



UNITED STATES
NUCLEAR REGULATORY COMMISSION
REGION I
475 ALLENDALE ROAD
KING OF PRUSSIA, PENNSYLVANIA 19406-1415

April 15, 2005

Alex Haartz, Administrator
State Health Division
Department of Human Resources
505 East King Street
Carson City, NV 89701-4797

Dear Mr. Haartz:

The Nuclear Regulatory Commission (NRC) uses the Integrated Materials Performance Evaluation Program (IMPEP) in the evaluation of Agreement State programs. Enclosed for your review is the draft IMPEP report which documents the results of the Agreement State review held in your Division on March 15-18, 2005. I was the team leader for the Nevada review. The review team's preliminary findings were discussed with Richard Whitley and your staff on the last day of the review. The review team's proposed recommendations are that the Nevada Agreement State program be found adequate to protect public health and safety and compatible with NRC's program.

Nevada has been on monitoring since the 2003 follow-up IMPEP review. The monitoring process is used by NRC to follow the progress of improvement needed in an Agreement State program. Since the follow-up review, quarterly conference calls between your staff and NRC staff were held to discuss Nevada's progress in regard to the performance indicators, Technical Staffing and Training and Status of Materials Inspection Program. The review team noted that the program has improved in a number of areas since the 2003 follow-up review. These program improvements include: establishment of a dedicated fund based on fee revenue, implementation of a new fee schedule, establishment of new positions, hiring of new technical staff, elimination of the inspection backlog, and scheduling of technical training for staff. Based on these improvements and the program's performance during this review, the review team will recommend to the MRB that the period of monitoring of the Nevada Agreement State program be discontinued.

NRC conducts periodic reviews of Agreement State programs to ensure that public health and safety are adequately protected from the hazards associated with the use of radioactive materials and that Agreement State programs are compatible with NRC's program. The process, titled IMPEP, employs a team of NRC and Agreement State staff to assess both Agreement State and NRC Regional Office radioactive materials licensing and inspection programs. All reviews use common criteria in the assessment and place primary emphasis on performance. Three additional areas have been identified as non-common performance indicators and are also addressed in the assessment. The final determination of adequacy and compatibility of each Agreement State program, based on the review team's report, will be made by a Management Review Board (MRB) composed of NRC managers and an Agreement State program manager, who serves as a liaison to the MRB.

A. Haartz
State Health Division

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In accordance with procedures for implementation of IMPEP, we are providing you with a copy of the draft team report for review prior to submitting the report to the MRB. We welcome your comments on the draft report. We request comments within four weeks from your receipt of this letter. This schedule will permit the issuance of the final report in a timely manner that will be responsive to your needs.

The team will review the response, make any necessary changes to the report and issue it to the MRB as a proposed final report. Our preliminary scheduling places the Nevada MRB meeting in the week of May 30, 2005. We will coordinate with you to establish the date for the MRB review of the Nevada report and will provide invitational travel for you or your designee to attend.

NRC has video conferencing capability if it is more convenient for the State to participate through this medium. Please contact me if you desire to establish a video conference for the meeting.

If you have any questions regarding the enclosed report, please contact me at 610-337-5042.

Thank you for your cooperation.

Sincerely,

/RA/

Duncan White, CHP
Regional State Agreements Officer
Division of Nuclear Materials Safety

Enclosure: As stated

cc:
Stanley Marshall, Supervisor
Radiological Health Section

A. Haartz
State Health Division

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INTEGRATED MATERIALS PERFORMANCE EVALUATION PROGRAM
REVIEW OF NEVADA AGREEMENT STATE PROGRAM

March 15 - 18, 2005

DRAFT REPORT

U.S. Nuclear Regulatory Commission

1.0 INTRODUCTION

This report presents the results of the review of the Nevada Agreement State program. The review was conducted during the period of March 15-18, 2005, by a review team comprised of technical staff members from the Nuclear Regulatory Commission (NRC) and the Agreement State of Massachusetts. Team members are identified in Appendix A. The review was conducted in accordance with the "Implementation of the Integrated Materials Performance Evaluation Program and Rescission of a Final General Statement of Policy," published in the Federal Register on October 16, 1997, and the February 26, 2004, NRC Management Directive 5.6, "Integrated Materials Performance Evaluation Program (IMPEP)." Preliminary results of the review, which covered the period September 15, 2001 to March 18, 2005 for the indicators Technical Quality of Inspections and Technical Quality of Licensing and April 11, 2003 to March 18, 2005 for the remaining five performance indicators reviewed were discussed with Nevada management on March 18, 2005.

[A paragraph on the results of the Management Review Board (MRB) meeting will be included in the final report.]

The Nevada Agreement State program is administered by the Radiological Health Section (the Section). The Section is located within the Bureau of Health Protection Services, which is part of the State Health Division. The State Health Division reports to the Department of Human Resources. Within the Section, there are two offices (Carson City and Las Vegas) that are each headed by a supervisor. Both offices have the responsibility for the inspection of radioactive materials licenses and response to radioactive materials incidents. In addition, both offices are responsible for machine produced radiation and mammography. Program management and radioactive material licensing is based in the Carson City office.

Organization charts for the State of Nevada and the Bureau of Health Protection Services are included as Appendix B. The Nevada Agreement program regulates approximately 265 specific licenses authorizing Agreement materials. The review focused on the program as it is carried out under the Section 274b. (of the Atomic Energy Act of 1954, as amended) Agreement between the NRC and the State of Nevada.

In preparation for the review, a questionnaire addressing the common and non-common performance indicators was sent to the State on November 3, 2004. A copy of the official letter and questionnaire can be found on NRC's Agency wide Document Access and Management System (ADAMS) using the Accession Number ML043080251. The State provided a partial response to the questionnaire on March 7, 2004 and a complete response on March 18, 2005. A copy of the State's questionnaire response can be found in ADAMS using the Accession Number ML050810487.

The review team's general approach for conduct of this review consisted of: (1) examination of Nevada's response to the questionnaire; (2) review of applicable Nevada's statutes and regulations; (3) analysis of quantitative information from the Section's licensing and inspection database; (4) technical evaluation of selected licensing and inspection actions; (5) field accompaniments of four Nevada inspectors; and (6) interviews with staff and management to answer questions or clarify issues. The team evaluated the information that it gathered against the IMPEP performance criteria for each common and applicable non-common performance

indicator and made a preliminary assessment of the Nevada Agreement State program's performance.

