



UNITED STATES  
NUCLEAR REGULATORY COMMISSION  
WASHINGTON, D.C. 20555-0001

May 18, 2026

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SUBJECT: TEXAS DRAFT IMPEP REPORT

Dear Dr. Stevenson and Ms. Seaton:

The U.S. Nuclear Regulatory Commission (NRC) uses the Integrated Materials Performance Evaluation Program (IMPEP) to review radiation control programs. The enclosed draft report documents the results of the Texas Agreement State Program (Texas) review conducted on March 23–27, 2026. The team’s preliminary findings were discussed with Texas on the last day of the review. The team’s proposed recommendations are that Texas be found adequate to protect public health and safety and compatible with the NRC’s program.

The NRC conducts periodic reviews of radiation control programs to ensure that public health and safety are adequately protected from the potential hazards associated with the use of radioactive materials and that Agreement State programs are compatible with the NRC’s program. The IMPEP reviews are conducted by a team of Agreement State and the NRC staff. All reviews use common criteria in the assessment and place primary emphasis on performance. The final determination of adequacy and compatibility of each program, based on the team’s report, is made by the Management Review Board (MRB) Chair after receiving input from the MRB members, the IMPEP team, and the radiation control program being reviewed. The MRB is composed of the NRC senior managers and an Organization of Agreement States program manager. Consistent with recent program efficiencies, when the team finds all performance indicators satisfactory, the MRB will complete the review without convening a formal MRB meeting.

The NRC is providing you with a copy of the draft report for your review and comment prior to submitting the report to the MRB. Comments are requested within 28 days. This schedule will permit the issuance of the final report in a timely manner. If there are no comments on the draft IMPEP report, the IMPEP team will issue the draft report to the MRB. If there are comments on

the report, the team will review the comments, make revisions as appropriate, and issue a proposed final report to the MRB. The MRB will review the draft or proposed final IMPEP report, and the IMPEP team will address any resulting comments. The MRB Chair's final determination will be issued in the final IMPEP report.

If you have any questions regarding the enclosed report, please contact Robert K. Johnson, IMPEP Project Manager, at (301) 415-7314 or Sherrie Flaherty, at (301) 415-7288.

Thank you for your cooperation.

Sincerely,



Signed by Giantelli, Adelaide  
on 05/18/26

Adelaide S. Giantelli, Chief  
State Agreement and Liaison Programs Branch  
Division of Materials Safety, Security, State,  
and Tribal Programs  
Office of Nuclear Material Safety and Safeguards

Enclosure:  
Texas Draft IMPEP Report

cc: Joann Harthcock, Radiation Section  
Director, Consumer Protection Division  
Texas Department of State Health  
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Chance Goodin, Deputy Director  
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SUBJECT: TEXAS DRAFT IMPEP REPORT DATED: MAY 18, 2026

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**ADAMS Accession Nos.: PKG: ML26126A126, e-Concurrence 20260507-20026**



INTEGRATED MATERIALS PERFORMANCE EVALUATION PROGRAM

REVIEW OF THE TEXAS AGREEMENT STATE PROGRAM

MARCH 23 – 27, 2026

**DRAFT REPORT**

## **EXECUTIVE SUMMARY**

The results of the Integrated Materials Performance Evaluation Program (IMPEP) review of the Texas Agreement State Program (Texas) are discussed in this report. The review was conducted by the IMPEP team on March 23–27, 2026. Inspector accompaniments were conducted during the weeks of February 9–13, February 23-27, and March 2–6, 2026.

The team found Texas' performance to be satisfactory for all indicators reviewed: Technical Staffing and Training; Status of Materials Inspection Program; Technical Quality of Inspections; Technical Quality of Licensing Actions; Technical Quality of Incident and Allegation Activities; Legislation, Regulations, and Other Program Elements; Sealed Source and Device Evaluation Program; Low-Level Radioactive Waste Disposal Program; and Uranium Recovery Program.

There were no recommendations from the 2022 IMPEP review for the team to consider, and the team made no new recommendations.

Accordingly, the team recommends that the Texas radiation control program be found adequate to protect public health and safety and compatible with the NRC's program. Because Texas has had at least two consecutive IMPEP reviews with all performance indicators found satisfactory, the team recommends that a periodic meeting take place in approximately 3 years with the next IMPEP review taking place in approximately 6 years.

## 1.0 INTRODUCTION

The Texas Agreement State Program (Texas) Integrated Materials Performance Evaluation Program (IMPEP) review was conducted on March 23–27, 2026, by a team of technical staff members from the U.S. Nuclear Regulatory Commission (NRC), the Commonwealth of Kentucky, the State of Kansas, and the State of Louisiana. Team members are identified in Appendix A. Inspector accompaniments were conducted between February 9 – March 6, 2026, and are identified in Appendix B. The review was conducted in accordance with the “Agreement State Program Policy Statement,” published in the *Federal Register* on October 18, 2017 (82 FR 48535), and NRC’s [Management Directive \(MD\) 5.6](#), “Integrated Materials Performance Evaluation Program (IMPEP),” dated July 24, 2019. Preliminary results of the review, which covered the period of March 5, 2022 – March 27, 2026, were discussed with Texas managers on the last day of the review.

In preparation for the review, a questionnaire addressing the common performance indicators and applicable non-common performance indicators was sent to Texas on January 8, 2026. Texas provided its response to the questionnaire on March 10, 2026. A copies of the Texas’ DSHS and the TCEQ questionnaire responses are available electronically in the NRC’s Agencywide Documents Access and Management System Accession Nos. [ML26132A409](#) and [ML26086A404](#).

The Texas Agreement State Program is administered by the Radiation Section of the Consumer Protection Division which is located within Texas’ Department of State Health Services (DSHS) and the Radioactive Materials Division (RMD) within the Office of Waste which is located within the Texas Commission on Environmental Quality (TCEQ). Organization charts for Texas’ DSHS and the TCEQ are available, respectively, in [ML26132A410](#) and [ML26086A398](#).

At the time of the review, Texas DSHS and the TCEQ regulated, respectively, 1,323 and 13 specific licenses authorizing possession and use of radioactive materials. The review focused on the radiation control program as it is carried out under Section 274b. (of the Atomic Energy Act of 1954, as amended) Agreement between the NRC and the State of Texas.

The team evaluated the information gathered against the established criteria for each common and applicable performance indicators and made a preliminary assessment of Texas’ performance.

## 2.0 PREVIOUS IMPEP REVIEW AND STATUS OF RECOMMENDATIONS

The previous IMPEP review concluded on March 4, 2022. The final report is available from ADAMS at Accession No. [ML22172A192](#). The results of the review are as follows:

Technical Staffing and Training: Satisfactory  
Recommendations: None

Status of Materials Inspection Program: Satisfactory  
Recommendations: None

Technical Quality of Inspections: Satisfactory  
Recommendations: None

Technical Quality of Licensing Actions: Satisfactory  
Recommendations: None

Technical Quality of Incident and Allegation Activities: Satisfactory  
Recommendations: None

Legislation, Regulations, and Other Program Elements: Satisfactory  
Recommendations: None

Sealed Source and Device (SS&D) Evaluation Program: Satisfactory  
Recommendations: None

Low-Level Radioactive Waste (LLRW) Disposal Program: Satisfactory  
Recommendations: None

Uranium Recovery (UR) Program: Satisfactory  
Recommendations: None

Overall finding: Based on the results of the 2022 IMPEP review, the Management Review Board (MRB) Chair found Texas adequate to protect public health and safety and compatible with the NRC's program. The MRB Chair also directed that a periodic meeting be held in approximately 2 years and that an IMPEP review take place approximately 4 years.

### 3.0 COMMON PERFORMANCE INDICATORS

Five common performance indicators are used to review the NRC and Agreement State radiation control programs. These indicators are: (1) Technical Staffing and Training, (2) Status of Materials Inspection Program, (3) Technical Quality of Inspections, (4) Technical Quality of Licensing Actions, and (5) Technical Quality of Incident and Allegation Activities.

#### 3.1 Technical Staffing and Training

The ability to conduct effective licensing and inspection programs is largely dependent on having experienced, knowledgeable, well-trained technical personnel. Under certain conditions, staff turnover could have an adverse effect on the implementation of these programs and could affect public health and safety. Apparent trends in staffing must be assessed. Review of staffing also requires consideration and evaluation of the levels of training and qualification. The evaluation standard measures the overall quality of training available to, and taken by, materials program personnel.

##### a. Scope

The team used the guidance in State Agreements procedure (SA) [SA-103](#), "Reviewing the Common Performance Indicator: Technical Staffing and Training," and evaluated Texas' performance with respect to the following performance indicator objectives:

- A well-conceived and balanced staffing strategy has been implemented throughout the review period.
- Any vacancies, especially senior-level positions, are filled in a timely manner.
- There is a balance in staffing of the licensing and inspection programs.
- Management is committed to training and staff qualification.
- Agreement State training and qualification program is equivalent to the NRC's Inspection Manual Chapter [IMC 1248](#), "Formal Qualifications Program for Federal and State Material and Environmental Management Programs."
- Qualification criteria for new technical staff are established and are followed, or qualification criteria will be established if new staff members are hired.

- Individuals performing materials licensing and inspection activities are adequately qualified and trained to perform their duties.
- License reviewers and inspectors are trained and qualified in a reasonable period.

b. Discussion

The team reviewed the staffing for the Texas DSHS Radiation Section which is organized into four branches. At the time of the review:

- The Radioactive Materials Branch had 9 staff members and 1 manager totaling 10 FTE.
- The Environmental Monitoring Branch had 6 staff members and 1 manager, totaling 4.7 FTE.
- The Radioactive Materials Licensing Branch had 11 staff members and 1 manager, totaling 12 FTE.
- The Radiation Operations Branch had 2 staff members and 1 manager, totaling 1.9 FTE.

