

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED:

Kansas City University of Medicine and Biosciences
1750 Independence Avenue
Kansas City, MO 64106-1453

REPORT NUMBER(S) 2016001

2. NRC/REGIONAL OFFICE

Region III
U. S. Nuclear Regulatory Commission
2443 Warrenville Road, Suite 210
Lisle, IL 60532-4352

3. DOCKET NUMBER(S)

030-35493

4. LICENSE NUMBER(S)

24-32265-01

5. DATE(S) OF INSPECTION

Dec 19, 2016

LICENSEE:

The inspection was an examination of the activities conducted under your license as they relate to radiation safety and to compliance with the Nuclear Regulatory Commission (NRC) rules and regulations and the conditions of your license. The inspection consisted of selective examinations of procedures and representative records, interviews with personnel, and observations by the inspector. The inspection findings are as follows:

- ☒ 1. Based on the inspection findings, no violations were identified.
- ☐ 2. Previous violation(s) closed.
- ☐ 3. The violation(s), specifically described to you by the inspector as non-cited violations, are not being cited because they were self-identified, non-repetitive, and corrective action was or is being taken, and the remaining criteria in the NRC Enforcement Policy, to exercise discretion, were satisfied.


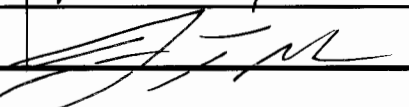
Non-cited violation(s) were discussed involving the following requirement(s):

- ☐ 4. During this inspection, certain of your activities, as described below and/or attached, were in violation of NRC requirements and are being cited in accordance with NRC Enforcement Policy. This form is a NOTICE OF VIOLATION, which may be subject to posting in accordance with 10 CFR 19.11.

(Violations and Corrective Actions)

Statement of Corrective Actions

I hereby state that, within 30 days, the actions described by me to the Inspector will be taken to correct the violations identified. This statement of corrective actions is made in accordance with the requirements of 10 CFR 2.201 (corrective steps already taken, corrective steps which will be taken, date when full compliance will be achieved). I understand that no further written response to NRC will be required, unless specifically requested.

TITLE	PRINTED NAME	SIGNATURE	DATE
LICENSEE'S REPRESENTATIVE			
NRC INSPECTOR	Navid Tehrani		12/19/16
BRANCH CHIEF	Aaron McCraw		1/10/17

Docket File Information

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6. INSPECTION PROCEDURES USED

87126

7. INSPECTION FOCUS AREAS

03.01-03.08

SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM CODE(S)

03620

2. PRIORITY

5

3. LICENSEE CONTACT

Abdulkabi Agbas, PhD - RSO

4. TELEPHONE NUMBER

(816) 283-2000

- ☒ Main Office Inspection
☐ Field Office Inspection
☐ Temporary Job Site Inspection

Next Inspection Date: 12/19/2021

PROGRAM SCOPE

This was an unannounced, routine inspection of an academic research program. One individual was listed as an authorized user for millicurie quantities of S-35, P-32, P-33, and H-3. Three laboratories and one storage area in the University's research building were approved for use or storage of radioactive materials. The University's primary users of radioactive materials as well as the previous Radiation Safety Officer (RSO) left the licensee's employment in 2010.

At the time of the inspection, no licensed materials were in use, and only one authorized user possessed any radioactive material: microcurie quantities of H-3 that had been last used in the Summer of 2010. All licensed material was required to be ordered through the RSO, who verified that the amount and proposed use had been approved prior to ordering. Deliveries of radioactive materials were made to the RSO, who then delivered the materials to the specific laboratory. The licensee has started the decommission process to comply with the 24-month decommissioning rule. The licensee has consolidated the limited amount of material into one secured location. The inspector verified that the labs that previously contained licensed material have been decommissioned and that no licensed material is currently being stored there.

Interviews conducted with available staff revealed an adequate level of understanding of emergency and materials handling procedures and techniques. The licensee possessed two survey meters that were operational and performed well in side-by-side comparison with an NRC survey meter. The licensee conducted periodic wipe samples for contamination and analyzed them in a liquid scintillation counter at frequencies recommended by NUREG-1556 Volume 7. The licensee also maintained records of uses of licensed material, disposal of materials to the sanitary sewer, and disposal of waste materials by decay-in-storage (DIS).

The inspector observed that all licensed material was adequately secured and not readily accessible to members of the general public. Independent measurements did not indicate readings in excess of Title 10 of the Code of Federal Regulations (10 CFR) Part 20 limits in restricted or unrestricted areas. The licensee had performed an assessment and determined that dosimetry badges were not required to be worn by researchers or staff members.

No violations of NRC requirements were identified during this inspection.