Section 2 discusses the State's actions in response to previous IMPEP review recommendations and the team's conclusions regarding the closure of those recommendations. Results of the current review for the IMPEP common performance indicators are presented in Section 3. Section 4 discusses results of the applicable non-common performance indicators, and Section 5 summarizes the review team's findings and recommendations. Recommendations made by the review team are comments that relate directly to program performance by the State. A response is requested from the State to all recommendations in the final report.

2.0 STATUS OF ITEMS IDENTIFIED IN THE PREVIOUS REVIEW

During the previous IMPEP review which concluded on September 14, 2001, seven recommendations were made and the results transmitted to Ms. Yvonne Sylva, Administrator, Nevada Health Division on February 26, 2002. During the follow-up IMPEP review, which concluded on April 10, 2003, six of the recommendations from the September 2001 review were closed and two new recommendations were made. The results of the follow-up IMPEP review were transmitted to Ms. Sylva on July 22, 2003. The review team's evaluation of the current status of the recommendations is as follows:

1. The review team recommends that the State, in accordance with the Department of Administration audit report, increase the radioactive materials program staff to meet program needs. (Section 2.1 of the 2003 follow-up report)

Current Status: The Program has been unable to fill four vacancies to increase the radioactive materials program staff in accordance with the Department of Administration audit report. Since some of the circumstances related to the unfilled vacancies and long term staff stability has changed since the last review, the review team is closing this recommendation and will make another recommendation. This matter is discussed in more detail in Section 3.1.

2. The review team recommends that the State provide training to current and future technical personnel, either by formal course work or equivalent, as prescribed by the Division's training policy. (Section 2.1 of the 2003 follow-up report)

Current Status: As a result of the Section increasing their fees and having this revenue retained in a dedicated fund, the Section has adequate revenue to schedule training needed for technical staff. The Section has requested training for one inspector to attend two courses during 2005. In addition, the Bureau has scheduled a transportation course in Las Vegas for all staff in April 2005. The Section has also revised their training procedures to identify additional courses required by staff on an Annual Training Needs Forecast Worksheet. This recommendation is closed.

3. The review team recommends that the Section take appropriate measures to conduct core inspections (including initial inspections) in accordance with the NRC's inspection priority system. (Recommendation 1 from the 2001 report)

Current Status: During the review period, the Section reassigned staff from the x-ray program to aid in addressing the backlog of overdue materials inspections and to complete materials inspections in a timely manner. The review team determined that 6 of the 81 "core" (Priority 1, 2, and 3) and initial inspections conducted by the Section were performed overdue. This represents a significant improvement in performance. This recommendation is closed.

3.0 COMMON PERFORMANCE INDICATORS

IMPEP identifies five common performance indicators to be used in reviewing both NRC Regional and Agreement State 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

Issues central to the evaluation of this indicator include the Section's turnover, as well as the technical qualifications and training histories of the staff. To evaluate these issues, the review team examined the Section's questionnaire response relative to this indicator, interviewed Section management and staff, and considered any possible workload backlogs.

The Section, headed by the Section Chief, regulates approximately 265 specific licenses with 4.0 full time equivalents (FTE) currently assigned to implement the radioactive materials licensing and inspection programs. During the review period, the Section reassigned staff from the x-ray program to aid in addressing the backlog of overdue materials inspections and to complete materials inspections in a timely manner.

As a result of the performance issues identified during the 2001 IMPEP review and a significant budgetary crisis in the State, the Department of Human Resources queried the Governor's office whether the State should continue to administer the radioactive materials program or transfer the responsibility back to the NRC. The Department of Administration performed an audit of the program to answer this question and on March 19, 2003, the audit report was presented to the Executive Branch Audit Committee, chaired by the Governor. Two specific recommendations were made: 1) Raise licensing fees to cover the State's cost and continue administering the program; and 2) Evaluate staffing levels to ensure the program is operating effectively and complies with State and federal requirements. The Health Division responded to the audit report indicating that proposed regulations to increase fees are expected to be presented for adoption by the Nevada State Board of Health on August 15, 2003. The fee increase for the Section's radioactive materials program was approved in March 2004 and went into effect in Nevada's Fiscal Year (FY) 2005 which started July 1, 2004.

During the 2003 Nevada Legislative session, the legislature approved a biannual budget for FY 2004 and 2005. For FY 2004, the budget for the Section included funds from the general fund and approval to increase fees. Since approximately 25% of the Section's budget in FY 2004 involved general funds (in addition to fee revenue), any funds not used by the Section in the FY were returned to the general fund. For FY 2005, the budget included approval for a dedicated fund that the fees would be deposited for the Section's operations. Since the Section's FY 2005 budget included no general funds, any fee revenue collected by the Section and not used

is retained in the Section's dedicated fund and available in the next fiscal year. This change in the Section's funding is significant since it provides funding stability and allows the Section to retain revenue for use at a later time for training and other program expenditures needed to improve the program. For this fiscal year, this was of particular significance since the revenue that was to be used for the salaries of vacant positions can be retained by the Section.

In January 2004, the Nevada Interim Finance Committee approved six new positions for the Section (for radioactive materials, mammography and x-ray programs) and the associated funding support. As a result of these new positions and since the follow-up review, one staff member left the Section and three staff members were hired. Two of new staff members were experienced individuals from other Agreement State programs and are currently in the Las Vegas office. Another experienced individual from Nevada's Department of Environmental Protection was hired as the supervisor of the Carson City office. Four vacancies exist from the new positions created in 2004 and in-house promotions: two vacancies in the Carson City office, and two vacancies in the Las Vegas office.

The Section has not been able to produce successful candidates for the four vacancies due to the current pay structure. The State's pay structure is not competitive to attract qualified individuals due to other employment opportunities available from the US Department of Energy and its contractors and the high cost of living in the Carson City area. The team discussed with Section management a number of different short- and long-term strategies to hire qualified candidates. These include the use of contractors, tuition reimbursement in return for State service, reclassifying current positions to a higher pay scale and use of fee revenue in the dedicated fund to increase salaries. Section management indicates that they have been unsuccessful with some of these strategies in the past, but indicated that recent changes in upper management and the availability of the dedicated fund as possible opportunities for success in the future.

The team also noted that there are a number of current staff in the Section who will be eligible for retirement within the next five years. Without qualified staff entering the program, the team concluded that the experienced staff that retire or leave the Section will likely have a negative impact on the future performance of the radioactive materials program. Section management acknowledged that this is a real concern and that these circumstances emphasize the need to promptly fill the current vacancies. The review team recommends that the State develop and implement a staffing plan to competitively fill current vacancies, meet growing program needs and maintain long-term program stability.

