



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

February 15, 2019

Dr. Cameron Goodwin, Director
Rhode Island Nuclear Science Center
16 Reactor Road
Narragansett, RI 02882-1165

SUBJECT: RHODE ISLAND ATOMIC ENERGY COMMISSION – U.S. NUCLEAR
REGULATORY COMMISSION ROUTINE INSPECTION REPORT
NO. 05000193/2018203

Dear Dr. Goodwin:

From January 15-17, 2019, the U.S. Nuclear Regulatory Commission (NRC) conducted an inspection at the Rhode Island Nuclear Science Center reactor facility. The enclosed report documents the inspection results which were discussed on January 17, 2019, with you and members of your staff.

The inspection examined activities conducted under your license, as they relate to public health and safety, by confirming compliance with the Commission's rules and regulations and with the conditions of your license. Within these areas, the inspection consisted of selected examination of procedures and representative records, observations of activities, and interviews with personnel. Based on the results of this inspection, no findings of non-compliance were identified. No response to this letter is required.

In accordance with Title 10 of the *Code of Federal Regulations*, Section 2.390, "Public inspections, exemptions, requests for withholding," a copy of this letter, its enclosure, and your response (if any) will be available electronically for public inspection in the NRC Public Document Room or from the NRC's document system (Agencywide Documents Access and Management System (ADAMS)). ADAMS is accessible from the NRC Web site at <http://www.nrc.gov/reading-rm/adams.html> (the Public Electronic Reading Room).

Should you have any questions concerning this inspection, please contact Mr. Michael Takacs at (301) 415-2042 or electronic mail at Michael.Takacs@nrc.gov.

Sincerely,

/RA/

Anthony J. Mendiola, Chief
Research and Test Reactors Oversight Branch
Division of Licensing Projects
Office of Nuclear Reactor Regulation

Docket No. 50-193
License No. R-95

Enclosure:
As stated

cc: See next page

cc:

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Test, Research and Training
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SUBJECT: RHODE ISLAND ATOMIC ENERGY COMMISSION – U.S. NUCLEAR
REGULATORY COMMISSION ROUTINE INSPECTION REPORT
NO. 05000193/2018203 DATE: FEBRUARY 15, 2019

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U.S. NUCLEAR REGULATORY COMMISSION
OFFICE OF NUCLEAR REACTOR REGULATION

Docket No.: 50-193

License No.: R-95

Report No.: 05000193/2018203

Licensee: Rhode Island Atomic Energy Commission

Facility: Rhode Island Nuclear Science Center Research Reactor

Location: Narragansett, Rhode Island

Dates: January 15-17, 2019

Inspector: Michael Takacs

Approved by: Anthony J. Mendiola, Chief
Research and Test Reactors Oversight Branch
Division of Licensing Projects
Office of Nuclear Reactor Regulation

Enclosure

EXECUTIVE SUMMARY

Rhode Island Atomic Energy Commission
Rhode Island Nuclear Science Center Reactor Facility
NRC Inspection Report No. 05000193/2018203

The primary focus of this announced, routine inspection was the onsite review of selected aspects of the Rhode Island Atomic Energy Commission's (RIAEC or the licensee's) Class I, 2 megawatt research reactor safety program including: (1) operator licenses, requalification, and medical examinations; (2) experiments; (3) organization and operations and maintenance activities; (4) review and audit and design change functions; (5) procedures; (6) fuel movement; (7) surveillance; and (8) emergency preparedness. The review covered from the date of the last U.S. Nuclear Regulatory Commission (NRC) inspection of these areas to the present. The licensee's program was acceptably directed toward the protection of public health and safety and in compliance with the NRC requirements.

Operator Licenses, Requalification, and Medical Examinations

- Operator requalification was being completed as required by the licensee's Operator Requalification Program.
- Operators were receiving their biennial medical examinations as required.

Experiments

- The program for reviewing, authorizing, and conducting experiments satisfied technical specification (TS) and procedural requirements.

