U.S. NUCLEAR REGULATORY COMMISSION REGION I

Enforcement Conference Report No. 030-00582/89-002

Docket No. 030-00582

License No. 06-00183-03 Priority II Category F1A Program Code 01100

Licensee: Yale University Room 115, Hall of Graduate Studies 320 York Street New Haven, Connecticut 06520

Facility Name: Yale University

Enforcement Conference At: Region I, King of Prussia, Pennsylvania

Enforcement Conference Conducted: July 13, 1989

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Enforcement Conference Summary: Enforcement Conference conducted in King of Prussia, Pennsylvania on July 13, 1989

The licensee's representatives discussed the corrective actions taken and/or planned as a result of the May 30 - June 2, 1989 inspection. The NRC representatives discussed their concern regarding the lack of effective management control of the radiation safety program and outlined NRC's enforcement options.

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DETAILS

1. Persons Attending

Yale University

Edward A. Adelberg, Deputy Provost George Holeman, Director, Radiation Safety Department and Radiation Safety Officer

Nuclear Regulatory Commission

Thomas T. Martin, Deputy Regional Administrator Malcolm R. Knapp, Director, Division of Radiation Safety and Safeguards Daniel J. Holody, Regional Enforcement Coordinator Lee H. Bettenhausen, Chief, Nuclear Materials Safety Branch John D. Kinneman, Chief, Nuclear Materials Safety Section B Laurence F. Friedman, Senior Health Physicist John T. Jensen, Health Physicist

2. Conference Summary

- a. Dr. Knapp met the representatives from Yale University (Yale), introduced the NRC staff, and described the purpose of the enforcement conference. Dr. Knapp expressed the NRC's concern that this was the third enforcement conference with Yale within the last five years. Dr. Knapp stated that in addition to the concern over the extremity exposure received by an individual at Yale, the NRC is also concerned that the number of violations identified during the May 30 - June 2, 1989 inspection indicates that Yale has not maintained adequate control over its radiation safety program.
- b. Dr. Adelberg stated that Yale's administration was dismayed by the inspection findings and that they agree with the major conclusions in the inspection report. Dr. Adelberg outlined additional measures to be taken by Yale's radiation safety staff which he believes will improve their control over their broadscope program. These measures include: an aggressive review of renewals of authorizations to use radioactive materials so that deficiencies in the previous licensing process may be remedied; a revision of the laboratory survey program (including additional staff and training) so that laboratories are surveyed more effectively and at the appropriate frequency; improved communication with the research staff so that Yale's policies on eating in laboratories, maintenance of proper survey instrumentation, etc. are clearly understood; improved control over the receipt of radioactive materials, about which the licensee has identified weaknesses. In addition, Mr. Holeman stated that new forms for application to use radioactive material had been developed, which will allow more information about research procedures and protocols to be included in the application process.

Dr. Adelberg stated that a review of all of Yale's safety programs two years ago resulted in the recent reorganization of the administration of the Radiation Safety Department. He said that the current organization will allow the Radiation Safety Department easier access to the Provost's office. Dr. Adelberg also indicated that the additional staff and training that Yale has committed to the Radiation Safety Department and more stringent sanctions which Yale plans to impose against researchers who violate University regulations will ensure a more effective radiation safety program.

- c. Dr. Friedman briefly summarized the exposure event and the apparent violations identified in the inspection report. There was a general discussion of the violations and the licensee's corrective actions.
- d. The licensee representatives agreed with all but two of the violations described in the inspection report. Mr. Holeman stated he believes that the violation identified in Section 4. of the inspection report. concerning the availability of an appropriate instrument in a laboratory. was not correct. He stated that while the researcher had not used an appropriate instrument to survey for iodine-125 contamination, an appropriate instrument was available in a near-by laboratory. In addition, instrumentation readily available in the laboratory could have been used to test for the presence of radioactive material in the eluates. Mr. Holeman also stated that he believes the violation identified in Section 4. of the inspection report concerning the failure to monitor an individual's thyroid at the appropriate time was not correct. He said that the Radiation Safety staff had monitored the concentration of iodine-125 in the air in the breathing zone of the individual while he performed iodinations, and that, since this did not exceed 10% of the applicable limit, thyroid bioassay was not required in accordance with the requirements of Yale's license. He further stated that the memorandum which is sent to each authorized user states that each person performing an iodination be examined just before and one or two days after iodinating as a recommendation. not a requirement.

Mr. Kinneman said that the NRC staff would review the apparent violations in light of Mr. Holeman's comments and decide whether the violations would be withdrawn, modified or upheld. A decision on each violation will be included in the proposed enforcement action to be provided to the licensee at another time.

- e. Mr. Kinneman stated that it was the licensee's responsibility to move rapidly to assure sufficient resources for the radiation safety program when the Radiation Safety Officer identified deficiencies in the program.
- Mr. Holody described the NRC's enforcement policy and discussed its enforcement options.

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g. On July 17, 1989 Mr. Holeman discussed with Mr. Kinneman by telephone the fact that Yale does not agree that the apparent violation in Section 7 of the report for failure to maintain records of laboratory surveys is correct. He stated that while records of the quarterly surveys by the radiation safety staff are required, the surveys performed by the laboratory staff are not required to be recorded.

Mr. Kinneman stated Yale's position on this apparent violation would be reviewed before an enforcement action is proposed.