The qualifications of the staff were determined from the questionnaire, training records, and interviews of personnel. The staff is well qualified from an education and experience standpoint. All staff have at least a Bachelor's degree in the sciences, or equivalent training and experience.

Due to budget limitations in FY 2004, training for Section staff virtually halted at the beginning of the review period. The limited amount of the training budget, along with out-of-State travel restrictions, has severely limited the ability of the program to maintain a technically trained staff in accordance with its training policy. With increased fees and a dedicated fund, the Section now has sufficient resources to send individuals out-of-state for training. In response to STP-05-003 "Training Needs Survey," the Section has requested that one of the individuals hired since the last review be registered for two training courses (industrial radiography and inspection procedures). The Section will also address a training issue from the previous review

where it was identified that only one staff member had taken the transportation training course. In April 2005, the Section held a transportation training course (equivalent to the NRC's transportation course) for all technical staff in Las Vegas.

The Section's training policy is similar to the NRC/Organization of Agreement States Training Working Group Report. The policy requires that technical staff complete seven core training courses or equivalent alternatives such as on-the-job training or computer-based training. Five additional training courses are identified in the policy for advanced staff training. Since the last review, the Section has initiated a revision of its training policy and improved documentation of completed training. During the review, the team discussed the revisions with the Carson City and Las Vegas office supervisors including the proposed changes to NRC's Office of State and Tribal Programs (STP) Procedure SA-103 "Reviewing the Common Performance Indicator, Technical Staffing and Training." This project is scheduled to be completed by June 2005.

The team also noted that revision of the training program is part of a larger effort by the Section to revise their policy and procedure manual used for all aspects of the Section's licensing and inspection programs. The team agrees with the Section's assertion that the large number of changes in regulations, particularly for medical licensees, requires a number of procedures be updated. Section management indicated that this project should be finished this year.

The State does not have an advisory board for radiological issues.

Based on the IMPEP evaluation criteria, the review team recommends that Nevada's performance with respect to the indicator, Technical Staffing and Training, be found satisfactory.

3.2 Status of Materials Inspection Program

The team focused on five factors in reviewing this indicator: inspection frequency, overdue inspections, initial inspections of new licensees, the timely dispatch of inspection findings to licensees, and the performance of reciprocity inspections. The review team's evaluation is based on the Section's response to the questionnaire relative to this indicator, data gathered independently from the Section's licensing and inspection data tracking system, the examination of completed licensing and inspection casework, and interviews with staff.

The team found that the Section's inspection priorities require inspections as frequent as those specified in NRC Manual Chapter (MC) 2800 for similar license types, with the exception of intravenous brachytherapy (IVB). MC 2800 specifies a Priority 2 inspection frequency for medical therapy - other emerging technologies, such as IVB, while the Section specifies a Priority 3 inspection frequency. All other licensees are inspected at the frequency specified in MC 2800. Since IVB has been replaced by other medical procedures, the review team concluded that no specific recommendation was needed. Section management inquired if other State programs have used inspection intervals less frequent than the NRC. The review team indicated that a few States do use less frequent inspection frequencies for specific medical modalities, and that these changes were agreed to by the MRB. Section management agreed to consult with STP in the future if they decided to inspect a class of licensees at an inspection interval less frequent than NRC.

In their response to the questionnaire, the Section indicated that no routine inspections were overdue by more than 25 percent of the NRC frequency. The team reviewed lists of information for all inspections conducted and all new licenses issued during the period. The review team found it difficult to review the Section's reports from their database because of the lack of historical data and its reliability. The Section maintains a licensee database that does not retain historical data and thus provides current year data only. At the time of the review, the database was experiencing reliability problems and could not be accessed by the Section in Carson City. The Section management also acknowledged that the Las Vegas office was not linked to the database at this time, but was in the process of having it linked. Due to the database's limitations and reliability problems, the Section had to provide the review team with a handwritten list of current and historical inspection data to evaluate this indicator. The review team also verified the information by conducting a similar file review.

Based on data provided by the Section, the review team determined that the Section has 68 Priority 1, 2 and 3 licensees according to NRC inspection priorities, and that 81 Priority 1, 2 and 3 and initial inspections were due during the review period. Six Priority 1, 2 and 3 inspections were conducted overdue according to MC 2800, four of which were inspections of medical facilities using IVB. This represents a significant improvement in performance for this indicator compared to the two previous reviews.

The review team noted that 49 of the 81 due inspections were initial inspections, all of which were conducted within one year of license issuance. The Section's practice with respect to new licenses is to conduct the initial inspection within six months of license issuance.

The review team identified three inspections of gauge licensees that were overdue at the time of the review and have been open for several years. The Section had attempted to perform these inspections but was now unable to locate the licensees after several attempts. The review team determined that the failure to track these licensees was due to the lack of a policy to handle licensees who have not used licensed material for long periods of time and the limitations in the inspection tracking database, as discussed above. These issues are discussed further in Sections 3.3 and 3.4, respectively.

During the review of selected inspection casework, the team evaluated the Section's timeliness in providing inspection findings to the licensees. The team determined that the Section issued all inspection findings to the licensees within 30 days of the inspection.

To evaluate the reciprocity inspection program, the review team evaluated the inspection files and the Section's response to the IMPEP questionnaire. The review team determined that the Section met and exceeded NRC's criteria of inspecting 20 percent of candidate licensees operating under reciprocity for the review period. The Section conducted 11 inspections of the 39 Priority 1, 2 and 3 reciprocity licensees (28%) who worked in the State during the review period.

Based on the IMPEP evaluation criteria, the review team recommends that Nevada's performance with respect to the indicator, Status of the Materials Inspection Program, be found satisfactory.

3.3 Technical Quality of Inspections

The team evaluated the inspection reports, enforcement documentation, and inspection field notes for 16 radioactive materials inspections conducted during the review period. The casework reviewed included inspections conducted by five current and one former Section inspectors, and covered inspections of various types including medical (diagnostic, therapy, teletherapy, and brachytherapy), fixed and portable gauges, industrial radiography, gamma knife, HDR, academic broad scope, and nuclear pharmacy. Appendix C lists the inspection casework files reviewed for completeness and adequacy with case-specific comments, and the results of the inspector accompaniments

Based on casework reviewed, the review team noted that routine inspections covered all aspects of licensed radiation programs. The review team found that inspection reports were thorough, complete, consistent, and of high quality, with sufficient documentation to ensure that licensees' performance with respect to health and safety was acceptable. The documentation supported violations, recommendations made to licensees, unresolved safety issues, and discussions held with licensees during exit interviews. Team inspections were frequently performed for larger and complex licenses and for training purposes.