The Texas DSHS Radiation Section has 34.7 FTE technical staff supporting the Agreement State program when fully staffed. At the time of the review, there were six vacancies; four of these positions had individuals starting with Texas within 10 weeks following the on-site review, one position was undergoing interviews, and one had been posted. During the review period 23 staff members left the program and 19 were hired. One of the vacancies was the Program Director position. Texas had an overlap period with the new and former Program Directors so that position was not unfilled. The maximum time necessary to fill any one position over the review period was 13 months.

The team noted that Texas did not include the required Advanced Health Physics (H-201) course or an equivalent as part of their license reviewer and inspector qualification programs. While the team was on-site, Texas updated their procedures and qualification journals to include the Advanced Health Physics course to ensure that Texas had a training and qualification program compatible with NRC's NRC Inspection Manual Chapter (IMC) [IMC 1248](#), "Formal Qualifications Program for Federal and State Material and Environmental Management Programs." Inspectors and license reviewers typically complete qualifications within 2 years. Staff obtain refresher training across a broad range of health physics topics as well as specific licensing and inspection modalities. Texas ensured that all qualified staff received a minimum of 24 hours of refresher training every 24 months.

c. Evaluation

The team determined that, during the review period, Texas met the performance indicator objectives listed in Section 3.1.a. Based on the criteria in [MD 5.6](#), the team recommends that Texas' performance with respect to the indicator, Technical Staffing and Training, be found satisfactory.

d. MRB Discussion and Chair's Determination

The final report will present the MRB Chair's determination regarding this indicator.

### 3.2 Status of Materials Inspection Program

Inspections of licensed operations are essential to ensure that activities are being conducted in compliance with regulatory requirements and consistent with good safety and security practices. The frequency of inspections is specified in [IMC 2800](#), "Materials Inspection Program," and is dependent on the amount and type of radioactive material, the type of operation licensed, and

the results of previous inspections. There must be a capability for maintaining and retrieving statistical data on the status of the inspection program.

a. Scope

The team used the guidance in [SA-101](#), "Reviewing the Common Performance Indicator: Status of the Materials Inspection Program," and evaluated Texas' performance with respect to the following performance indicator objectives:

- Initial inspections and inspections of Priority 1, 2, and 3 licensees are performed at the frequencies prescribed in [IMC 2800](#), "Materials Inspection Program," other applicable guidance, as found at the NRC's [Materials Licensees Toolkits Index](#) website, or compatible Agreement State Procedure.
- Deviations from inspection schedules are normally coordinated between technical staff and management.
- There is a plan to perform any overdue inspections and reschedule any missed or deferred inspections, or a basis has been established for not performing any overdue inspections or rescheduling any missed or deferred inspections.
- Candidate licensees working under reciprocity are inspected in accordance with the criteria prescribed in IMC 2800 and other applicable guidance or compatible Agreement State Procedure.
- Inspection findings are communicated to licensees in a timely manner (30 calendar days, or 45 days for a team inspection), as specified in [IMC 0610](#), "Nuclear Material Safety and Safeguards Inspection Reports."

b. Discussion

During the review period, Texas performed 907 Priority 1, 2, and 3; and 202 initial inspections during the review period. Texas conducted ten percent of Priority 1, 2, 3, and initial inspections overdue. Specifically, 66 of 907 Priority 1, 2, 3, and 19 of 202 initial inspections were conducted overdue. This is below the MD 5.6 satisfactory rating evaluation criterion of less than 10 percent. At the time of the review, there were 38 overdue inspections. The team determined that none of the overdue inspections impacted health and safety.

Texas inspection frequencies were the same or more frequent for similar license types in NRC's program.

A sample of 41 inspection reports indicated that none of the inspection findings were communicated to the licensees beyond 30 days after the inspection exit or 45 days after the team inspection exit.

Texas policy for reciprocity inspections is to conduct 20 percent of all reciprocity candidates each year. All priority 1 and 2 type reciprocity entries, lower priority inspections with high activity sources, and any reciprocity entry with recent noncompliance issues are considered by management to be candidates. The program surpassed its goal of 20 percent candidate inspections completed in all years in the review period, except 2023 when 15 percent were inspected. The team found that the program missed its 2023 goal due to a number of inspectors who were not yet qualified to conduct reciprocity inspections.

c. Evaluation

The team determined that, during the review period, Texas met the performance indicator objectives listed in Section 3.2.a. Based on the criteria in [MD 5.6](#), the team recommends that Texas' performance with respect to the indicator, Status of Materials Inspection Program, be found satisfactory.

d. MRB Discussion and Chair's Determination

The final report will present the MRB Chair's determination regarding this indicator.

### 3.3 Technical Quality of Inspections

Inspections, both routine and reactive, provide reasonable assurance that licensee activities are carried out in a safe and secure manner. Accompaniments of inspectors performing inspections and the critical evaluation of inspection records are used to assess the technical quality of an inspection program.

a. Scope

The team used the guidance in [SA-102](#), "Reviewing the Common Performance Indicator: Technical Quality of Inspections," and evaluated Texas' performance with respect to the following performance indicator objectives:

- Inspections of licensed activities focus on health, safety, and security.
- Inspection findings are well-founded and properly documented in reports.
- Management promptly reviews inspection results.
- Procedures are in place and are used to help identify root causes and poor licensee performance.
- Inspections address previously identified open items and violations.
- Inspection findings lead to appropriate and prompt regulatory action.
- Supervisors, or senior staff as appropriate, conduct annual accompaniments of each inspector to assess performance and assure consistent application of inspection policies.
- For Programs with separate licensing and inspection staffs, procedures are established and followed to provide feedback information to license reviewers.
- Inspection guides are compatible with NRC guidance.
- An adequate supply of calibrated survey instruments is available to support the inspection program.

b. Discussion

The team evaluated 41 inspection reports and enforcement documentation, and interviewed inspectors involved in materials inspections conducted during the review period. The team reviewed casework for inspections conducted by 17 of Texas' inspectors and covered medical, industrial, commercial, academic, research, and service licenses. The inspection casework is identified in Appendix C. The team found inspection findings well-founded and appropriately documented with citations to regulations and license conditions.

Two team members accompanied seven inspectors from February 23–27, 2026. The inspector accompaniments are identified in Appendix B. The team determined that the inspectors' performances observed during the inspector accompaniments indicated that the

inspectors were knowledgeable of the requirements for each license type and were able to identify potential health, safety, and security concerns.

The inspectors were observed to be trained, knowledgeable of the regulations, license requirements, used appropriate inspection checklists, and calibrated instrumentation adequate for the licensed material. Inspectors conducted interviews and observed licensed activities with appropriate personnel, conducted independent measurements and utilized good health physics practices. The inspections were adequate to assess radiological health and safety and security at the licensed facilities. All inspection documentation subject to [Title 10 of the Code of Federal Regulations \(10 CFR\) Part 37](#) equivalent requirements were properly marked and secured.

The program conducted annual supervisory accompaniments for every qualified inspector in every year with the exception of one inspector, one year. A single inspector had no accompaniments in 2024. The team determined that this did not have an impact on health and safety due to the fact that inspector had supervisor accompaniment the year prior and after.

The team noted that Texas maintained sufficient instrumentation for inspectors to conduct independent and/or confirmatory measurements that were calibrated at appropriate intervals and were appropriate for the types of licensed activities inspected.

#### c. Evaluation

The team determined that, during the review period, Texas met the performance indicator objectives listed in Section 3.3.a. Based on the criteria in [MD 5.6](#), the team recommends that Texas' performance with respect to the indicator, Technical Quality of Inspections be found satisfactory.

#### d. MRB Discussion and Chair's Determination

The final report will present the MRB Chair's determination regarding this indicator.

### 3.4 Technical Quality of Licensing Actions

The quality, thoroughness, and timeliness of licensing actions can have a direct bearing on public health and safety, as well as security. An assessment of licensing procedures, implementation of those procedures, and documentation of communications and associated actions between the Texas licensing staff and regulated community is a significant indicator of the overall quality of the licensing program.

#### a. Scope

The team used the guidance in [SA-104](#), "Reviewing the Common Performance Indicator: Technical Quality of Licensing Actions," and evaluated Texas' performance with respect to the following performance indicator objectives:

- Licensing action reviews are thorough, complete, consistent, and of acceptable technical quality with health, safety, and security issues properly addressed.
- Essential elements of license applications have been submitted, and elements are consistent with current regulatory guidance (e.g., pre-licensing guidance, [10 CFR Part 37](#), financial assurance, etc.).

- License reviewers, if applicable, have the proper signature authority for the cases they review independently.
- License conditions are stated clearly and can be inspected.
- Deficiency letters clearly state regulatory positions and are used at the proper time.
- Reviews of renewal applications demonstrate a thorough analysis of a licensee's inspection and enforcement history.
- Applicable guidance documents are available to reviewers and are followed (e.g., NUREG-1556 Series, pre-licensing guidance, regulatory guides, etc.).
- Licensing practices for risk-significant radioactive materials (RSRM) are appropriately implemented including the physical protection of Category 1 and Category 2 quantities of radioactive material ([10 CFR Part 37](#) equivalent).
- Documents containing sensitive security information are properly marked, handled, controlled, and secured.

b. Discussion

Texas has 1,323 material licenses. During the review period, Texas performed 5,563 radioactive materials licensing actions. The team evaluated 26 of those licensing actions, 5 new applications, 15 amendments, 2 renewals, 2 terminations, 1 transfer of control, and 1 bankruptcy. The team evaluated casework for the following license types: broad scope medical, medical diagnostic and therapeutic, accelerator, industrial radiography, broad scope academic, nuclear pharmacy, fixed and portable gauges, well-logging, service providers, manufacture and distribution, decommissioning/Naturally Occurring Radioactive Material (NORM), financial assurance, bankruptcy and transfer of control. The licensing casework is identified in Appendix D. The casework sample represented work from 9 current and former license reviewers.

