NRC FORM 591M PA	RT 1		U.S. NUC	CLEAR REGULATORY	COMMISSION					
(07-2012) 10 CFR 2.201 SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION										
1. LICENSEE/LOCATIO	N INSPECTED:		2. NRC/REGIONAL OFFICE							
Wayne State University Health Physics Department 5425 Woodward Avenue, 3rd Floor Detroit, MI 48202			Region III U. S. Nuclear Regulatory Commission 2443 Warrenville Road, Suite 210 Lisle, IL 60532-4352							
REPORT NUMBER(S) 2021001			Lisic, IL 00352-4552							
3. DOCKET NUMBER(S) 4		4. LICENSE NUMBER	IBER(S) 5. DATE(S) O		ON					
030-01995		21-00741-08		March 19, 2021						
LICENSEE: The inspection was an examination of the activities conducted under your license as they relate to radiation safety and to compliance with the Nuclear Regulatory Commission (NRC) rules and regulations and the conditions of your license. The inspection consisted of selective examinations of procedures and representative records, interviews with personnel, and observations by the inspector. The inspection findings are as follows: ✓ 1. Based on the inspection findings, no violations were identified. 2. Previous violation(s) closed. 3. The violations(s), specifically described to you by the inspector as non-cited violations, are not being cited because they were self-identified, non-repetitive, and corrective action was or is being taken, and the remaining criteria in the NRC Enforcement Policy, to exercise discretion, were satisfied. ✓ Non-cited violation(s) were discussed involving the following requirement(s): ✓ Non-cited violation(s) were activities, as described below and/or attached, were in violation of NRC requirements and are being cited in accordance with NRC Enforcement Policy. This form is a NOTICE OF VIOLATION, which may be subject to posting in accordance with 10 CFR 19.11.										
(Violations and Corrective Actions) Statement of Corrective Actions I hereby state that, within 30 days, the actions described by me to the Inspector will be taken to correct the violations identified. This statement of corrective actions is made in accordance with the requirements of 10 CFR 2.201 (corrective steps already taken, corrective steps which will be taken, date when full compliance will be achieved). I understand that no further written response to NRC will be required, unless specifically requested.										
TITLE	PRINTED NAME		SIGNATURE	,	DATE					
LICENSEE'S REPRESENTATIVE										
NRC INSPECTOR	Zahid Sulaiman, Health Physicis	t Za	hid M. Sulaiman Digitally Date: 20	signed by Zahid M. Sulaiman 21.03.26 14:59:45 -05'00'						
BRANCH CHIEF	Michael Kunowski, Chief, MIB	M	ichael A. Kunowski Digitally s Date: 202	igned by Michael A. Kunowski 21.03.29 05:39:12 -05'00'						

NRC FORM 592M (10-2020)					U.S. NU	ICLEAR REGULATORY COMMISSION				
Materials Inspection Record										
1. Licensee Name:	2. Docket Number(s):		3. License Number(s)							
Wayne State University	030-01995			21-00741-08						
4. Report Number(s):			5. Date(s) of Inspection:							
2021001			March 19, 2021							
6. Inspector(s):			7. Progra	ram Code(s): 8. Priority:		9. Inspection Guidance Used:				
Zahid Sulaiman, Health Physicist			01100	3		87126				
10. Licensee Contact Name(s): 11. Licensee E-mail Add			12. Licensee Telephone Number(s):			Felephone Number(s):				
Maha Srinivasan, RSO msriniva@wayne.ed			J		313-577-0019					
13. Inspection Type: Initial 14.	Locations Inspected: 15.			5. Next Inspection Date (MM/DD/YYYY):						
✓ Routine ✓ Announced ✓	Main Office	Field	d Office	03/19	/2024	✓ Normal Extended				
Non-Routine Unannounced	Temporary Job S	Site 🖌 Rem	note			Reduced No change				

16. Scope and Observations:

This was an announced remote routine inspection of a large academic institution located in Detroit, Michigan. The university operated a Type A academic broadscope license, and was authorized to possess and use radioactive materials in millicurie quantities, primarily for research and development, and teaching purposes. The radiation safety department was staffed with a radiation safety officer (RSO), an assistant RSO, a health physics specialist, and two radioactive waste technicians. The licensee established a radiation safety committee (RSC) which reviewed and approved principle investigators (PIs), users, uses and facilities for the institution, and reviews an annual radiation safety program audit. The licensee had approximately 40 PIs, were approved by the (RSC) who conducted research in 66 labs on the campus. The licensee had approximately 250 individuals approved as radiation workers, who worked under the supervision of the PIs. The majority of the licensee's research involved H-3, C-14, F-18, P-32, C-11, Cu-64, Zr-88, and Lu-177. The RSC meets quarterly. The radiation safety office conducted audits of the research labs every six months.

PERFORMANCE OBSERVATIONS

This inspection was conducted virtually through the Microsoft Team meeting and iPhone facetime, consisted of interview with select licensee personnel, a tour of selected research labs, waste storage facility, a review of select records, and an observation of security of the materials. Through Team meeting and facetime, the inspector observed the staff conduct a physical inventory of sealed sources, and all sources were accounted for. The inspector had the staff demonstrate and explained ordering and receipt of licensed materials, the inventory tracking system, package receipt procedures, laboratory use of licensed materials, labs inventory procedures, proper handling of radioactive waste and disposal procedures, contamination surveys, and spill response, with no issue noted. Through these demonstrations and other discussion, the inspector found that the licensee personnel was knowledgeable of radiation protection principles, licensee procedures, and regulatory requirements.

The inspector reviewed the following records: radiation safety committee minutes, semi-annual program audits, package receipts, waste disposal records, radiation safety and DOT Hazmat training, instrument calibration, sealed source leak tests and inventory, area surveys, and wipe tests. The inspector also reviewed the dosimetry records for 2019 through December 31, 2020, indicating the maximum annual dose to be 75 mrem - DDE, and 1,143 mrem - SDE.

No violations of NRC requirements were identified as a result of this inspection.