The inspection procedures utilized by the Section are generally consistent with the inspection guidance outlined in MC 2800. A Radioactive Materials Inspection Report is completed by the inspector which is then reviewed and signed by a supervisor, generally within a few days of the inspection. Supervisory accompaniments are being conducted annually for all inspectors.

The team determined that the inspection findings were appropriate and prompt regulatory actions were taken, as necessary. The Section normally issues Compliance letters or Notices of Violation (NOV) as it deems appropriate. Violations of minor safety or environmental concerns, which are at or below the level of significance equivalent to NRC's Severity Level IV violation, are documented in the inspection report and generally issued to the licensee as Items of Concern (IOC). The licensee is required to respond to the noted IOC within 30 days. NOVs are routinely issued for licensees with repeat violations and IOC, which are elevated above the IOC level. All inspection findings are clearly stated and documented in the report, and reviewed by the appropriate supervisor and the appropriate Section administrator, before being sent to the licensee with the appropriate letter detailing the results of the inspection.

Three inspectors were accompanied during inspections by a review team member from January 31 to February 2, 2005. The inspectors were accompanied during inspections of nuclear medicine facilities. The accompaniments are identified in Appendix C. During the accompaniments, each inspector demonstrated appropriate performance-based inspection techniques and knowledge of the regulations. The inspectors were well-trained, prepared and thorough in their reviews of the licensees' radiation safety programs. Overall, each inspector conducted effective interviews with appropriate licensee personnel, observed licensed operations, conducted confirmatory measurements, and utilized good health physics practices. Their inspections were adequate to assess radiological health and safety at the licensed facilities.

As discussed in Section 3.2, the team identified three gauge licensees which the Section was tracking as overdue since the Section has been unable to locate the licensees. During the review of inspection casework, the review team identified another gauge licensee inspected by the Section that had not used their licensed material for more than eight years and failed to

maintain inventory records during the most recent inspection. The similarities among the three licensees that the Section was unable to locate and the licensee recently inspected that is not using their material was brought to the attention of the Section. Based on discussions with Section staff and management, the review team concluded that the Section has adequate regulations to enforce timely notification and license termination and ensure proper transfer and disposal of licensed materials, but had not used them in either of the situations. Different strategies were discussed with Section staff to use in these circumstances including enforcement action based on their decommissioning timeliness rule, increased inspection frequencies and higher fees. In addition, the review team indicated that any licensed materials not accounted for in these circumstances should be reported as lost, stolen or abandoned. The review team recommends that the Section revise their inspection procedures and provide training to implement a policy for timely and orderly license termination of licensed materials not in use.

It was noted that the Section has an adequate supply of survey instruments to support the current inspection program. Appropriate, calibrated survey instrumentation such as Geiger Mueller (GM) meters, scintillation detectors, ion chambers, and micro-R meters were observed to be available. The instruments are calibrated at least annually by a commercial calibration service. The Section has portable analytical instruments and has access to a commercial contract laboratory.

Based on the IMPEP evaluation criteria, the review team recommends that Nevada's performance with respect to the indicator, Technical Quality of Inspections, be found satisfactory.

3.4 Technical Quality of Licensing Actions

The review team interviewed license reviewers, evaluated the licensing process, and examined licensing casework for 16 specific licenses. Licensing actions were reviewed for completeness, consistency, proper radioisotopes and quantities, qualifications of authorized users, adequate facilities and equipment, adherence to good health physics practices, financial assurance, operating and emergency procedures, appropriateness of the license conditions, and overall technical quality. The casework files were also reviewed for timeliness, use of appropriate deficiency letters and cover letters, reference to appropriate regulations, product certifications, supporting documentation, consideration of enforcement history, pre-licensing visits, supervisory review as indicated, and proper signatures. The files were checked for retention of necessary documents and supporting data.

The licensing casework was selected to provide a representative sample of licensing actions which were completed during the review period by four different reviewers. The sample included the following types: academic broad scope, gamma knife, research and development, nuclear medicine, high dose afterloaders, and portable gauges. Licensing actions reviewed included five new license applications, three renewals, six amendments, and two terminations. A list of the casework evaluated with case-specific comments can be found in Appendix D.

Overall, the review team found that the licensing actions were thorough, complete, consistent, and of high quality with health and safety issues properly addressed. License tie-down conditions were stated clearly, backed by information contained in the file, and enforceable. The licensee's compliance history was taken into account when reviewing renewal applications and amendments. Deficiency letters clearly state regulatory positions, are used at the proper

time, and identify deficiencies in the licensees' documents. Terminated licensing actions are well-documented, showing appropriate transfer and survey records.

The administrative staff receives and routes all licensing actions primarily to one senior reviewer who assigns actions to the other reviewers. There are no due dates or goals for the completion of licensing actions, however, the review team found that most of the licensing actions were completed within three months after receipt by the Section. New applications and amendments are given priority over renewals. The senior reviewer conducts a cursory review of the renewal applications for the purpose of identifying any program changes that need to be addressed in a more timely manner.

The review team found that the Section's current database system for handling licensing actions consists of a spreadsheet maintained by the senior reviewer. Since the database is not accessible electronically by Section management, it has limitations in terms of a management tool to monitor the status of licensing actions. These limitations were exemplified during the review when the review team found an unprocessed and untracked amendment request dated December 2004 in the license file. Coupled with the difficulties and limitations discussed in Section 3.2 regarding the Section's inspection database, the review team concluded that the existing databases used for inspection and licensing do not provide an effective planning, tracking or management tool for the Section's Carson City and Las Vegas offices. During discussions with Section staff and management, the review team noted that the Section management was working to correct the database problems. Section staff was knowledgeable of successful licensing and inspection databases employed by other States. The review team recommends that the Section develop, implement and maintain a reliable and comprehensive licensing and inspection database that serves as an effective and efficient planning, tracking and management tool.

Based on the IMPEP evaluation criteria, the review team recommends that Nevada's performance with respect to the indicator, Technical Quality of Licensing Actions, be found satisfactory.

3.5 Technical Quality of Incident and Allegation Activities

In evaluating the effectiveness of the Section's actions in responding to incidents, the review team examined the Section's response to the questionnaire relative to this indicator, reviewed the incident reports for Nevada in the Nuclear Material Events Database (NMED) against those contained in the Section's files, and evaluated reports and supporting documentation for eight material incidents. A list of the incident casework examined with case-specific comments is included in Appendix E. The team also reviewed the Section's response to one allegation involving radioactive materials referred to the State by the NRC during the review period.