Organization and Operations and Maintenance

- Organizational structure and staffing was consistent with TS requirements
- Operational activities were consistent with applicable TS and procedural requirements.
- Maintenance activities were conducted in accordance with TS and procedural requirements

Review and Audit and Design Change Functions

- The Nuclear and Radiation Safety Committee (NRSC) was meeting as required and reviewing the topics outlined in the TS. Audits were being completed as required.
- Facility modifications and procedure changes were being evaluated in accordance with the requirements specified in Title 10 of the *Code of Federal Regulations* (10 CFR), Section 50.59, "Changes, test and experiments."

Procedures

- The procedural review, revision, and implementation program satisfied the requirements of TS.

Fuel Movement

- Fuel movements were conducted in accordance with TS and procedural requirements.
- Fuel inspections were being completed annually as required.

Surveillance

- The surveillance program was conducted in accordance with TS and procedural requirements.

Emergency Preparedness

- The licensee maintained an effective emergency preparedness program through implementation of the emergency plan (E-Plan) and the associated implementing procedure.
- Drills and exercises were being conducted along with follow-up critiques in support of staff training.

REPORT DETAILS

Summary of Facility Status

The licensee's Rhode Island Nuclear Science Center (RINSC) Class I, 2 megawatt research reactor continued to be operated in support of research, development, education, training, and surveillance. During the inspection, the reactor was operated in support of this inspection.

1. Operator Licenses, Requalification, and Medical Examinations

a. Inspection Scope (Inspection Procedure (IP) 69003)

The inspector reviewed selected aspects of the following to ensure compliance with the licensee's operator requalification program outlined in RINSC Administrative Procedure (AP)-02, "Reactor Operator Requalification," Revision (Rev.) 4:

- Reactor Logbook Numbers (Nos.) 63 and 64
- Individual reactor operator (RO) and senior reactor operator (SRO) requalification files containing copies of the following:
 - Operator Requalification Program Checklist Nuclear Science Center (NSC) form (NSC-45)
 - Annual Operational Requalification Exam forms
 - Biennial Operator Requalification Examinations
 - Letters from the NRC to the licensed operators documenting the issuance of an RO or SRO license
- Copy of each RO and SRO biennial NRC Form 396, "Certification of Medical Examination by Facility Licensee"
- American National Standards Institute/American Nuclear Society-15.4-2016, "Selection and Training of Personnel for Research Reactors," Section 7, "Medical certification and monitoring of licensed personnel"

b. Observations and Findings

A review of the logs and records showed that training was being conducted in accordance with the licensee's requalification and training program. Procedure reviews and examinations had been documented as required. Information regarding facility changes and other relevant information had been routed to all licensed operators who then acknowledged their review of this information.

The inspector verified that quarterly reactor operations, reactivity manipulations, and reactor supervisor activities were being completed as required, and the appropriate records were being maintained. All these activities were tracked, documented, and signed off by the Reactor Supervisor. The inspector noted that the maintenance board was also being utilized to track the requalification status for all licensed personnel.

Records indicating the successful completion of the annual operations tests (i.e., core shutdown margin, core excess reactivity, and reactivity worth of shim safety blades and the regulating rod) and supervisory observations were also maintained. Biennial written exams were also being administered to the qualified

operators as well. All operators were current and had completed those tests and exams. The inspector also noted that all operators were receiving biennial medical examinations within the allowed time frame as required. The inspector determined that the program was being maintained up-to-date.

c. Conclusion

Operator training and requalification was being conducted in accordance with the licensee's Operator Requalification Program. Operators were receiving their biennial medical examinations as required.

2. Experiments

a. Inspection Scope (IP 69005)

The inspector reviewed selected aspects of the following to verify that the licensee was in compliance with TS Sections 3.1, 3.8, 4.1, 4.8, and 4.9:

- Reactor Logbook Nos. 63 and 64
- Operating Data Notebooks for 2018 containing completed copies of the following:
 - Reactor Operations Request forms (NSC-49)
 - Pre-Start Checkout forms Operating Procedure (OP-02)
 - Shift Record Data Sheets (NSC-11)
 - RINSC Reactor Operations Data sheets (NSC-18)
 - Shutdown Check Sheets (NSC-1C)
- Experiment approval, authorization, administrative controls and precautions documented on the appropriate forms including:
 - Reactor Experiment Request forms (NSC-42)
 - Reactor Experiment Approval forms (NSC-47)
 - Reactor Operation Request forms (NSC-49)
 - Reactor Experiment Screen forms (NSC-24)
- Various RINSC Experiment Procedures (XP) including:
 - XP-01, "Reactor Experiment Request," Rev. 3
 - XP-02, "Reactor Experiment Approval," Rev. 6
 - XP-03, "Rabbit Irradiations," Rev. 2
 - XP-04, "In core Irradiations," Rev. 2
 - XP-10, "Dry Irradiation Facility Irradiations," Rev. 1
 - XP-12, "Gamma Tube Irradiations," Rev. 2

b. Observations and Findings

Since the last inspection in this area, three new experiments had been approved and three previously approved experiments had been revised. The inspector verified that each of the experiment proposals included a discussion of the proposed experiment, as well as the hazards involved and the anticipated results. The experiments had been reviewed by the reactor staff and were subsequently reviewed and approved by the NRSC as required.

The inspector verified that the appropriate irradiation request forms for the various experiments were completed and approved as required prior to reactor

operations. The inspector also noted that all experiments were being conducted using approved methods and with the cognizance of the SRO on duty in accordance procedural requirements. The experiments were documented on the appropriate forms and in the operations log as required. Engineering and radiation protection controls were implemented as required to limit exposure of the workers handling the irradiated samples.

c. Conclusion

The program for reviewing, authorizing, and conducting experiments satisfied the TS and procedural requirements.

3. Organization and Operations and Maintenance Activities

a. Inspection Scope (IP 69006)

To verify that the licensee was complying with the requirements for organization and staffing, operations, and maintenance activities (as specified in TS Sections 2.0, 3.0, 6.1, and procedural requirements), the inspector reviewed selected aspects of the following:

- RINSC organizational structure and staffing
- Reactor Logbook Nos. 63 and 64
- Listing of the members of the RIAEC
- Listing of the members of the RINSC NRSC
- Reactor operations documented on the following:
 - Selected Reactor Operations Request forms (NSC-49)
 - Selected RINSC Reactor Operations Data forms (NSC-18)
 - Selected Shift Record Data Sheet forms (NSC-11)
 - Selected Shutdown Check Sheet forms (NSC-1C)
- RINSC Annual Report for the period from July 1, 2016, through June 30, 2017
- RINSC Annual Report for the period from July 1, 2017, through June 30, 2018
- Various RINSC OP including:
 - OP-01, "Reactor Operation Request," Rev. 2
 - OP-02, "RINSC Pre-Start Checkout," Rev. 19
 - OP-03, "Reactor Power Changes," Rev. 8
 - OP-04, "Abnormal Procedures," Rev. 4
- RINSC Maintenance Board
- Maintenance notebook and associated documents including:
 - RINSC Emergency Generator Maintenance Checklist forms (NSC-44)
 - Alarm, Scram, and Interlock Check Sheet forms (NSC-1A)
 - Completion of Testing Reactor Parameters forms (NSC-43)

b. Observations and Findings

(1) Organization

The inspector reviewed the facility organization and staffing. The organization had not changed since the last inspection and continued to

be staffed as required. The Director continued to have responsibility for all activities in the facility as stipulated in TS. During reactor operations, a licensed SRO was assigned with the responsibility for all activities. The organizational structure at the facility was in compliance with TS.

The inspector noted that there were three SROs and two ROs on staff at the facility. The inspector verified that the reactor operational staffing met the TS requirements.

(2) Operations

The inspector reviewed various forms that were required to be completed to document reactor operations. The inspector also reviewed reactor logbook entries to verify compliance with staffing requirements of TS Subsections 6.1.2 and 6.1.3, and the recordings of two TS required parameters (i.e., reactor power and primary coolant temperature). It was noted that appropriate documentation was being maintained and that shift staffing was maintained as required by TS. In addition, TS required parameters were within normal operating range during reactor operations.

The inspector observed a reactor start-up in support of this inspection. Two SROs were assigned for this operation. The reactor operation was conducted in an appropriate manner and in accordance with licensee procedures.