At the time of the review, Texas had three senior reviewers authorized to sign license actions. The team found the license reviewers well-trained and knowledgeable. All licensing actions were peer-reviewed. New license and renewal actions were also submitted to and then approved by the licensing manager.

The Texas licensing program currently uses checklists and guidance that are consistent with NRC's NUREG-1556 Series. Texas licensing procedures outline the timelines for processing new applications, amendments and terminations. Licensing actions reviewed were consistent with these requirements.

The team found that actions terminating a license were well documented, including exit survey records, and proper disposal and transfer of byproduct material. Licenses that are subject to [10 CFR Part 37](#) requirements are properly identified and addressed through standard license conditions.

New licenses are subject to pre-licensing checks and pre-licensing site visits and completion of RSRM checklists prior to issuance of licenses. Licensing actions are properly identified by an RSRM action, and information is entered into the National Source Tracking System where required. Renewal applications are received by mail or email and assigned to a reviewer for regulatory compliance using license checklists, RSRM, Financial Assurance (FA) verification. The licensee's inspection compliance history is also reviewed prior to issuance of renewals.

The team reviewed licenses for compliance with FA program requirements and verified that the proper FA documentation was on file and that the information was kept secure. Licenses

and license application materials are stored electronically and password protected. License documents are sent via email using encryption procedures.

c. Evaluation

The team determined that, during the review period, Texas met the performance indicator objectives listed in Section 3.4.a. Based on the criteria in [MD 5.6](#), the team recommends that Texas' performance with respect to the indicator, Technical Quality of Licensing Actions, be found satisfactory.

d. MRB Discussion and Chair's Determination

The final report will present the MRB Chair's determination regarding this indicator.

### 3.5 Technical Quality of Incident and Allegation Activities

The quality, thoroughness, and timeliness of response to incidents and allegations of safety concerns can have a direct bearing on public health, safety and security. An assessment of incident response and allegation investigation procedures, actual implementation of these procedures internal and external coordination, timely incident reporting, and investigative and follow-up actions, are a significant indicator of the overall quality of incident response and allegation programs.

a. Scope

The team used the guidance in [SA-105](#), "Reviewing the Common Performance Indicator: Technical Quality of Incident and Allegation Activities," and evaluated Texas' performance with respect to the following performance indicator objectives:

- Incident response and allegation procedures are in place and followed.
- Response actions are appropriate, well-coordinated, and timely.
- On-site responses are performed when incidents have potential health, safety, or security significance.
- Appropriate follow-up actions are taken to ensure prompt compliance by licensees.
- Follow-up inspections are scheduled and completed, as necessary.
- Notifications are made to the NRC Headquarters Operations Center for incidents requiring a 24-hour or immediate notification to the Agreement State or the NRC.
- Incidents are reported to the Nuclear Material Events Database (NMED) and closed when all required information has been obtained.
- Allegations are investigated in a prompt, appropriate manner.
- Concerned individuals are notified within 30 days of investigation conclusions.
- Concerned individuals' identities are protected, as allowed by law.

b. Discussion

During the review period, 338 incidents were reported to Texas. The team evaluated 18 radioactive materials incidents which included 7 lost or stolen radioactive materials, 8 equipment failures, 1 transportation event, 1 contamination event, and 1 underdose.

The team noted that Texas has clearly defined and distinct terminology in which events and allegations are referred to as incidents and complaints, respectively. After reviewing Texas DSHS's Incident Investigation Procedures (IIP) of the Radiation Control Program, Revision 11.0, dated October 2025 (IIP), the team noted that Texas may receive event

reports and allegations from a variety of sources via telephone, fax, text message, or email. Sources include members of the public, licensees, state or federal agencies, and local jurisdictions. Further, the team found that Texas responded to events in accordance with their established procedure.

The team also evaluated Texas' reporting of incidents to the NRC's Headquarters Operations Center (HOC). The team noted that in each case requiring HOC notification, Texas reported the incidents within the required time frame; thoroughly evaluated incident notifications; and responded to the incidents in a thorough, well balanced, complete, and comprehensive manner. The team also evaluated whether Texas had failed to report any required incidents to the HOC by reviewing 4 of the 156 non-reportable incidents recorded during this review period. Of the four non-reportable incidents reviewed, the team identified no missed reporting requirements.

During the review period, Texas received 100 allegations, of which 33 had been referred by the NRC and 67 had been received directly. The team evaluated 10 of the allegations and found that, in accordance with Texas' established IIP Procedures, Texas reviewed allegations promptly, ensured that alleged identities were protected whenever possible in accordance with Texas law, and took prompt and appropriate action on each of the concerns raised. The team also found that allegations were appropriately closed, and that Texas timely notified concerned individuals of investigation results.

Finally, the team observed that Texas enters all reported events and allegations into their local State of Texas Nuclear Materials Events Database.

#### c. Evaluation

The team determined that, during the review period, Texas met the performance indicator objectives listed in Section 3.5.a. Based on the criteria in [MD 5.6](#), the team recommends that Texas' performance with respect to the indicator, Technical Quality of Incident and Allegation Activities, be found satisfactory.

#### d. MRB Discussion and Chair's Determination

The final report will present the MRB Chair's determination regarding this indicator.

### **4.0 NON-COMMON PERFORMANCE INDICATORS**

Four non-common performance indicators are used to review Agreement State programs: (1) Legislation, Regulations, and Other Program Elements; (2) SS&D Evaluation Program; (3) LLRW Disposal Program; and (4) UR Program. All four non-common performance indicators applied to this review.

#### **4.1 Legislation, Regulations, and Other Program Elements**

State statutes should authorize the State to establish a program for the regulation of agreement material and provide authority for the assumption of regulatory responsibility under the State's agreement with the NRC. The statutes must authorize the State to promulgate regulatory requirements necessary to provide reasonable assurance of adequate protection of public health, safety, and security. The State must be authorized through its legal authority to license, inspect, and enforce legally binding requirements, such as regulations and licenses. The NRC regulations that should be adopted by an Agreement State for purposes of compatibility or health and safety should be adopted in a time frame so that the effective date of the State

requirement is not later than 3 years after the effective date of the NRC's final rule. Other program elements that have been designated as necessary for maintenance of an adequate and compatible program should be adopted and implemented by an Agreement State within 6 months following the NRC designation. A Program Element Table indicating the Compatibility Categories for those program elements other than regulations can be found on the NRC's [Regulation Toolbox](#).

a. Scope

The team used the guidance in [SA-107](#), "Reviewing the Non-Common Performance Indicator: Legislation, Regulations, and Other Program Elements," and evaluated Texas' performance with respect to the following performance indicator objectives. A complete list of regulation amendments can be found on the NRC's [Regulation Toolbox](#) website.

- The Agreement State program does not create conflicts, duplications, gaps, or other conditions that jeopardize an orderly pattern in the regulation of radioactive materials under the Atomic Energy Act of 1954, as amended.
- Regulations adopted by the Agreement State for purposes of compatibility or health and safety were adopted no later than 3 years after the effective date of the NRC regulation.
- Other program elements, as defined in [SA-200](#) that have been designated as necessary for maintenance of an adequate and compatible program, have been adopted and implemented within 6 months of NRC designation.
- The State statutes authorize the State to establish a program for the regulation of agreement material and provide authority for the assumption of regulatory responsibility under the agreement.
- The State is authorized through its legal authority to license, inspect, and enforce legally binding requirements such as regulations and licenses.
- Sunset requirements, if any, do not negatively impact the effectiveness of the State's regulations.

b. Discussion

On January 10, 1963, Texas entered into an agreement with the Atomic Energy Commission, the NRC's predecessor, which gave it the authority to license and inspect byproduct, source, or special nuclear materials used or possessed within its borders. That agreement became effective on March 1, 1963. Texas' current effective statutory authority for each of DSHS and TCEQ are contained in the Title 5 of the Texas *Health and Safety Code*, respectively, Chapters 401, the Texas Radiation Control Act (TRCA), and 403, the Texas Low-Level Radioactive Waste Disposal Compact Act (TLLRWDCA). Further, Title 25 of the *Texas Administrative Code* (25 TAC) Chapter 289, Radiation Control, and 30 TAC Chapter 336, Radioactive Substance Rules, provide, respectively, the secondary statutory authority for each of the Texas DSHS's standard radioactive materials licenses, and the TCEQ's LLRW and UR licenses. Via these statutes and rules, the Texas DSHS and the TCEQ are designated as Texas' radiation control agencies.

In addition, Section 401.11(b) provides an exception which gives the TCEQ jurisdiction to regulate and license: (1) the disposal of radioactive substances; (2) the processing or storage of LLRW or NORM waste received from other persons, except oil and gas NORM; (3) the recovery or processing of source material in accordance with Subchapter G; (4) the processing of byproduct material as defined by Section 401.003(3)(B); and (5) sites for the disposal of: (a) LLRW; (b) byproduct material; or (c) naturally occurring radioactive material waste.

During the IMPEP review period, the Texas legislature passed one bill that directly impacted both Texas' DSHS and its TCEQ. Specifically, House Bill 3236 and Senate Bill 1592 increased the number of members of the radiation advisory board from 18 to 19 by adding 1 individual appointed by the governor who is licensed by the State Board of Veterinary Medical Examiners.

The legislature passed one bill that directly impacted the Texas DSHS. House Bill 2712 required a state to readopt, readopt with amendments, or repeal a previously adopted rule if the rule incorporates by reference a document that is not law or policy of the state.