The incidents selected for review included the event categories of damaged equipment and lost and stolen radioactive material. The review team found that the Section's response to incidents was complete and comprehensive. Initial responses were prompt and well-coordinated, and the level of effort was commensurate with the health and safety significance. The Section dispatched inspectors for on-site investigations when appropriate, and took suitable enforcement and follow-up actions.

The staff member who receives the initial notification has responsibility for initial response and follow-up to the incident. Each incident receives a unique tracking number. Incidents with potential for impacting public safety are evaluated by the Section management in order to determine the appropriate response. Documentation related to an incident is placed in the Section's incident files and includes a cover sheet that summarizes the event and documents supervisory review.

The review team identified 16 radioactive materials incidents during the review period including 11 incidents that required reporting under the NRC criteria. The review team identified one event that occurred in January 2005 that was not reported to the NRC. This event involved a portable gauge damaged at a temporary job site that was subsequently returned to the manufacturer for disposal. After this event was discussed with the Section, they agreed that the event should be reported. The Section reported the event to the NRC on March 18, 2005. Nearly all reportable events involved lost, stolen or damaged portable gauges. Except as noted above, the team found that reportable incidents were appropriately reported to the NRC Operations Center in a timely manner. Appropriate and timely follow-up reports were provided to the NRC contractor maintaining NMED.

During the review period, the Section received one allegation referred to the Section by the NRC. A review of the casework and the file for this allegation indicated that the Section took prompt and appropriate action in response to the concerns raised. The allegation was reviewed and appropriately closed, and the alleged was informed of the results. The team noted that allegations were treated and documented internally in the same manner as incidents. Allegation files are maintained separately. There were no performance issues identified from the review of the casework documentation.

The Nevada public records statute found in Nevada Revised Statutes Section 239.010, requires that records of a governmental entity, the contents of which are not otherwise declared by law to be confidential and must be available for public review. These publicly available records include alleged identities.

Based on the IMPEP evaluation criteria, the review team recommends that Nevada's performance with respect to the indicator, Technical Quality of Incident and Allegation Activities, be found satisfactory.

4.0 NON-COMMON PERFORMANCE INDICATORS

IMPEP identifies four non-common performance indicators to be used in evaluating Agreement State programs: (1) Legislation and Program Elements Required for Compatibility; (2) Sealed Source and Device Evaluation Program; (3) Low-Level Radioactive Waste Disposal Program; and (4) Uranium Recovery Program. Nevada's Agreement does not cover a uranium recovery program, so only the first three non-common performance indicators were applicable to this review.

4.1 Compatibility Requirements

4.1.1 Legislation

Along with their response to the questionnaire, the Section provided the review team with the opportunity to review copies of legislation that affects the radiation control program. Legislative authority to create an agency and enter into an Agreement with the NRC is granted in Nevada Revised Statutes (NRS) Section 459. The Nevada State Health Division is designated as the State's radiation control agency. Other NRS sections that effect the Agreement State program include NRS 439, "Public Health Administrative Procedures" and NRS 414, "Emergency Response." The review team noted that no legislation affecting the radiation control program was passed since being found adequate during the previous review, and the team found that the State legislation is adequate.

4.1.2 Program Elements Required for Compatibility

The Nevada Radiological Health Rules, found in Chapter 459 of the Nevada Administrative Code (NAC), applies to all ionizing radiation, whether emitted from radionuclides or devices. Nevada requires a license for possession, and use, of all radioactive material including naturally occurring materials, such as radium, and accelerator produced radionuclides. Nevada also requires registration of all machines specifically designed to produce x-rays or other ionizing radiation.

The review team examined the procedures used in the State's regulatory process and found that Nevada offers the public the opportunity to comment on proposed regulations and participate in public hearings before the Board of Health. Procedures also require the proposed regulations, and proposed hearing date, be publicized. A written response to all written public comments must be part of the staff presentation to the Board.

The team evaluated Nevada's response to the questionnaire relative to this indicator, reviewed the status of the regulations required to be adopted by the State under the Commission's adequacy and compatibility policy, and verified the adoption of regulations with data obtained from the State Regulation Status Data Sheet as maintained by STP.

Since the follow-up IMPEP review in April 2003, the Section has adopted three regulations by legally binding requirements (i.e., license conditions). The Section provided the license conditions to the NRC for review and there were no comments. The amendments covered by license conditions are:

- "Transfer for Disposal and Manifests: Minor Technical Conforming Amendment," 10 CFR Part 20 (63 FR 50127) that became effective November 20, 1998.
- "Respiratory Protection and Controls to Restrict Internal Exposures," 10 CFR Part 20 (64 FR 54543 and 64 FR 55524) that became effective on February 2, 2000.
- "Energy Compensation Sources for Well Logging and Other Regulatory Clarifications" 10 CFR Part 39 (65 FR 20337) that became effective on May 17, 2000.

Current NRC policy requires that Agreement States adopt certain equivalent regulations or legally binding requirements no later than three years after they are effective. The following two regulations are overdue:

- “Requirements for Certain Generally Licensed Industrial Devices Containing Byproduct Material,” 10 CFR Parts 30, 31, 32 (65 FR 79162) that became effective on February 16, 2001
- “Revision of the Skin Dose Limit,” 10 CFR Part 20 (67 FR 16298) that became effective on April 5, 2002.

The Section has drafted rule text to meet the requirements of these amendments and this drafted rule is currently undergoing legal review in the Department. A preliminary review by the team indicated that the proposed rule language is compatible with the requirements in STP Procedure SA-200. The Section will be sending in the rule text for NRC review, in accordance with STP Procedure SA-201, when their internal review process is complete.

The team also identified three amendments that the Section has incorporated into State regulations, but the rule text has not yet been sent into the NRC for review. A preliminary review by the team indicated that the rule language is compatible with the requirements in STP Procedure SA-200. The Section committed to submit to the NRC the Nevada rule sections covering the following NRC amendments:

- “Decommissioning Recordkeeping and License Termination: Documentation Additions [Restricted areas and spill sites],” 10 CFR Parts 30, 40 (58 FR 39628) that became effective on October 25, 1993
- “Timeliness in Decommissioning Material Facilities,” 10 CFR Parts 30, 40, 70 (59 FR 36026) that became effective on August 15, 1994
- “Resolution of Dual Regulation of Airborne Effluents of Radioactive Materials; Clean Air Act,” 10 CFR Part 20 (61 FR 65120) that became effective on January 9, 1997.

