

December 28, 2007

Mr. Ward L. Rigot  
Facility Director/Reactor Supervisor  
The Dow Chemical Company  
1602 Building  
Midland, MI 48667

SUBJECT: DOW CHEMICAL COMPANY - NRC ROUTINE INSPECTION REPORT NO. 50-264/2007-201

Dear Mr. Rigot:

This letter refers to the inspection conducted on December 3-6, 2007, at The Dow Chemical Company TRIGA Research Reactor. The inspection included a review of activities authorized for your facility. The enclosed report presents the results of this inspection.

The inspection examined activities conducted under your license as they relate to safety and compliance with the Commission's rules and regulations and with the conditions of your license. The inspector reviewed selected procedures and records, observed activities, and interviewed personnel. Based on the results of this inspection, no findings of significance were identified.

In accordance with 10 CFR 2.390 of the NRC's "Rules of Practice," a copy of this letter and its enclosure will be made available electronically for public inspection in the NRC Public Document Room or from the NRC's document system (ADAMS), accessible from the NRC Web site at <http://www.nrc.gov/reading-rm/adams.html>.

Should you have any questions concerning this inspection, please contact Mr. Kevin M. Witt at 301-415-4075.

Sincerely,

**/RA/**

Johnny Eads, Branch Chief  
Research and Test Reactors Branch B  
Division of Policy and Rulemaking  
Office of Nuclear Reactor Regulation

Docket No. 50-264  
License No. R-108

Enclosure: NRC Inspection Report No. 50-264/2007-201

cc w/encl. Please see next page

The Dow Chemical Company

Docket No. 50-264

cc:

Office of the Mayor  
333 West Ellsworth  
Midland, MI 48640

Office of the Governor  
Room 1 - Capitol Building  
Lansing, MI 48913

Alex Pollock  
Chair, Radiation Safety Committee  
2030/410 Dow Center  
Midland, MI 48674

Dr. Kevin Hool, Level 1 Manager,  
The Dow Chemical Company  
1897 Building  
Midland, MI 48667

Test, Research, and Training  
Reactor Newsletter  
University of Florida  
202 Nuclear Sciences Center  
Gainesville, FL 32611

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ACCESSION NO.: ML073541382

TEMPLATE #: NRR-106

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

Docket No: 50-264

License No: R-108

Report No: 50-264/2007-201

Licensee: The Dow Chemical Company

Facility: TRIGA Research Reactor

Location: Midland, Michigan

Dates: December 3-6, 2007

Inspector: Kevin M. Witt

Approved by: Johnny Eads, Branch Chief  
Research and Test Reactors Branch B  
Division of Policy and Rulemaking  
Office of Nuclear Reactor Regulation

## EXECUTIVE SUMMARY

The Dow Chemical Company  
TRIGA Research Reactor  
Inspection Report No. 50-264/2007-201

The primary focus of this routine, announced inspection included onsite review of selected aspects of the licensee's Class II research and test reactor safety programs including: organization and staffing, procedures, experiments, health physics, design changes, committees, audits and reviews, and inspection of transportation activities.

The licensee's programs were acceptably directed toward the protection of public health and safety, and in compliance with NRC requirements.

### Organization and Staffing

- The organization and staffing were consistent with Technical Specification requirements.

### Procedures

- The procedural review, revision, and implementation program in general satisfied Technical Specification requirements.

### Experiments

- The program for the control of experiments satisfied regulatory, procedural and Technical Specification requirements.

### Health Physics

- Surveys were being completed and documented as required
- Postings met regulatory requirements
- Personnel dosimetry was being worn and recorded doses were within the NRC's regulatory limits
- Radiation monitoring equipment was being maintained and calibrated as required
- The Radiation Protection Program satisfied regulatory requirements
- The radiation protection training program was being administered as required
- Environmental monitoring satisfied license and regulatory requirements.

### Design Changes

- Based on the records reviewed, the inspector determined that the licensee's design change program was generally being implemented as required.

Committees, Audits and Reviews

- Review and oversight functions required by the TSs were acceptably completed by the Reactor Operations Committee.

Inspection of Transportation Activities

- No radioactive material shipments had been made under the auspices of the reactor license during the past year.

## REPORT DETAILS

### Summary of Plant Status

The licensee's 300 kilowatt Training Research Isotope Production General Atomics (TRIGA) Mark I research reactor has been operated in support of experiments, reactor operator training, and periodic equipment surveillances. During the inspection, the reactor was operated in support of on-going work and operator training.

#### 1. **Organization and Staffing**

##### a. Inspection Scope (Inspection Procedure [IP] 69001)

The inspector reviewed the following to verify compliance with the organization and staffing requirements in Technical Specification (TS) Section 6.1:

- staff qualifications and management responsibilities
- staffing requirements for the safe operation of the reactor
- selected portions of the operations logbooks for the past twelve months
- organizational structure and staffing
- administrative controls
- TS for the Dow TRIGA Research Reactor (DTRR), Amendment No. 8, dated February 11, 1998
- Reactor Logbooks Nos. 97 to 100, covering operations from November 1, 2006 to present
- Dow Nuclear Research Reactor Procedure (DNRRP) No. 3, "Administrative Procedures," dated September 2006
- DNRRP No. 3.4, "Procedural and Administrative Limitations," dated September 2006
- DOW TRIGA Research Reactor Annual Report - 2006, dated March 20, 2007

##### b. Observations and Findings

The DTRR organizational structure and the responsibilities of the reactor management and staff had not changed since the last inspection (see NRC Inspection Report No. 50-264/2006-201). Current DTRR staff consisted of the Facility Director/Reactor Supervisor (FD/RS) and three staff members, all of whom are licensed Senior Reactor Operators. All positions were filled with qualified personnel and a review of the applicable records verified that staffing was as required by TS Section 6.1 and the licensee's procedures. The inspector noted that the staffing at the facility was acceptable to support the ongoing activities.