The legislature passed three bills that directly impacted the TCEQ:

- House Bill 14 established the Texas Advanced Nuclear Energy Office to lead the transition to a balanced energy future by advancing innovative nuclear energy generation technologies while delivering safe, reliable, and clean energy solutions that address the state's growing demand.
- Senate Bill 1535 requires the Texas Workforce Commission, in collaboration with the Texas Education Agency and the Texas Higher Education Coordinating Board and in consultation with representatives designated by the Public Utility Commission of Texas to coordinate the state's nuclear energy strategies, to establish and administer the advanced nuclear energy workforce development program for the purpose of addressing urgent skilled labor demands in the advanced nuclear energy industry in Texas.
- Senate Bill 1061 amends the Injection Well Act, Water Code, to require the TCEQ to prioritize the conservation of regional groundwater water supplies when reviewing an application to amend a restoration table value with respect to an injection-well permit for the mining of uranium.

There were no noticeable impacts due to the above legislations to either Texas' DSHS or the TCEQ.

Texas DSHS administrative rulemaking process takes approximately 18 months from drafting to finalizing a rule. Meanwhile, the TCEQ's administrative rulemaking process takes approximately 6 months from drafting to finalizing a rule. The public, NRC, other agencies, and potentially impacted licensees and registrants are offered an opportunity to comment during the process. Comments were considered and incorporated, as appropriate, before the regulations were finalized and approved. The team noted that Texas' DSHS's and the TCEQ's rules and regulations were subject to "sunset" laws. This review generally happens every 12 years for all state agencies, including the TCEQ. For Texas DSHS, Chapter 325 of the Texas Government Code required a periodic review of most state agencies to determine if they should be continued, abolished, or reorganized. Texas DSHS is currently undergoing a sunset review. The most recent sunset review for the TCEQ was conducted in 2022-2023. Additionally, for the TCEQ, Chapter 336 of the Texas Government Code required all of the TCEQ's rules to undergo a quadrennial (quad) review to determine whether the TCEQ's rules are still relevant and needed. It would also determine if any changes were needed to the rules. The next quad review is expected to be initiated this year, in 2026.

During the review period, Texas DSHS and the TCEQ submitted, respectively, 11 and 6 final regulation amendments to the NRC for approval. Of the 17 amendments submitted, 10 were submitted overdue for State adoption during the review period. However, at the time of this IMPEP review, all 17 were adopted and there were no overdue regulation amendments.

The team also reviewed other program elements, as found in [SA-200](#), which the NRC has designated as necessary for the maintenance of an adequate and compatible program.

These included elements such as: Pre-Licensing Guidance, [IMCs](#) and [Inspection Procedures](#), RSRM checklist, and the [NUREG-1556 Series](#) Consolidated Licensing Guidance. There were no issues.

c. Evaluation

The team determined that, during the review period, Texas met the performance indicator objectives listed in Section 4.1.a. Based on the criteria in [MD 5.6](#), the team recommends that Texas performance with respect to the indicator, Legislation, Regulations, and Other Program Elements, be found satisfactory.

d. MRB Discussion and Chair's Determination

The final report will present the MRB Chair's determination regarding this indicator.

## 4.2 SS&D Evaluation Program

Adequate technical evaluations of SS&D designs are essential to ensure that SS&Ds will maintain their integrity and that the design is adequate to protect public health and safety. [NUREG-1556, Volume 3](#), "Consolidated Guidance about Materials Licenses: Applications for Sealed Source and Device Evaluation and Registration," provides information on conducting the SS&D reviews and establishes useful guidance for teams. In accordance with [MD 5.6](#), three sub-elements: Technical Staffing and Training, Technical Quality of the Product Evaluation Program, and Evaluation of Defects and Incidents Regarding SS&D's, are evaluated to determine if the SS&D program is satisfactory. Agreement States with authority for SS&D evaluation programs who are not performing SS&D reviews are required to commit in writing to having an SS&D evaluation program in place before performing evaluations.

a. Scope

The team used the guidance in [SA-108](#), "Reviewing the Non-Common Performance Indicator: Sealed Source and Device Evaluation Program," and evaluated Texas' performance with respect to the following performance indicator objectives:

### Technical Staffing and Training

- A well-conceived and balanced staffing strategy has been implemented throughout the review period.
- Qualification criteria for new technical staff are established and are being followed, or qualification criteria will be established if new staff members are hired.
- Any vacancies, especially senior-level positions, are filled in a timely manner.
- Management is committed to training and staff qualification.
- Individuals performing SS&D evaluation activities are adequately qualified and trained to perform their duties.
- SS&D reviewers are trained and qualified in a reasonable period of time.

### Technical Quality of the Product Evaluation Program

- SS&D evaluations are adequate, accurate, complete, clear, specific, and consistent with the guidance in [NUREG-1556, Volume 3](#).

### Evaluation of Defects and Incidents

- SS&D incidents are reviewed to identify possible manufacturing defects and the root causes of these incidents.
- Incidents are evaluated to determine if other products may be affected by similar problems. Appropriate action and notifications to the NRC, Agreement States, and others, as appropriate, occur in a timely manner.

b. Discussion

Technical Staffing and Training

Texas has three staff qualified to perform SS&D reviews. They have two more licensing staff that have taken the 40-hour SS&D training class. Currently, there were no vacancies. During the review period, none of the SS&D staff members left the program and no additional staff members were hired. Texas has a training program equivalent to the NRC training requirements listed in the NRC's [IMC 1248](#), Appendix D. The staff participates in refresher training.

Technical Quality of the Product Evaluation

Texas has 48 SS&D licensees. The team evaluated 16 of 54 SS&D actions processed during the review period. These actions included 1 new, 28 amendments, and 25 inactivation's during this review period. One SS&D certificate had to be re-issued with a corrected page due to an audit finding.

There were 338 SS&D registrations consisting of current and inactive registration within the NRC SS&D Registration Database. When compared to the Texas SS&D database, it was found to have 41 SS&D registrations need to be addressed to be made inactive. Texas SS&D staff acknowledged the issue and indicated that they will address all registrations need to be modified to an inactive status.

Evaluation of Defects and Incidents Regarding SS&Ds

The team evaluated 178 of 187 incidents involving SS&D registered products during the review period. None of the incidents were related to manufacturing or design of the sources/devices manufactured or distributed by a licensee with a SS&D registered by Texas.

c. Evaluation

The team determined that, during the review period, Texas met the performance indicator objectives listed in Section 4.2.a. Based on the criteria in [MD 5.6](#), the team recommends that Texas' performance with respect to the indicator, SS&D Evaluation Program, be found satisfactory.

d. MRB Discussion and Chair's Determination

The final report will present the MRB Chair's determination regarding this indicator.

### 4.3 LLRW Disposal Program

The objective is to determine if the Texas LLRW disposal program is adequate to protect public health and safety, and the environment. Five sub-elements are used to make this determination: (1) Technical Staffing and Training; (2) Status of LLRW Inspection Program; (3) Technical Quality of Inspections; (4) Technical Quality of Licensing Actions; and (5) Technical Quality of Incident and Allegation Activities.

#### a. Scope

The team used the guidance in [SA-109](#), "Reviewing the Non-Common Performance Indicator: Low-Level Radioactive Waste Disposal Program," and evaluated Texas' performance with respect to the following performance indicator objectives:

##### Technical Staffing and Training

- Qualified and trained technical staff are available to license, regulate, control, inspect, and assess the operation and performance of the LLRW disposal facility.
- Qualification criteria for new LLRW technical staff are established and are followed or qualification criteria will be established if new staff members are hired.
- Any vacancies, especially senior-level positions, are filled in a timely manner.
- There is a balance in staffing the LLRW licensing and inspection programs.
- Management is committed to training and staff qualification.
- Individuals performing LLRW licensing and inspection activities are adequately qualified and trained to perform their duties.
- LLRW license reviewers and inspectors are trained and qualified in a reasonable period of time.

##### Status of LLRW Inspection Program

- The LLRW facility is inspected at prescribed frequencies.
- Statistical data on the status of the inspection program are maintained and can be retrieved.
- Deviations from inspection schedules are coordinated between LLRW technical staff and management.
- There is a plan to perform any overdue inspections and reschedule any missed or deferred inspections; or a basis has been established for not performing any overdue inspections or rescheduling any missed or deferred inspections.
- Inspection findings are communicated to licensees in a timely manner.

##### Technical Quality of Inspections

- Inspections of LLRW licensed activities focus on health, safety, and security.
- Inspection findings are well-founded and properly documented in reports.
- Management promptly reviews inspection results.
- Procedures are in place and used to help identify root causes and poor licensee performance.
- Inspections address previously identified open items, non-compliances, and violations.
- Inspection findings lead to appropriate and prompt regulatory action.
- Supervisors, or senior staff as appropriate, conduct annual accompaniments of each LLRW inspector to assess performance and assure consistent application of inspection policies.

- Inspection guides are consistent with the NRC guidance.
- An adequate supply of calibrated survey instruments is available to support the inspection program.

#### Technical Quality of Licensing Actions

- Licensing action reviews are thorough, complete, consistent, and of acceptable technical quality with health, safety, and security issues properly addressed.
- Applicable LLRW guidance documents are available to reviewers and are followed.
- Essential elements of license applications have been submitted and elements are consistent with current NRC or Agreement State regulatory guidance for describing the isotopes and quantities used, qualifications of authorized users, facilities, equipment, locations of use, operating and emergency procedures, and any other requirements necessary to ensure an adequate basis for the licensing action.
- LLRW license reviewers, if applicable, have the proper signature authority for the cases they review independently.
- License tie-down conditions are stated clearly and can be inspected.
- Deficiency letters clearly state regulatory positions and are used at the proper time.
- Reviews of renewal applications demonstrate a thorough analysis of a licensee's inspection and enforcement history.
- Licensing practices for RSRM are appropriately implemented including fingerprinting orders ([10 CFR Part 37](#) equivalent).
- Documents containing sensitive security information are properly marked, handled, controlled, and secured.