The team identified the following NRC amendments that will be needed in the future. The Section indicated that the regulations would be addressed in upcoming rulemaking or by adopting alternate legally binding requirements:

- “Medical Use of Byproduct Material,” 10 CFR Parts 20, 32, 35 (67 FR 20249) that became effective on November 24, 2002.
- “Financial Assurance for Materials Licensees,” 10 CFR Parts 30, 40, 70 that became effective on December 3, 2003.
- “Compatibility with IAEA Transportation Safety Standards (TS-R-1) and Other Safety Amendments,” 10 CFR Parts 71 amendments (69 FR 3698), that became effective on October 1, 2004.

Based on the IMPEP evaluation criteria, the review team recommends that Nevada’s performance with respect to the indicator, Compatibility Requirements, be found satisfactory.

4.2 Sealed Source and Device (SS&D) Evaluation Program

There are currently three manufacturers/distributors licensed by the Section. Two of the licensees assemble and distribute generally licensed devices in accordance with SS&D registry sheets issued by other Agreement States. The third licensee manufactures gun and bow sights in accordance with an NRC issued SS&D registry sheet and distributes them under an NRC exempt distribution license.

During the review period, no SS&D certificates were issued by the program. The State has indicated to the NRC that they plan to relinquish the authority to regulate SS&D manufacturers to the NRC. The Section has prepared a memorandum for senior Department management and a letter from the Governor to the NRC Chairman requesting the return of the SS&D program to the NRC. These documents were provided in the State's IMPEP questionnaire response. The memorandum and letter are currently with senior Department management for review. Accordingly, the review team did not review this indicator.

4.3 Low-Level Radioactive Waste (LLRW) Disposal Program

The review team focused on five factors in reviewing the LLRW Disposal Program performance indicator: (1) Technical Staffing and Training; (2) Status of Inspection Program; (3) Technical Quality of Inspections; (4) Technical Quality of Licensing Actions; and (5) Technical Quality of Incidents and Allegations Activities. In addition, the team evaluated the qualifications of the technical staff, accompanied two inspectors during the performance of a routine quarterly inspection of the site, reviewed the Section's written procedures and plans, reviewed surveillance and inspection reports, and interviewed the principal inspector assigned to the LLRW project.

The former U.S. Ecology LLRW facility is located in Nye County opened in September 1962, and received radioactive waste for burial until December 31, 1992. The site license expired December 31, 1992, but remained in effect until the licensee completed their obligations specified in their license and regulations.

The former licensee, U.S. Ecology, completed the State-approved closure plan to stabilize the site and establish proper security measures on December 30, 1997. The plan was intended to ensure that the LLRW disposed during the operational phase of the facility continued to remain in a suitable, stable, and safe condition after site closure. Upon completion of the licensee's obligations, the license was transferred to the State of Nevada. The Nevada State Health Division assumed all oversight responsibilities and become the custodian of the site. The site has continuous security.

It is noted that this LLRW site predates the waste site standards adopted in 10 CFR 61. The State has the funding and plans to continue surveillance and necessary repair through inspections and environmental monitoring for 100 years. The State currently owns the 80 acre LLRW site and leases a 400 acre buffer zone surrounding the site from the U.S. Bureau of Land Management (BLM). The 80 acres are divided approximately in half, one-half was used for LLRW disposal, and the other half for hazardous waste disposal, which is still in operation today. The 400 acre buffer zone is leased by the State from the BLM to ensure no land use. The lease expires in 2007.

4.3.1 Technical Staffing and Training

LLRW activities are handled by the Section's staff, under the direction of the Las Vegas Office Supervisor. As required, the Carson City office provides additional review and program management. The basic qualifications for the LLRW program staff are the same as for the RAM program staff, as described in Section 3.1.

4.3.2 Status of Inspection Program

Based on the license issued to the State Health Division for this facility, the State is required to perform quarterly visits. NRC guidance in MC 2800 and MC 2401 require an annual inspection frequency. The team determined that the Section made at least quarterly visits to the facility during the review period.

4.3.3 Technical Quality of Inspections

Site post-closure activities include collecting environmental water samples, taking radiation measurements and inspecting the conditions at the site (e.g., the condition of the security fence and the trench cap). In addition, the Section continues to monitor for radioactivity in groundwater.

The review team evaluated documentation for the on-site inspections and site visits conducted by the Section during the review period. The inspection reports were complete, thorough, and reviewed by the supervisor in Carson City. Appropriate action was taken by the Section if conditions warranted corrective actions. During the review period, this included the repair of a portion of the trench cap with rip-rap that had experienced erosion and the repair of the security fence damaged by construction equipment. Special inspections of the facility were conducted as necessary. For example, after a severe weather event, the Section would inspect the trench cap for erosion.

Supervisory accompaniments of staff that routinely inspects the site are performed on an annual basis as discussed in Section 3.3.

The review team accompanied two inspectors on February 2, 2005 during a routine quarterly inspection of the site. This accompaniment is identified in Appendix C. Inspection activities include radiation surveys and surveys of the site perimeter to observe the condition of the site fence and of the trench cap. The inspectors walked the trench cap to observe signs of erosion and cracks in the cap and to take radiation surveys. Two State engineers also accompanied the inspectors to examine the condition of the rip-rap and the trench cap. During the accompaniments, each of the inspectors demonstrated appropriate inspection techniques and knowledge of the regulations and the license. The inspectors were well-prepared and thorough in their review of the site. The inspection was adequate to assess radiological health and safety and the condition of the site.

4.3.4 Technical Quality of Licensing Actions

Pursuant to NAC 459.822, the license was transferred to the Nevada State Health Division on December 30, 1997. The current license expires in December 2007. No licensing actions were completed during the review period.

The team found through observation and interviews with the Las Vegas staff that applicable NRC guidance documents that support 10 CFR 61 activities, are available and used as needed.

4.3.5 Response to Incidents and Allegations

There were no incidents or allegations pertaining to the LLRW program during the review period.

Based on the IMPEP evaluation criteria, the review team recommends that Nevada's performance with respect to the indicator, Low-Level Radioactive Waste Disposal Program, be found satisfactory.

5.0 SUMMARY

As noted in Sections 3 and 4 above, the review team recommends that Nevada's performance be found satisfactory for all seven performance indicators reviewed. Accordingly, the review team recommends that the Nevada Agreement State program be found adequate to protect public health and safety and compatible with NRC's program and that the next full review take place in approximately four years. The review team also recommends that the period of monitoring of the State be discontinued.