(3) Maintenance

The inspector reviewed the licensee's tracking mechanism for maintenance activities. The inspector verified that the activities being tracked were completed in accordance with TS and licensee procedures. The maintenance records indicated that preventive maintenance activities were completed as required and that routine maintenance activities were conducted at the required frequencies and in accordance with the TS and/or the applicable maintenance procedure.

c. Conclusion

The organizational structure was in compliance with the TS requirements. The present staffing level appeared to be adequate for current conditions. Reactor operations and maintenance activities were conducted in accordance with the applicable procedures and were acceptable.

4. Review and Audit and Design Change Functions

a. Inspection Scope (IP 69007)

The inspector reviewed selected aspects of the following with respect to the review and audit program and design change activities to ensure compliance with TS Section 6.2:

- NRSC Charter, Rev. 5, approval dated September 11, 2017
- NRSC meeting minutes, dated December 11, 2017, and December 19, 2018
- Forms NSC-24, "10 CFR 50.59 screen" and NSC-51, "10 CFR 50.59 review" for the latest proposed modifications or changes to the facility and/or procedures
- RINSC AP-03, "Facility Modifications," Rev. 2
- RINSC Annual Report for the period from July 1, 2016, through June 30, 2017
- RINSC Annual Report for the period from July 1, 2017, through June 30, 2018

b. Observations and Findings

(1) Review and Audit Functions

The inspector reviewed the NRSC meeting minutes and associated records for December 2017 and 2018. The minutes and records showed that meetings were being held and safety reviews and audits were conducted by various members of the NRSC or other designated persons as required, and at the required frequency. Topics of these reviews and audits were consistent with the TS requirement, which is to provide guidance, direction, and oversight for the facility, and acceptable use of the reactor.

(2) Design Change Functions

The inspector assessed the 10 CFR 50.59 review process used at the facility. It was noted that the licensee's procedure governing design changes provided guidance concerning the review of facility modifications and changes to procedures using the 10 CFR 50.59 review and evaluation process. Also, screening forms were used to determine whether or not a full 10 CFR 50.59 review and evaluation was required for any change being contemplated.

Through review of records and interviews with licensee personnel, the inspector determined that no changes had been proposed for the facility.

c. Conclusion

The NRSC was meeting as required and reviewing the topics outlined in the TS. Audits were being completed as required. Design change procedures and records were maintained up to date as required by the TS.

5. Procedures

a. Inspection Scope (IP 69008)

To verify that facility procedures were being prepared, reviewed, revised, and implemented as required by TS Section 6.4, the inspector reviewed selected aspects of:

- Reactor Logbook Nos. 63 and 64
- Reviewed various procedures including:
 - RINSC Calibration Procedure-04, "Alarm, Scram, and Interlock Checks," Rev. 10, NRSC approval dated August 10, 2017
 - RINSC Maintenance Procedure (MP), MP-05, "Emergency Generator Maintenance," Rev. 1, NRSC approval dated May 30, 2017
 - RINSC MP-06, "Cooling System Annual Inspection and Maintenance," Rev. 0, NRSC approval dated September 5, 2018
- NRSC meeting minutes, dated December 11, 2017, and December 19, 2018

b. Observations and Findings

Procedures had been developed for the safe, routine operation of the reactor. The inspector verified that substantive procedural changes, as well as all new procedures, were being screened in accordance with the licensee's 10 CFR 50.59 process. Following that, the procedures were reviewed and approved by the NRSC as required by the TS. Through observation of various activities at the facility, including reactor operation, the inspector determined that licensee personnel conducted activities in accordance with applicable procedures.

From the previous inspection, it was noted that many procedures needed to be revised to reflect the proper TS references and, in some cases, revised requirements that are now applicable. Most procedures had been revised as of the date of the last inspection, however, some still needed to be reviewed and approved. This issue was being tracked by the NRC as an Inspection Follow-up Item (IFI) and referenced as IFI 50-193/2017-202-01. Through interview with licensee staff and review of records, the inspector verified that all remaining procedures have now been revised and approved.

c. Conclusion

The procedural review, revision, and implementation program satisfied the TS requirements. All remaining procedures have now been revised and approved. Therefore IFI 50-193/2017-202-01 is now resolved and closed.