#### Technical Quality of Incident and Allegation Activities

- LLRW incident response, and allegation procedures are in place and followed.
- Response actions are appropriate, well-coordinated, and timely.
- On-site responses are performed when incidents have potential health, safety or security significance.
- Appropriate follow-up actions are taken to ensure prompt compliance by licensees.
- Follow-up inspections are scheduled and completed, as necessary.
- Notifications are made to the NRC Headquarters Operations Center for incidents requiring a 24-hour or immediate notification to the Agreement State or the NRC.
- Incidents are reported to the NMED and closed when required information is obtained.
- Allegations are investigated in a prompt, appropriate manner.
- Concerned individuals are notified of investigation conclusions.
- Concerned individuals' identities are protected, as allowed by law.

#### b. Discussion

In 1981, the NRC revised its Policy Statement, "Criteria for Guidance of States and NRC in Discontinuance of NRC Regulatory Authority and Assumption Thereof by States Through Agreement," to allow States to request amendments specifically for regulating LLRW as a separate category. States that held Agreements before 1981 were determined to already possess LLRW disposal authority and therefore did not need an amendment. Because Texas became an Agreement State in 1963 and has long understood its responsibility to regulate an LLRW disposal facility, it has been expected to establish, and did establish, a regulatory program that meets the criteria for an adequate and compatible LLRW disposal program. For these reasons, the team considered this indicator during the current review.

### Technical Staffing and Training

The Texas' LLRW program is implemented by two divisions within the TCEQ. Licensing of LLRW activities is implemented by staff in the RMD. Inspection of LLRW activities is implemented by staff in the Critical Infrastructure Division (CID). At the time of review, the CID inspector positions were fully staffed, and the licensing program currently had one vacancy in RMD. Many of the staff that support licensing and inspection of LLRW activities also support licensing and inspection in the UR program.

At the time of the review, the LLRW licensing staff consisted of the Work Leader, four license reviewers, a program coordinator, and a Radioactive Materials Section Manager. During the review period, RMD and CID had experienced staff leaving the program. CID hired several staff, including two inspectors at the Waste Control Specialist (WCS) site and CID Work Leader. RMD also hired two new staff members after two licensing staff left the program. RMD is currently hiring for one vacant licensing position.

The LLRW inspection staff includes two certified inspectors located in Austin; one certified resident inspector stationed at the WCS disposal facility in Andrews County; and an additional resident inspector who is currently in training at the WCS facility. The CID Work Leader is going through the inspector qualification process. The two qualified LLRW inspectors, based in Austin, also perform UR inspections. The licensing staff consists of the Work Leader and three licensing staff. The Work Leader and one staff are fully qualified and the other two licensing staff are going through qualification process. The qualified training program for staff is approximately 2 years. Each staff member has a qualification plan, training program with estimated qualification completion date. The review team found all staff have technical degrees, relevant experience and proper training consistent with NRC's training program.

During the review period, the review team found TCEQ's technical staff competencies and training program equivalent to the NRC's [IMC 1248](#), Appendix E.

### Status of LLRW Disposal Inspection Program

The TCEQ performed inspections in accordance with its LLRW Disposal Program Inspection Procedures for the Waste Control Specialists, LLC Facility. The review team determined that TCEQ completed LLRW inspections in accordance with the frequency established in the NRC's [IMC 2401](#), "Near-Surface Low-Level Radioactive Waste Disposal Facility Inspection Program." CID performed several inspections at the WCS disposal facility during the review period. The team determined that CID performed complete inspections at the WCS disposal facility during each year of the review period. The resident inspectors documented reports in the TCEQ Consolidated Compliance and Enforcement Data System database. The review team evaluated inspection reports at each of the current licenses. The LLRW program regulates three licenses in addition to the WCS disposal facility: Ascend Performance Materials Texas Inc. (Ascend), Iso-Tex Corp. (Iso-Tex), and Nuclear Sources and Services Inc. (NSSI). The team reviewed all the inspection reports for each of these licenses for inspections completed during the review period.

During the review the team found the Inspection findings for the LLRW disposal program were communicated by formal correspondence to the licensee within 30 days following the inspection, consistent with NRC's [IMC 0610](#).

The LLRW program regulates three licenses in addition to the WCS disposal facility: Ascend, Iso-Tex, and NSSI. The team reviewed all inspection reports for each of these

licenses for inspections completed during the review period. The review team found the inspection program inspection frequency, documenting inspection reports, and periodicity of inspections are consistent with [IMC 2401](#).

#### Technical Quality of Inspections

The review team assessed the quality of LLRW program inspections by evaluating inspector performance during accompaniments, inspection field notes and completed reports, inspection procedures, and follow-up on previous inspection findings.

The review team accompanied two resident inspectors, one inspector and the Work Leader (TCEQ HQ in Austin) on March 4, 2026. The accompaniments included observing the inspectors' morning briefings with the licensee; intake inspection of the WCS disposal facility; vehicle and shipment inspection of an incoming LLRW shipment; and package solidification and disposal inspection of the received radioactive waste shipment. One resident inspector is qualified, and the second resident (hired 4 months previous to the IMPEP) is going through the inspector qualifications. The qualified inspector was found to be very knowledgeable about the inspection procedures and thorough in the execution of the inspection procedures. The resident inspector, currently in the qualification program, has continued to gain experience and was able to communicate procedures and methods for documenting inspection results that were conducted under the qualified inspector. Also, the other inspector (from Austin) was knowledgeable and experienced in performing inspections and effectively communicating with the licensee.

The review team evaluated inspection reports from 2022 through 2025. Because the resident inspector had only been at WCS for 14 months, the team prioritized its review of inspection reports from the 4th quarter of calendar year 2024 and the entirety of 2025. At the time of the review, reports from 2026 were not emphasized because Texas had not yet prepared any inspection reports for that year. Although both resident inspectors are relatively new to their positions, the team found that all inspectors were competent, demonstrated knowledge of inspection procedures, produced quality inspection reports with well-founded conclusions supported by regulations, and appropriately documented inspection observations and findings. Inspection reports reviewed covered technical areas including waste acceptance, hydrogeological, radiological, security, health physics, and environmental hazards.

The review team also determined that the inspections were thorough, consistent, and had sufficient documentation to ensure that licensee performance with respect to health and safety and security were acceptable.

#### Technical Quality of Licensing Actions

The Texas LLRW Disposal Program has four licenses, including: one waste storage and processing license; one LLRW disposal and radioactive waste storage and processing license; one alternative method of disposal license; and one decommissioning license. Since the last IMPEP review, the Radioactive Materials Licensing Section issued several licensing actions to the LLRW licenses. The review team reviewed the eight amendments that occurred during the review period. Additionally, at the time of the review, six draft amendments were in RMD, including the renewal of the WCS license. The team also reviewed Standard Operating Procedures that provide process guidance for the TCEQ staff's licensing action development. During this review period, Texas issued three minor amendments to WCS, License No. R04100; two administrative amendments and one

renewal to NSSI, License No. R01811; and two license amendments to Ascend, License No. RW0219.

#### Technical Quality of Incident and Allegation Activities

The team evaluated the two incidents that occurred during the review period. TCEQ's Incident and Allegation process is called the "Complaint" process. The response to each complaint was appropriate, well-coordinated, and timely. The CID inspectors received the complaints, initiated the process, documented the investigative reports, and the associated technical evaluation. For each complaint, the review team determined that TCEQ management determined the appropriate level of response and made the proper notifications at the time of the event. The review team evaluated the written procedures for the handling, review, analysis, response and follow-up of the complaints. The review team found the incident and allegations (TCEQ complaint process) and its response to those incidents was thorough, well balanced, complete, comprehensive, and concerned individuals' identities were protected whenever possible in accordance with Texas law.

#### c. Evaluation

The team determined that, during the review period, Texas met the performance indicator objectives listed in Section 4.3.a. Based on the criteria in [MD 5.6](#), the team recommends that Texas' performance with respect to the indicator, LLRW Disposal Program, be found satisfactory.

#### d. MRB Discussion and Chair's Determination

The final report will present the MRB Chair's determination regarding this indicator.

### 4.4 UR Program

The objective is to determine if Texas' UR Program is adequate to protect public health and safety, and the environment. Five sub-elements are used to make this determination: (1) Technical Staffing and Training; (2) Status of UR Inspection Program; (3) Technical Quality of Inspections; (4) Technical Quality of Licensing Actions; and (5) Technical Quality of Incident and Allegation Activities.

#### a. Scope

The team used the guidance in [SA-110](#), "Reviewing the Non-Common Performance Indicator: Uranium Recovery Program," and evaluated Texas' performance with respect to the following performance indicator objectives:

##### Technical Staffing and Training

- Qualified and trained technical staff are available to license, regulate, control, inspect, and assess the operation and performance of the UR program.
- Qualification criteria for new UR technical staff are established and are being followed or qualification criteria will be established if new staff members are hired.
- Any vacancies, especially senior-level positions, are filled in a timely manner.
- There is a balance in staffing the UR licensing and inspection programs.
- Management is committed to training and staff qualification.
- Individuals performing UR licensing and inspection activities are adequately qualified and trained to perform their duties.

- UR license reviewers and inspectors are trained and qualified in a reasonable period of time.

#### Status of UR Inspection Program

- The UR facility is inspected at prescribed frequencies.
- Statistical data on the status of the inspection program are maintained and can be retrieved.
- Deviations from inspection schedules are coordinated between UR technical staff and management.
- There is a plan to perform any overdue inspections and reschedule any missed or deferred inspections; or a basis has been established for not performing overdue inspections or rescheduling any missed or deferred inspections.
- Inspection findings are communicated to licensees in a timely manner.

#### Technical Quality of Inspections

- Inspections of UR licensed activities focus on health, safety, and security.
- Inspection findings are well-founded and properly documented in reports.
- Management promptly reviews inspection results.
- Procedures are in place and used to help identify root causes and poor licensee performance.
- Inspections address previously identified open items, non-compliance, and violations.
- Inspection findings lead to appropriate and prompt regulatory action.
- Supervisors, or senior staff as appropriate, conduct annual accompaniments of each UR inspector to assess performance and assure consistent application of inspection policies.
- Inspection guides are consistent with the NRC guidance.
- An adequate supply of calibrated survey instruments is available to support the inspection program.