Below is a summary list of recommendations, as mentioned in earlier sections of the report, for evaluation and implementation, as appropriate, by the State.

RECOMMENDATIONS

1. The review team recommends that the State develop and implement a staffing plan to competitively fill current vacancies, meet growing program needs and maintain long-term program stability. (Section 3.1)
2. The review team recommends that the Section revise their inspection procedures and provide training to implement a policy for timely and orderly license termination of licensed materials not in use. (Section 3.2)
3. The review team recommends that the Section develop, implement and maintain a reliable and comprehensive licensing and inspection database that serves as an effective and efficient planning, tracking and management tool. (Section 3.4)

LIST OF APPENDICES

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Appendix B	Nevada Organization Charts
Appendix C	Inspection Casework Reviews
Appendix D	License Casework Reviews
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APPENDIX A

IMPEP REVIEW TEAM MEMBERS

Name	Area of Responsibility
Duncan White, Region I	Team Leader Technical Staffing and Training Technical Quality of Incident and Allegation Activities
Linda McLean, Region IV	Low Level Waste Radioactive Waste Disposal Program Inspector Accompaniments
Toye Simmons, Region III	Technical Quality of Licensing Actions
John Zabko, STP	Compatibility Requirements
Robert Gallagher, Massachusetts	Status of Materials Inspection Program Technical Quality of Inspections Program Inspector Accompaniments

APPENDIX B

NEVADA ORGANIZATION CHARTS

ML050810515 and ML050810582

APPENDIX C

INSPECTION CASEWORK REVIEWS

NOTE: CASEWORK LISTED WITHOUT COMMENT IS INCLUDED FOR COMPLETENESS ONLY.

File No.: 1

Licensee: 21st Century Technology

Inspection Type: Routine

Inspection Date: 4/13/04

License No.: 03-12-0429-01

Priority: 2

Inspector: PS

File No.: 2

Licensee: Sunrise Diagnostic Center

Inspection Type: Routine

Inspection Date: 4/13/04

License No.: 03-12-0395-02

Priority: 2

Inspector: PS

Comment:

The inspector used HDR field notes rather than field notes specific to radiostereotactic radiosurgery; however, all applicable safety issues were adequately addressed.

File No.: 3

Licensee: Bobcat Properties, Inc.

Inspection Type: Routine

Inspection Date: 6/18/03

License No.: 10-11-0275-01

Priority: 5

Inspector: MT

Comment:

Licensed material has been in storage for many years. Section has not pursued enforcement of license termination requirements with the licensee.

File No.: 4

Licensee: Cardinal Health

Inspection Type: Routine

Inspection Date: 2/25/04

License No.: 03-11-0150-01

Priority: 2

Inspector: WY

File No.: 5

Licensee: Cardiovascular Consultants of NV

Inspection Type: Routine

Inspection Date: 3/25/04

License No.: 03-12-0412-01

Priority: 5

Inspector: AH

File No.: 6

Licensee: Davis Labs

Inspection Type: Routine

Inspection Date: 2/10/05

License No.: 00-11-0113-01

Priority: 1

Inspector: RV

File No.: 7

Licensee: Desert Springs Hospital

Inspection Type: Routine

Inspection Date: 3/26/03

License No.: 03-12-0040-01

Priority: 2

Inspector: LF

Comment:

State is performing inspections of medical therapy - other emerging technologies as Priority 3, while Manual Chapter (MC) 2800 has established a priority of 2 for this category of use.

File No.: 8

Licensee: University of Nevada Reno

Inspection Type: Routine

Inspection Date: 6/5/03

License No.: 16-13-0003-07

Priority: 3

Inspector: PS

File No.: 9

Licensee: Mesquite Material Testing

Inspection Type: Routine

Inspection Date: 6/4/03

License No.: 00-11-0511-01

Priority: 5

Inspector: AH

File No.: 10

Licensee: North Vista Hospital

Inspection Type: Routine

Inspection Date: 2/10/05

License No.: 03-12-0291-01

Priority: 3

Inspector: WY

File No.: 11

Licensee: Nucletron Corporation

Inspection Type: Reciprocity

Inspection Date: 8/26/04

License No.: MD-27-035-01

Priority: NA

Inspector: WY

File No.: 12

Licensee: Southwest Geotechnical Consultants

Inspection Type: Routine

Inspection Date: 8/26/03 (attempted)

License No.: 00-11-0313-01

Priority: 5

Inspector: AH

Comment:

Unable to locate licensee, no further follow-up inspection performed.

File No.: 13

Licensee: St. Mary's Regional Medical Center

Inspection Type: Routine

Inspection Date: 1/29/04

License No.: 16-12-0244-01

Priority: 2

Inspectors: PS and LB

Comment:

State is performing inspections of medical therapy - other emerging technologies as Priority 3, while MC 2800 has established a priority of 2 for this category of use.

File No.: 14

Licensee: Summerlin Medical Center

Inspection Type: Routine

Inspection Date: 11/13/02

License No.: 03-12-0388-01

Priority: 3

Inspectors: LF and LB

Comment:

Inspection Field Notes indicated personnel monitoring reports did not include the social security number; however, Notice of Violation cited licensee for not including the date of birth on personnel monitoring reports.

File No.: 15

Licensee: Sunrise Hospital Laboratory

Inspection Type: Routine

Inspection Date: 3/12/03

License No.: 03-12-1325-02

Priority: 5

Inspector: MT

File No.: 16

Licensee: Certified Testing and Consulting Services

Inspection Type: Reciprocity

Inspection Date: 2/24/04

License No.: CA-3941-31

Priority: N/A

Inspector: LB

INSPECTOR ACCOMPANIMENTS

The following inspection accompaniments were made as part of the IMPEP review:

Accompaniment No.: 1

Licensee: Desert Heart Specialists

Inspection Type: Routine

Inspection Date: 1/31/05

License No.: 03-12-0498-01

Priority: 5

Inspector: AH

File No.: 2

Licensee: Insight Mountain Diagnostics

Inspection Type: Routine

Inspection Date: 2/1/05

License No.: 03-12-0268-01

Priority: 3

Inspector: WY

File No.: 3

Licensee: Carson Valley Medical Center

Inspection Type: Routine

Inspection Date: 2/2/05

License No.: 04-12-0440-01

Priority: 3

Inspector: MT

Accompaniment No.: 4

Licensee: Nevada State Health Division (Beatty Site)

Inspection Type: Routine

Inspection Date: 2/1/05

License No.: 13-11-0043-02

Priority: N/A

Inspectors: RV and WY

APPENDIX D

LICENSE CASEWORK REVIEWS

NOTE: CASEWORK LISTED WITHOUT COMMENT IS INCLUDED FOR COMPLETENESS ONLY.

