection: Routine, Announced  
 Inspectors: Ralph McCoy, Jr.  
 Type of Report: Form, computer  
 Enforcement Letter/Date: NOV dated 08-31-93  
 Licensee Response Date: Pending  
 State Acknowledgement Date: Pending

Case No. 16

Licensee: Space Science Services, Inc.  
 Location: Jacksonville, FL  
 License No: GA-1194-1  
 License Type: Industrial Radiography  
 Inspection Date: 10-15-93  
 Type of Inspection: Routine, Announced  
 Inspectors: Jerry Morris  
 Type of Report: Form  
 Enforcement Letter/Date: Clear dated 10-20-93  
 Licensee Response Date: NA  
 State Acknowledgement Date: NA

Summary Table

The following table lists the specific comments developed during the review of the numbered inspection casework files above.

Specific CommentsCase No.

- |    |  |      |
|----|--|------|
| a. | The inspection report and enforcement letter was not filed in the report, but the inspection fee was invoiced and paid by the licensee. Additional Q.A. is needed by supervision to assure that the report, enforcement letter, etc., are completed prior to approval of the actions and the assessment of fees. | 1,   |
| b. | Licensee's response was 11 months late and referenced in an acknowledgement letter, but the ack. letter had the wrong date, and was unsigned.  | 3,   |
| c. | More information is needed in the report to describe the licensed facility and to determine if facility was as licensed.   | 4,5, |
| d. | The physical form of the isotope should be noted in the report section "E. Sources."   | 6,   |

- e. Additional information is needed to document where the Bkg. rate was taken, and the probe utilized on the survey meter, sensitivity, etc.. Smears are also recommended and compared with licensee's analysis. 6,
- f. Additional information is needed in the report to determine why additional license conditions are needed. (This is good feedback for the license reviewer.) 6,
- g. Good details on the Summary of the Licensed Program and period of time over which records were reviewed, etc. 7,
- h. Additional information is needed to describe the probe sensitivity of the licensee's survey meters, adequacy, and the units of personnel exposures. 7,
- i. Additional information is needed to describe the efforts taken to determine if any incidents or misadministrations have occurred. 8,
- j. The report indicates that the licensee had an NRC approved QA Program, but the Approval number was not identified. 13,
- k. The report should identify the instrumentation used by the inspector for independent measurements. 13,
- l. Field IR inspections should be conducted on an unannounced basis if possible. 13,
- m. Radiographic cameras with source to exterior distance less than 4 inches should not exceed 50 mR/hr at six inches from the exterior surface. This survey and result should be noted in the report. 12,16,