#### Technical Quality of Licensing Actions

- Licensing action reviews are thorough, complete, consistent, and of acceptable technical quality with health, safety, and security issues properly addressed.
- Applicable UR guidance documents are available to reviewers and are followed.
- Essential elements of license applications have been submitted and meet current NRC or Agreement State regulatory guidance (e.g., financial assurance, etc.)
- UR license reviewers, if applicable, have the proper signature authority for the cases they review independently.
- License conditions are stated clearly and can be inspected.
- Deficiency letters clearly state regulatory positions and are used at the proper time.
- Reviews of renewal applications demonstrate a thorough analysis of a licensee's inspection and enforcement history.
- Licensing practices for RSRM are appropriately implemented including fingerprinting orders ([10 CFR Part 37](#) equivalent).
- Documents containing sensitive security information are properly marked, handled, controlled, and secured.

### Technical Quality of Incident and Allegation Activities

- UR incident response, investigation, and allegation procedures are in place and followed.
- Response actions are appropriate, well-coordinated, and timely.
- On-site responses are performed when incidents have potential health, safety, or security significance.
- Appropriate follow-up actions are taken to ensure prompt compliance by licensees.
- Follow-up inspections are scheduled and completed, as necessary.
- Notifications are made to the NRC Headquarters Operations Center for incidents requiring a 24-hour or immediate notification to the Agreement State or the NRC.
- Incidents are reported to the NMED and closed when required information is obtained.
- Allegations are investigated in a prompt, appropriate manner.
- Concerned individuals are notified of investigation conclusions.
- Concerned individuals' identities are protected, as allowed by law.

### b. Discussion

At the time of the IMPEP review, Texas' UR program consisted of three conventional mill licenses also authorized for disposal of 11.e(2) byproduct material, two in-situ recovery licenses authorized for in situ uranium mining and processing, one licensee authorized to process resin to produce byproduct yellowcake, and three licensees authorized for in situ uranium mining only. Texas had no conventional mill licenses currently under decommissioning nor undergoing groundwater assessment.

The duties and responsibilities for Texas' UR program are assigned to staff in TCEQ's RMD, and the CID. Many of the same RMD and CID staff support both the LLRW and UR programs.

### Technical Staffing and Training

Texas' RMD has two groundwater hydrologists (1 FTE for UR), four health physicists (2.8 FTE for UR) and four professional engineers (2.6 FTE for UR). Other technical staff and management that support Uranium Mills have partial FTE designation to support UR activities as needed (0.4 FTE). There is one vacancy in RMD for a UR health physicist.

Texas' CID section had no vacancies and had three each of UR inspectors (totaling 1.1 FTE) and management support for UR programs (totaling 0.2 FTE).

During the review period, 10 RMD and 6 CID staff members departed the program due either to retirement or acceptance of a position outside of the organization. Texas added 14 RMD and 7 CID staff members to account for the departures.

The health physicists in RMD and CID are currently in the training and qualification process required for their positions in accordance with the State training and qualification program equivalent to [IMC 1248](#). Once qualified, the health physicists will conduct refresher training at the appropriate intervals prescribed in [IMC 1248](#).

### Status of the UR Inspection Program

The review determined that Texas completed the UR inspections in accordance with the frequency in [IMC 2801](#), Uranium Mill and 11e.(2) Byproduct Material Disposal Site and Facility Inspection Program.

Inspection findings for the UR disposal program were communicated by formal correspondence to the licensee within 30 days following the inspection.

During the review period, the program performed field inspections which included health physics, engineering, groundwater, stormwater, dam, disposal cell and 11.e(2) byproduct material disposal. The review team reviewed 20 of the health physics inspection modules, 2 of the stormwater inspections, 3 11.e(2) disposal inspections, 2 disposal cell inspections, 4 effluent inspections and 10 groundwater inspections. The review team determined that UR inspections were completed in accordance with the frequency in NRC's [IMC 2801](#), "Uranium Mill and 11.e(2) Byproduct Material Disposal Site and Facility Inspection Program."

#### Technical Quality of Inspections

On February 9, 2026, the team accompanied one inspector at Vasquez ISR site in Duval County. The inspection focused on radiation safety, perimeter monitoring, records inspection, environmental monitoring, landowner involvement, worker protection, and perimeter monitoring. Under the UR license, site security, pre-operational environmental monitoring, and facility postings were observed. The team observed inspectors as they performed inspections related to radiation safety, radiation postings, as low as reasonably achievable, and the Ground Water Quality Discharge Permit. The team found each of the inspectors to be well-trained, prepared for their inspections, and thorough in their reviews. Documentation reviewed by inspectors was thorough and complete.

The team evaluated 41 inspection files which included health physics, stormwater, disposal, disposal cell inspection, effluent reviews and groundwater inspections. The team determined that the inspection reports were thorough, complete, consistent, and had sufficient documentation to ensure that licensee performance with respect to health, safety and security was acceptable. The findings were well-founded, supported by regulations, and were appropriately documented.

#### Technical Quality of Licensing Actions

For the conventional mills, the licensing actions consisted of license renewals, annual financial assurance updates, groundwater corrective action plan reviews, transfer of control, compliance monitoring, and post-decommissioning monitoring for groundwater compliance.

Texas completed 18 license amendments during the review period. The team examined three complex licensing reviews. The licensing actions contained the appropriate data and site progress. The team found that Texas' evaluation of licensing actions and license conditions were thorough, complete, consistent, and of acceptable technical quality with health, safety, and security issues properly addressed.

#### Technical Quality of Incident and Allegation Activities

The team evaluated all three incidents and the sole allegation involving the Texas UR program. Texas had written procedures for the handling, review, analysis, response and follow-up of incidents and allegations.

When notified of an incident, management determines the appropriate level of response, which ranges from an immediate response to an in-office review or follow-up during the next routine inspection. Those determinations are made based on both the circumstances and the health and safety significance of the incident. The team found that Texas' evaluation of

incident notifications and its response to those incidents was thorough, well balanced, complete, and comprehensive.

The team also evaluated Texas' reporting of incidents to the NRC's HOC. The team noted that for each incident requiring HOC notification, Texas reported the incidents within the required time frame. The team identified no issues regarding the incident response program.

During the review period, there was one allegation or complaint concerning the UR program. That complaint was not referred to by NRC, and was ultimately withdrawn by the allegor. This was noted in an inspection report for the site. The team evaluated that allegation. Even with the eventual withdrawal, the review team found that staff took prompt and appropriate action in response to each of the concerns raised. The team determined that the allegation was appropriately closed, concerned individuals were notified timely of the actions taken, and concerned individuals' identities were protected whenever possible in accordance with Texas law.

c. Evaluation

The team determined that, during the review period, Texas met the performance indicator objectives listed in Section 4.4.a. Based on the criteria in [MD 5.6](#), the team recommends that Texas' performance with respect to the indicator, UR Program, be found satisfactory.

d. MRB Discussion and Chair's Determination

The final report will present the MRB Chair's determination regarding this indicator.

## 5.0 SUMMARY

The team found Texas' performance satisfactory for all performance indicators reviewed: Technical Staffing and Training; Status of Materials Inspection Program; Technical Quality of Inspections; Technical Quality of Licensing Actions; Technical Quality of Incident and Allegation Activities; Legislation, Regulations, and Other Program Elements; SS&D Evaluation Program; LLRW Disposal Program; and UR Program.

There were no recommendations from the 2022 IMPEP review for the team to consider, and the team did not make any new recommendations.

Accordingly, the team recommends that the Texas radiation control program be found adequate to protect public health and safety and compatible with the NRC's program. Because Texas has had at least two consecutive IMPEP reviews with all performance indicators found satisfactory, the team recommends that a periodic meeting be conducted in approximately 3 years with the next IMPEP review taking place in approximately 6 years.

## LIST OF APPENDICES

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| Appendix C | Inspection Casework       |
| Appendix D | Licensing Casework        |

## APPENDIX A

### IMPEP REVIEW TEAM MEMBERS

| <b>Name</b>   | <b>Areas of Responsibility</b>  |
|---|---|
| Sherrie Flaherty, NMSS                                | Team Leader<br>Technical Staffing and Training<br>Inspector Accompaniments                                      |
| Sara Forster, MS, Region III                          | Team Leader in Training   |
| David Lawrenz, State of Kansas                        | Status of Materials Inspection Program<br>Technical Quality of Inspections<br>Inspector Accompaniments          |
| Anjan Bhattacharyya, PhD,<br>Commonwealth of Kentucky | Technical Quality of Licensing Actions  |
| Jacqueline Cook, Region IV                            | Technical Quality of Incident and Allegation Activities<br>Legislation, Regulations, and Other Program Elements |
| James Pate, State of Louisiana                        | Sealed Source and Device Evaluation Program   |
| Maurice Heath, NMSS                                   | Low-Level Radioactive Waste Disposal Program<br>Inspector Accompaniments  |
| Jennifer Gutierrez, NMSS                              | Uranium Recovery Program<br>Inspector Accompaniments  |