File No.: 1

Licensee: Insight Mountain Diagnostics

Type of Action: Amendment

Date Issued: 11/23/04

License No.: 03-12-0268-01

Amendment No.: 23

License Reviewer: MT

File No.: 2

Licensee: Desert Heart Specialist

Type of Action: Amendment

Date Issued: 7/1/04

License No.: 00-12-0498-01

Amendment No.: 04

License Reviewer: LB

File No.: 3

Licensee: Sunrise Diagnostic Center

Type of Action: Amendment

Date Issued: 4/7/03

License No.: 00-12-0395-02

Amendment No.: 06

License Reviewer: LB

File No.: 4

Licensee: Tahoe Carson Radiology

Type of Action: Amendment

Date Issued: 9/22/04

License No.: 01-12-0524-01

Amendment No.: 02

License Reviewer: MT

File No.: 5

Licensee: Nevada Department of Transportation

Type of Action: Amendment

Date Issued: 4/24/03

License No.: 00-14-0012-01

Amendment No.: 29

License Reviewer: PS

Comment:

Documentation of letter dated 1/13/03 letter listed in license as 1/13/02.

File No.: 6

Licensee: Carson Valley Medial Center

Type of Action: Renewal

Date Issued: 9/7/04

License No.: 04-12-0440-01

Amendment No.: 05

License Reviewer: PS

File No.: 7

Licensee: University of Nevada-Las Vegas

Type of Action: Renewal

Date Issued: 9/29/03

License No.: 03-13-0305-01

Amendment No.: 26

License Reviewer: PS

Comment:

Renewal took 13 months to complete.

File No.: 8

Licensee: Angle Engineering

Type of Action: New

Date Issued: 3/14/05

License No.: 00-11-0569-01

Amendment No.: N/A

License Reviewer: AH

File No.: 9

Licensee: ATC Associates, Inc.

Type of Action: New

Date Issued: 4/12/04

License No.: 00-11-0547-01

Amendment No.: N/A

License Reviewer: MT

File No.: 10

Licensee: Professional Services Industries, Inc.

Type of Action: New

Date Issued: 10/22/03

License No.:

Amendment No.: N/A

License Reviewer: PS

File No.: 11

Licensee: Nevada Cardiology Associates

Type of Action: New

Date Issued: 10/22/04

License No.: 03-12-0559-01

Amendment No.: N/A

License Reviewer: MT

File No.: 12

Licensee: Northwest Radiation Oncology Center

Type of Action: New

Date Issued: 11/19/03

License No.: 03-12-0538-01

Amendment No.: N/A

License Reviewer: LB

File No.: 13

Licensee: Lombardi Research Foundation

Date Issued: 9/16/04

License No.: 16-11-0448-01

Amendment No.: 01

Type of Action: Termination

License Reviewer: LB

File No.: 14

Licensee: Northwest Radiation Oncology Center

Type of Action: Termination

Date Issued: 2/22/05

License No.: 03-12-0538-01

Amendment No.: 01

License Reviewer: LB

File No.: 15

Licensee: University of Nevada-Reno

Type of Action: Amendment

Date Issued: 9/30/04

License No.: 16-13-0003-07

Amendment No.: 29

License Reviewer: LB

Comments:

- a) An amendment request dated 12/13/04 was found in the docket file that was not processed or entered into the licensing database.
- b) Renewal submitted to Section in March 2004 and not assigned for review.

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File No.: 16
Licensee: Barton Memorial Hospital
Type of Action: Amendment
Date Issued: 12/24/03

License No.: 04-12-0440-01
Amendment No.: 04
License Reviewer: LB

APPENDIX E

INCIDENT CASEWORK REVIEWS

NOTE: CASEWORK LISTED WITHOUT COMMENT IS INCLUDED FOR COMPLETENESS ONLY.

File No.: 1

Licensee: Landmark Testing & Engineering
Date of Incident: 11/11/04
Investigation Date: 11/17/04
Type of Incident: Stolen Radioactive Material

License No.: 00-11-0518-01
Incident Log No.: 04-008 (NMED 040816)
Type of Investigation: Site

File No.: 2

Licensee: Geotek, Inc.
Date of Incident: 6/10/04
Investigation Date: 6/10/04
Type of Incident: Stolen Radioactive Material

License No.: 00-11-0384-01
Incident Log No.: 04-003 (NMED 040429)
Type of Investigation: Site and Phone

File No.: 3

Licensee: Kazan and Associates
Date of Incident: 11/14/04
Investigation Date: 11/16/04
Type of Incident: Stolen Radioactive Material

California License No.: 4247-10
Incident Log No.: 04-009 (NMED 040818)
Type of Investigation: Phone

File No.: 4

Licensee: Nevada Department of Transportation
Date of Incident: 11/16/04
Investigation Dates: 11/26/03 - 12/1/03
Type of Incident: Stolen Radioactive Material

License No.: 00-14-0404-01
Incident Log No.: 03-006 (NMED 030942)
Type of Investigation: Site and Phone

File No.: 5

Licensee: Northern Geotech
Date of Incident: 3/2/04
Investigation Date: 3/3/04
Type of Incident: Stolen Radioactive Material

License No.: 00-11-0309-01
Incident Log No.: 04-001 (NMED 040168)
Type of Investigation: Phone

File No.: 6

Licensee: Western Technologies
Date of Incident: 9/10/04
Investigation Date: 9/10/04
Type of Incident: Damaged Equipment

License No.: 00-11-0019-02
Incident Log No.: 04-006 (NMED 040698)
Type of Investigation: Phone

File No.: 7

Licensee: Barrick Goldstrike
Date of Incident: 6/1/04
Investigation Date: 12/12/04
Type of Incident: Lost Radioactive Material

License No.: General License
Incident Log No.: 04-004 (NMED 05006)
Type of Investigation: Site and Phone

File No.: 8

Licensee: Davis Labs

Date of Incident: 1/27/05

Investigation Date: 1/27/05

Type of Incident: Damaged Equipment

License No.: 00-11-0013-02

Incident Log No.: 05-003

Type of Investigation: Phone

Comment:

Event was reported to the Nuclear Regulatory Commission 48 days late.