6. **Fuel Movement**

a. Inspection Scope (IP 69009)

The inspector reviewed the following to verify compliance with TS Subsections 4.9.2 and 6.8.1, which require visual inspection of fuel elements every 5 years on a rotating basis and maintenance of records associated with fuel inventories and transfers, respectively:

- Reactor Logbook Nos. 63 and 64
- RINSC, IP-01, "Core Element Movement and Inspection," Rev. 2
- RINSC, OP-05, "Reactor Fuel/Reflector Movement," Rev. 3
- Reactor Data notebook containing the fuel element inspection sheets and the rotating inspection schedule for inspecting the elements

b. Observations and Findings

The inspector reviewed the licensee's fuel handling procedure and verified that fuel was inspected in accordance with a specific inspection schedule. The inspector reviewed documentation of selected fuel movements and interviewed licensee staff about the process. A plan for each series of fuel movements was developed prior to the activity and used for core refueling, core rearrangement, and performing inspections of fuel elements. It was noted that fuel inspections had been completed as scheduled in 2017 and 2018, and that the inspection documents contained descriptions of fuel conditions including discolorations and markings. It was also noted that the fuel handling equipment was properly stored and secured.

c. Conclusion

Fuel movements were conducted in accordance with written procedures that met the TS requirements. Fuel inspections were being completed annually as required.

7. Surveillance

a. Inspection Scope (IP 69010)

The inspector reviewed the following to verify compliance with the limiting conditions for operation specified in TS Sections 3.1 through 3.9 and to determine if periodic surveillance tests of selected safety systems were performed as stipulated in TS Sections 4.1 through 4.9:

- RINSC Maintenance Board
- Reactor Data Notebook and associated records documenting various surveillance items
- RINSC Annual Report for the period from July 1, 2016, through June 30, 2017
- RINSC Annual Report for the period from July 1, 2017, through June 30, 2018
- Confinement System notebook and associated documents
- Primary Water Analysis notebook and associated documents
- Secondary Water Analysis notebook and associated documents
- Instrumentation Calibration notebook and associated documents including:
 - Nuclear Instrument calibration forms
 - Calibration forms of various monitors
- Various RINSC Reactor Parameter Testing Procedures (TP) including:
 - TP-01, "Shim Safety Rod Drop Time Measurement," Rev. 2
 - TP-03, "Control Rod Reactivity Worths," Rev. 1
 - TP-04, "Control Rod Reactivity Insertion Rates," Rev. 3
 - TP-05, "Determining Shutdown Margin and Excess Reactivity," Rev. 0

b. Observations and Findings

The inspector reviewed various surveillance records including nuclear instrumentation calibration forms, shim safety blade inspection forms, reactivity

worth calculation forms, and alarm, scram, and interlock check sheets. The inspector noted that data recorded in the reactor logbooks and on the surveillance data sheets indicated that system and instrument calibrations had been completed on schedule and in accordance with licensee procedures. The inspector observed the TS required testing of the facility evacuation system by licensee staff and noted that the test was successfully completed and performed in accordance with the associated facility evacuation test procedure.

c. Conclusion

The surveillance program was being conducted as specified by TS requirements.

8. Emergency Preparedness

a. Inspection Scope (IP 69011)

The inspector interviewed staff members and reviewed various documents to verify compliance with regulatory requirements and the RINSC E-Plan Rev. 6:

- Emergency Preparedness Notebook containing documentation of various activities including:
 - Fire Alarms Tests
 - Completion of annual Emergency Supply Inventories documented on Form NSC-83
 - Emergency training and drills conducted during the past year
 - Emergency Communication Tests conducted with various support agencies
- RINSC Emergency Procedure-01, "Emergency Plan Implementing Procedures," Rev. 4, dated January 17, 2017
- Letter of Agreement between Narragansett Police Department and RINSC, signed by Mr. M. J. Davis and by Chief S. Corrigan, dated December 6, 2017
- Letter of Agreement for Medical Services, signed by L. Sivaprasad, MD, Vice President of Medical Affairs and Chief Medical Officer, Rhode Island Hospital, addressed to Dr. C. Goodwin, RIAEC, dated October 4, 2018
- Letter of Agreement between Narragansett Fire Department and RINSC, signed by Mr. M. J. Davis and Chief S. Partington on December 6, 2017

b. Observations and Findings

The inspector reviewed the E-Plan in use at the reactor and verified that it was being reviewed and updated biennially as required. The inspector also reviewed the associated implementing procedures and noted that they were also reviewed biennially and revised as needed.