APPENDIX B

INSPECTOR ACCOMPANIMENTS

The following inspector accompaniments were performed prior to the IMPEP review:

|                                     |                          |
|-------------------------------------|--------------------------|
| Accompaniment No.: 1                | License No.: L07277      |
| License Type: <i>Portable Gauge</i> | Priority: 5              |
| Inspection Date: 2/25/26            | Inspector's initials: ES |

|   |                          |
|---|--------------------------|
| Accompaniment No.: 2  | License No.: L05009      |
| License Type: <i>Medical – Therapeutic – Written Directive-required (unsealed) – and Diagnostic</i> | Priority: 3              |
| Inspection Date: 2/24/26  | Inspector's initials: DA |

|  |                          |
|--|--------------------------|
| Accompaniment No.: 3   | License No.: L07237      |
| License Type: <i>Medical – Therapeutic – including Emerging Medical Technologies and Written Directive-required (sealed &amp; unsealed) – and Diagnostic</i> | Priority: 2              |
| Inspection Date: 2/25/26   | Inspector's initials: GH |

|  |                          |
|--|--------------------------|
| Accompaniment No.: 4   | License No.: L00545      |
| License Type: <i>Medical – Therapeutic – including Emerging Medical Technologies and Written Directive-required (sealed &amp; unsealed) – and Diagnostic</i> | Priority: 2              |
| Inspection Date: 2/27/26   | Inspector's initials: DW |

|  |                          |
|--|--------------------------|
| Accompaniment No.: 5   | License No.: L01774      |
| License Type: <i>Industrial Radiography at Temporary Jobsites and X-Ray Fluorescence</i> | Priority: 1              |
| Inspection Date: 2/23/26   | Inspector's initials: SC |

|  |                          |
|--|--------------------------|
| Accompaniment No.: 6   | License No.: L02298      |
| License Type: <i>Industrial Radiography – Fixed Location</i> | Priority: 1              |
| Inspection Date: 2/24/26                                     | Inspector's initials: CS |

|  |                          |
|--|--------------------------|
| Accompaniment No.: 7   | License No.: L00087      |
| License Type: <i>Industrial Radiography at Temporary Jobsites and Portable Gauge</i> | Priority: 1              |
| Inspection Date: 2/25/26   | Inspector's initials: DM |

|  |                                       |
|--|---------------------------------------|
| Accompaniment No.: 8                             | License No.: R04100                   |
| License Type: <i>Low-Level Radioactive Waste</i> | Priority: 1                           |
| Inspection Date: 3/4/26                          | Inspectors' initials: JL, EA, AH & PS |

|   |                          |
|---|--------------------------|
| Accompaniment No.: 9                            | License No.: R03653      |
| License Type: <i>Uranium Recovery – in situ</i> | Priority: 1              |
| Inspection Date: 2/9/26                         | Inspector's initials: AH |

APPENDIX C

INSPECTION CASEWORK

The following inspections were reviewed during the IMPEP review:

|                                       |                          |
|---------------------------------------|--------------------------|
| Inspection No.: 1                     | License No.: L06805      |
| License Type: <i>Service provider</i> | Priority: 5              |
| Inspection Date: 6/14/22              | Inspector's initials: CS |

|                                       |                          |
|---------------------------------------|--------------------------|
| Inspection No.: 2                     | License No.: L01963      |
| License Type: <i>Service Provider</i> | Priority: 5              |
| Inspection Date: 1/30/24              | Inspector's initials: JC |

|   |                          |
|---|--------------------------|
| Inspection No.: 3                             | License No.: L07155      |
| License Type: <i>Research and Development</i> | Priority: 5              |
| Inspection Date: 8/3/23                       | Inspector's initials: EF |

|                                  |                          |
|----------------------------------|--------------------------|
| Inspection No.: 4                | License No.: L06720      |
| License Type: <i>Fixed Gauge</i> | Priority: 5              |
| Inspection Date: 6/29/22         | Inspector's initials: ES |

|   |                          |
|---|--------------------------|
| Inspection No.: 5                             | License No.: L07072      |
| License Type: <i>Fixed Gauge (Bankruptcy)</i> | Priority: 5              |
| Inspection Date: 8/17/23                      | Inspector's initials: JC |

|                                     |                          |
|-------------------------------------|--------------------------|
| Inspection No.: 6                   | License No.: L00197      |
| License Type: <i>Portable Gauge</i> | Priority: 5              |
| Inspection Date: 1/10/2023          | Inspector's initials: JD |

|                                     |                          |
|-------------------------------------|--------------------------|
| Inspection No.: 7                   | License No.: L07124      |
| License Type: <i>Portable Gauge</i> | Priority: 5              |
| Inspection Date: 4/23/25            | Inspector's initials: DW |

|                                     |                          |
|-------------------------------------|--------------------------|
| Inspection No.: 8                   | License No.: L07277      |
| License Type: <i>Portable Gauge</i> | Priority: 5              |
| Inspection Date: 2/26/26            | Inspector's initials: TS |

|                                      |                          |
|--------------------------------------|--------------------------|
| Inspection No.: 9                    | License No.: G02626      |
| License Type: <i>General License</i> | Priority: NA             |
| Inspection Date: 1/12/23             | Inspector's initials: JD |

|  |                          |
|--|--------------------------|
| Inspection No.: 10                                       | License No.: L07258      |
| License Type: <i>Medical – Diagnostic only (Initial)</i> | Priority: 5              |
| Inspection Date: DA                                      | Inspector's initials: DA |

|   |                          |
|---|--------------------------|
| Inspection No.: 11  | License No.: L06842      |
| License Type: <i>Medical – Diagnostic only</i>  | Priority: 5              |
| Inspection Date: 12/18/25   | Inspector's initials: DA |
| Inspection No.: 12  | License No.: L05831      |
| License Type: <i>Medical – Diagnostic only</i>  | Priority: 5              |
| Inspection Date: 5/12/22  | Inspector's initials: JC |
| Inspection No.: 13  | License No.: L05911      |
| License Type: <i>Well Logging</i>   | Priority: 3              |
| Inspection Date: 1/25/23  | Inspector's initials: CS |
| Inspection No.: 14  | License No.: L05911      |
| License Type: <i>Well Logging (Security)</i>  | Priority: 3              |
| Inspection Date: 1/25/23  | Inspector's initials: CS |
| Inspection No.: 15  | License No.: L05901      |
| License Type: <i>Medical – Therapeutic – Written Directive-required (unsealed) – and Diagnostic</i>   | Priority: 3              |
| Inspection Date: 3/5/24   | Inspector's initials: LD |
| Inspection No.: 16  | License No.: L05009      |
| License Type: <i>Medical – Therapeutic – Written Directive-required (unsealed) – and Diagnostic</i>   | Priority: 3              |
| Inspection Date: 2/24/26  | Inspector's initials: DA |
| Inspection No.: 17  | License No.: L05185      |
| License Type: <i>Medical – Therapeutic – including Emerging Medical Technologies and Written Directive-required (sealed &amp; unsealed) – and Diagnostic</i>  | Priority: 2              |
| Inspection Date: 4/17/25  | Inspector's initials: SC |
| Inspection No.: 18  | License No.: L06900      |
| License Type: <i>Medical – Therapeutic – including Emerging Medical Technologies, High Dose Rate Brachytherapy, and Written Directive-required (unsealed)</i> | Priority: 2              |
| Inspection Date: 4/29/25  | Inspector's initials: JD |
| Inspection No.: 19  | License No.: L00268      |
| License Type: <i>Medical – Therapeutic – including Emerging Medical Technologies and Written Directive-required (sealed &amp; unsealed) – and Diagnostic</i>  | Priority: 2              |
| Inspection Date: 12/10/25   | Inspector's initials: DW |

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|--|--------------------------|
| Inspection No.: 20   | License No.: L00545      |
| License Type: <i>Medical – Therapeutic – including Emerging Medical Technologies and Written Directive-required (unsealed) – and Diagnostic</i>              | Priority: 2              |
| Inspection Date: 2/27/26   | Inspector's initials: DW |
| Inspection No.: 21   | License No.: L07237      |
| License Type: <i>Medical – Therapeutic – including Emerging Medical Technologies and Written Directive-required (sealed &amp; unsealed) – and Diagnostic</i> | Priority: 2              |
| Inspection Date: 2/25/26   | Inspector's initials: HG |
| Inspection No.: 22   | License No.: L05435      |
| License Type: <i>Accelerator</i>   | Priority: 2              |
| Inspection Date: 8/2/23  | Inspector's initials: ES |
| Inspection No.: 23   | License No.: L06944      |
| License Type: <i>Radiopharmacy</i>   | Priority: 2              |
| Inspection Date: 8/24/23   | Inspector's initials: TR |
| Inspection No.: 24   | License No.: GA 1153-1   |
| License Type: <i>Service Provider - source exchange or removal, source greater than 100 curies (reciprocity)</i>   | Priority: 2              |
| Inspection Date: 6/23/22   | Inspector's initials: FW |
| Inspection No.: 25   | License No.: GA 1153-1   |
| License Type: <i>Service Provider - source exchange or removal, source greater than 100 curies (reciprocity)</i>   | Priority: 2              |
| Inspection Date: 10/21/24  | Inspector's initials: GM |
| Inspection No.: 26   | License No.: L06993      |
| License Type: <i>Irradiator, Greater than 10,000 curies</i>  | Priority: 2              |
| Inspection Date: 6/20/22   | Inspector's initials: FW |
| Inspection No.: 27   | License No.: L06993      |
| License Type: <i>Irradiator, Greater than 10,000 curies (Security)</i>   | Priority: 2              |
| Inspection Date: 6/20/22   | Inspector's initials: FW |
| Inspection No.: 28   | License No.: L02298      |
| License Type: <i>Industrial Radiography – Fixed Location</i>   | Priority: 1              |
| Inspection Date: 3/24/26   | Inspector's initials: CS |
| Inspection No.: 29   | License No.: L02298      |
| License Type: <i>Industrial Radiography – Fixed Location (Security)</i>  | Priority: 1              |
| Inspection Date: 3/24/26   | Inspector's initials: CS |

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|---|--------------------------|
| Inspection No.: 30  | License No.: L06168      |
| License Type: <i>Industrial Radiography at Temporary Jobsites</i> | Priority: 1              |
| Inspection Date: 1/25/23  | Inspector's initials: TH |

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|--|--------------------------|
| Inspection No.: 31   | License No.: L06168      |
| License Type: <i>Industrial Radiography at Temporary Jobsites (Security)</i> | Priority: 1              |
| Inspection Date: 1/25/23   | Inspector's initials: TH |

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|---|--------------------------|
| Inspection No.: 32  | License No.: L03115      |
| License Type: <i>Industrial Radiography at Temporary Jobsites</i> | Priority: 1              |
| Inspection Date: 8/2/23   | Inspector's initials: GH |

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|--|--------------------------|
| Inspection No.: 33   | License No.: L03115      |
| License Type: <i>Industrial Radiography at Temporary Jobsites (Security)</i> | Priority: 1              |
| Inspection Date: 8/2/23  | Inspector's initials: GH |

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|--|--------------------------|
| Inspection No.: 34   | License No.: L05930      |
| License Type: <i>Industrial Radiography at Temporary Jobsites (Security)</i> | Priority: 1              |
| Inspection Date: 4/3/25  | Inspector's initials: AT |

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|--|--------------------------|
| Inspection No.: 35   | License No.: L06462      |
| License Type: <i>Industrial Radiography at Temporary Jobsites (Security)</i> | Priority: 1              |
| Inspection Date: 12/1/25   | Inspector's initials: ES |

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|---|--------------------------|
| Inspection No.: 36  | License No.: L00087      |
| License Type: <i>Industrial Radiography at Temporary Jobsites</i> | Priority: 1              |
| Inspection Date: 3/25/26  | Inspector's initials: GM |

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|--|--------------------------|
| Inspection No.: 37   | License No.: L00087      |
| License Type: <i>Industrial Radiography at Temporary Jobsites (Security)</i> | Priority: 1              |
| Inspection Date: 3/25/26   | Inspector's initials: GM |

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|---|--------------------------|
| Inspection No.: 38  | License No.: L01774      |
| License Type: <i>Industrial Radiography at Temporary Jobsites</i> | Priority: 1              |
| Inspection Date: 2/23/26  | Inspector's initials: SC |

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|---|---------------------------------------|
| Inspection No.: 39  | License No.: L01774                   |
| License Type: <i>Industrial Radiography at Temporary Jobsites (Security)</i>    | Priority: 1                           |
| Inspection Date: 2/23/26  | Inspector's initials: SC              |
| Inspection No.: 40  | License No.: L05930                   |
| License Type: <i>Industrial Radiography at Temporary Jobsites</i>               | Priority: 1                           |
| Inspection Date: 3/17/22  | Inspector's initials: AT              |
| Inspection No.: 41  | License No.: NRC 37-29406-02          |
| License Type: <i>Industrial Radiography at Temporary Jobsites (Reciprocity)</i> | Priority: 1                           |
| Inspection Date: 2/28/24  | Inspector's initials:                 |
| Inspection No.: 42  | License No.: R04100                   |
| License Type: <i>Low-Level Radioactive Waste</i>                                | Priority: 1                           |
| Inspection Date: 3/4/2026   | Inspector's initials: JL, EA, AH & PS |
| Inspection No.: 43  | License No.: R03653                   |
| License Type: <i>Uranium Recovery – in situ</i>                                 | Priority: 1                           |
| Inspection Date: 02/9/2026  | Inspector's initials: AH              |

APPENDIX D

LICENSING CASEWORK

The following licensing actions were reviewed during the IMPEP Review:

|   |                          |
|---|--------------------------|
| Licensing Action No.: 1   | License No.: L04805      |
| License Type: <i>Medical – Therapeutic – Written Directive-required (unsealed) – and Diagnostic</i>   | Action Type: New         |
| Action Date: 1/2/26   | Reviewer's initials: SB  |
| Licensing Action No.: 2   | License No.: L07245      |
| License Type: <i>Medical – Therapeutic – Written Directive-required (unsealed) – and Diagnostic</i>   | Action Type: New         |
| Action Date: 11/21/24   | Reviewer's initials: SH  |
| Licensing Action No.: 3   | License No.: L7304       |
| License Type: <i>Well Logging</i>   | Action Type: New         |
| Action Date: 2/5/26   | Reviewer's initials: SG  |
| Licensing Action No.: 4   | License No.: L07252      |
| License Type: <i>Industrial Radiography at Temporary Jobsites</i>   | Action Type: New         |
| Action Date: 1/8/25   | Reviewer's initials: KS  |
| Licensing Action No.: 5   | License No.: L07285      |
| License Type: <i>Industrial Radiography at Temporary Jobsites</i>   | Action Type: New         |
| Action Date: 10/8/25  | Reviewer's initials: PK  |
| Licensing Action No.: 6   | License No.: L02991      |
| License Type: <i>Service Provider - Decontamination Services, Instrument Calibration, and Waste Disposal Processing &amp; Repackaging; and Research and Development</i> | Action Type: Renewal     |
| Action Date: 8/5/24   | Reviewer's initials: SH  |
| Licensing Action No.: 7   | License No.: L05518      |
| License Type: <i>Service Provider - Decontamination Services</i>  | Action Type: Renewal     |
| Action Date: 3/31/22  | Reviewer's initials: VD  |
| Licensing Action No.: 8   | License No.: L00466      |
| License Type: <i>Medical Broadscope</i>   | Action Type: Amendment   |
| Action Date: 8/14/23  | Reviewer's initials: BRS |

|   |                          |
|---|--------------------------|
| Licensing Action No.: 9   | License No.: L06227      |
| License Type: <i>Medical Broadscope</i>   | Action Type: Amendment   |
| Action Date: 1/15/26  | Reviewer's initials: SH  |
| Licensing Action No.: 10  | License No.: L06358      |
| License Type: <i>Medical – Therapeutic – including Emerging Medical Technologies and Written Directive-required (unsealed) – and Diagnostic</i> | Action Type: Amendment   |
| Action Date:  | Reviewer's initials: CZ  |
| Licensing Action No.: 11  | License No.: L05569      |
| License Type: <i>Accelerator (Financial Assurance Review including Decommissioning Funding Plan)</i>  | Action: Amendment        |
| Action Date: 11/29/23   | Reviewer's initials: BRS |
| Licensing Action No.: 12  | License No.: L04043      |
| License Type: <i>Radiopharmacy</i>  | Action: Amendment        |
| Action Date: 9/13/22  | Reviewer's initials: VD  |
| Licensing Action No.: 13  | License No.: L06961      |
| License Type: <i>Industrial - Portable Gauge</i>  | Action: Amendment        |
| Action Date: 3/15/24  | Reviewer's initials: PK  |
| Licensing Action No.:14   | License No.: L00197      |
| License Type: <i>Industrial - Portable Gauge</i>  | Action: Amendment        |
| Action Date: 3/31/22  | Reviewer's initials: SH  |
| Licensing Action No.: 15  | License No.: L04286      |
| License Type: <i>Well Logging</i>   | Action: Amendment        |
| Action Date: 10/12/23   | Reviewer's initials: KS  |
| Licensing Action No.: 16  | License No.: L02516      |
| License Type: <i>Industrial - Fixed Gauge</i>   | Action: Amendment        |
| Action Date: 2/2/26   | Reviewer's initials: SG  |
| Licensing Action No.: 17  | License No.: L02516      |
| License Type: <i>Industrial Radiography at Temporary Jobsites</i>   | Action: Amendment        |
| Action Date: 3/17/22  | Reviewer's initials: VD  |
| Licensing Action No.: 18  | License No.: L02480      |
| License Type: <i>Industrial - Fixed Gauge</i>   | Action: Amendment        |
| Action Date: 3/13/24  | Reviewer's initials: SH  |

|   |                             |
|---|-----------------------------|
| Licensing Action No.: 19  | License No.: L01869         |
| License Type: <i>Academic Broadscope (Financial Assurance Review including Decommissioning Funding Plan)</i>  | Action Type: Amendment      |
| Action Date: 1/10/23  | Reviewer's initials: SH     |
| Licensing Action No.: 20  | License No.: L00448         |
| License Type: <i>Academic Broadscope (Financial Assurance Review)</i>   | Action: Amendment           |
| Action Date: 11/30/23   | Reviewer's initials: SH     |
| Licensing Action No.: 21  | License No.: L05683         |
| License Type: <i>Academic Broadscope</i>  | Action: Amendment           |
| Action Date: 1/20/26  | Reviewer's initials: BRS    |
| Licensing Action No.: 22  | License No.: L01962         |
| License Type: <i>Academic – Research and Development</i>  | Action: Amendment           |
| Action Date: 1/28/25  | Reviewer's initials: SB     |
| Licensing Action No.: 23  | License No.: L07071         |
| License Type: <i>Medical - Therapeutic – including Written Directive-required (unsealed) – and Diagnostic</i> | Action: Transfer of Control |
| Action Date: 9/23/24  | Reviewer's initials: SH     |
| Licensing Action No.: 24  | License No.: L05524         |
| License Type: <i>Medical - Diagnostic only</i>  | Action: Termination         |
| Action Date: 12/30/23   | Reviewer's initials: SB     |
| Licensing Action No.: 25  | License No.: L05268         |
| License Type: <i>Industrial - Portable Gauge</i>  | Action: Termination         |
| Action Date: 1/15/26  | Reviewer's initials: SG     |
| Licensing Action No.: 26  | License No.: L06955         |
| License Type: <i>Medical - Diagnostic only</i>  | Action: Bankruptcy          |
| Action Date: 11/29/22   | Reviewer's initials: ES     |
| Licensing Action No.: 27  | License No.: RW0219         |
| License Type: <i>LLRW</i>   | Action: Amendment           |
| Action Date: 7/2/24   | Reviewer's initials:        |
| Licensing Action No.: 28  | License No.: R01634         |
| License Type: <i>Uranium Recovery – Waste Tailings Impoundment</i>  | Action: Amendment           |
| Action Date: 7/15/22  | Reviewer's initials:        |