Through records review, including the recent annual drill report referencing the drill conducted on November 16, 2018, as well as interviews with licensee personnel, the inspector determined that staff were knowledgeable of the proper actions to take in case of an emergency. Training for licensee personnel was accomplished annually, typically following the evacuation and emergency drill. Emergency and evacuation drills were conducted annually as required by the E-Plan. Training for offsite support organizations (i.e., police and fire

departments) was provided whenever those organizations were available and/or when requested by the organization.

The inspector verified that the Letters of Agreement between the RINSC facility and the Narragansett Police Department and Narragansett Fire Department remained in effect. These agreements stipulated that police and fire personnel would respond during an emergency and would provide support for the facility. The inspector also verified that the agreement between the reactor facility and Rhode Island Hospital was current. That agreement ensured that the hospital would provide RINSC personnel with needed support in case a staff member became contaminated and needed emergency medical care.

Communications capabilities with support groups were acceptable and the various items of equipment (e.g., telephones and the building public address system) were in use daily. Portable radios were also available for use as needed and were checked annually. Emergency call lists had been revised and were available in the control room and in various areas around the facility as required, as well as in the Emergency Support Center. The call list was being updated annually as required.

The inspector visited the facility Emergency Support Center located in a nearby building and observed that the emergency supplies, instruments, and information maintained inside the locked emergency cabinet was complete and in accordance with the E-Plan. The inspector also reviewed the records indicating that the emergency supplies were inventoried on an annual basis as part of the surveillance program required by the E-Plan. No problems or deficiencies were noted.

c. Conclusion

The licensee maintained an effective emergency preparedness program through implementation of the E-Plan and the associated implementing procedure.

10. Exit Interview

The inspector presented the inspection results to licensee management and staff at the conclusion of the inspection on January 17, 2019. The inspector reiterated the areas inspected and discussed the inspection observations. The licensee acknowledged the results of the inspection and did not identify as proprietary any of the material provided to or reviewed by the inspector during the inspection.

PARTIAL LIST OF PERSONS CONTACTED

Licensee Personnel

C. Goodwin	Director of RINSC, and SRO
J. Davis	Assistant Director for Operations and SRO
P. Martin	Reactor Supervisor and SRO
M. Marrapese	Principle Reactor Operator

INSPECTION PROCEDURES USED

IP 69003	Class I Research and Test Reactor Operator Licenses, Requalification, and Medical Examinations
IP 69005	Class I Research and Test Reactor Experiments
IP 69006	Class I Research and Test Reactors Organization and Operations and Maintenance Activities
IP 69007	Class I Research and Test Reactor Review and Audit and Design Change Functions
IP 69008	Class I Research and Test Reactor Procedures
IP 69009	Class I Research and Test Reactor Fuel Movement
IP 69010	Class I Research and Test Reactor Surveillance
IP 69011	Class I Research and Test Reactor Emergency Preparedness

ITEMS OPENED, CLOSED, AND DISCUSSED

Opened

None

Closed

IFI 50-193/2017-202-01	Follow-up on the licensee's actions to revise those procedures that needed to be revised to reflect the proper TS references that are now applicable as a result of the newly issued TS.
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LIST OF ACRONYMS USED

10 CFR	Title 10 of the <i>Code of Federal Regulations</i>
AP	Administrative Procedure
E-Plan	Emergency Plan
IFI	Inspection Follow-Up Item
IP	Inspection Procedure
MP	Maintenance Procedure
Nos.	Numbers
NRC	U.S. Nuclear Regulatory Commission
NRSC	Nuclear and Radiation Safety Committee
NSC	Nuclear Science Center
OP	Operating Procedure
Rev	Revision
RIAEC	Rhode Island Atomic Energy Commission
RINSC	Rhode Island Nuclear Science Center
RO	Reactor Operator
SRO	Senior Reactor Operator
TP	Testing Procedure
TS	Technical Specification(s)
XP	Experiment Procedure