##### c. Conclusions

The organization and staffing were consistent with TS requirements.

## 2. Procedures

### a. Inspection Scope (IP 69001)

To verify that facility procedures were being reviewed, revised, and implemented as required by TS Section 6.3, the inspector reviewed selected aspects of:

- administrative controls
- procedural implementation
- selected administrative and operations procedures
- records of changes and temporary deviations to procedures
- Reactor Operations Committee (ROC) meeting minutes, dated November 8, 2006 and February 22, June 25 and August 23, 2007
- DNRRP No. 3.2.2, "ROC - DOW TRIGA Reactor," dated September 2006
- DNRRP No. 3.3.2, "Review Procedure," dated September 2006
- DNRRP Chapter 4, "Operational Procedures," dated November 2006

### b. Observations and Findings

Procedures had been formulated for the safe, routine operation of the reactor. Records showed that procedures for potential malfunctions (e.g., radioactive releases and contaminations, and abnormal events) had also been developed and were available to be implemented as required. The inspector noted that procedural changes were being reviewed and approved by the ROC as required by TS. Training of personnel on procedures and changes was acceptable. Through observation of various activities at the facility, including reactor operation and sample handling, the inspector determined that licensee personnel conducted activities in accordance with applicable procedures.

Review of ROC meeting minutes and discussions with the licensee indicated the request and approval of a changed procedure for Chapter 4 of the facility operating procedures. The inspector noted that the facility staff could not ascertain the most current revision of the procedure. The inspector observed that procedures were difficult to ascertain the current revision and appropriate approval. The FD/RS and the alternate Reactor Supervisor (RS) maintains a master copy of the procedure electronically; however the most current revision of the procedure did not have the correct date of approval and did not have an indication of approval. As an immediate corrective action, the licensee rectified the date of the approved procedure. The inspector communicated to the licensee the importance of maintaining an effective procedural system so an employee can be sure that they are using the most recently approved version of the procedure. The inspector will follow up with the licensee the implementation of a more structured procedural tracking system. This issue will be considered by the NRC as an Inspection Follow-up Item (IFI) and will be reviewed during the next inspection at the facility (IFI 50-264/2007-201-01).

### c. Conclusions

The procedural review, revision, and implementation program in general satisfied TS requirements.



### 3. Experiments

#### a. Inspection Scope (IP 69001)

To ensure that the requirements of TS Sections 3.7 and 6.4 were being met concerning experimental programs, the inspector reviewed selected aspects and/or portions of:

- experimental administrative controls and precautions
- approved reactor experiments documentation
- review and approval process for experiments
- ROC meeting minutes, dated November 8, 2006 and February 22, June 25 and August 23, 2007
- Reactor Logbooks Nos. 97 to 100, covering operations from November 1, 2006 to present
- DNRRP No. 3, "Administrative Procedures," dated September 2006
- DNRRP No 3.3, "Rules Governing Experiments, Storage and Handling of, and Accountability for Nuclear and Radioactive Material," dated September 2006
- DNRRP No 3.3.1, "Classes of Experiments," dated September 2006
- DNRRP No 3.3.5, "Authorization for Operation of the Reactor," dated September 2006
- DNRRP No. 3.4, "Procedural and Administrative Limitations," dated September 2006
- DNRRP No. 3.5, "Reactor Operations Log Book," dated September 2006
- DNRRP No. 4.6.2, "Samples in the Lazy Susan - Placement and Retrieval," dated November 2006
- TRIGA Activation Request Form, Version 7, dated January 1997
- Completed "TRIGA Activation Request Form" forms, dated from November 2006 to present
- Completed Approval Sheet for Special Experiments #124, "Annual Fuel Inspection," dated January 18, 2007

#### b. Observations and Findings

One of the many uses for the DTRR is the irradiation of various materials. The most frequently used experimental facilities are the pneumatic tube irradiation facility and the lazy susan. Samples that have been irradiated at DTRR include various materials that are produced or utilized at The Dow Chemical Company. All experiments conducted are in accordance with approved authorization requests. The FD/RS or alternate RS reviews and approves all routine samples to be irradiated in accordance with the TS limitations for each sample to be irradiated in the core. No new routine experiments had been initiated, reviewed, or approved since the previous inspection at the facility. One special experiment was approved to conduct the annual fuel inspections with a new camera device. All new experiments are reviewed and approved by the ROC. The inspector confirmed that all of the experiments conducted were in accordance with TS limits and procedural requirements.

The licensee relayed an incident with an unauthorized sample being irradiated in the core. The experimenter had filled out three approval forms to be signed by the appropriate person, but only one form was signed as the others were not noticed due to being stuck to the first sheet. The first experiment had been completed as authorized,

when an operator and an experimenter started the second experiment. The operator and experimenter did not ensure the appropriate approval form was signed for the second experiment before the sample was inserted into the core. Once the form was discovered not signed, the operator immediately stopped the experiment and obtained the proper approval. DNR RP 4.6.2 states, "Appropriate written authorization must be prepared and signed before any samples can be placed in the reactor." The licensee determined that one of the root causes of this incident was the experimenter leaving the forms to be signed by the appropriate person without any verbal communications. The licensee immediately implemented corrective actions to prevent future recurrences of this type. The licensee is now requiring the experimenter to be physically present when the approvals are signed to answer any questions and to ensure that the appropriate information is discussed.

The inspector observed the licensee conduct operations for an experiment utilizing the lazy susan experimental facility on December 4, 2007. All of the procedures required for loading and extracting the samples were strictly followed and the personnel conducting the operation did so in a safe and knowledgeable manner. The inspector verified that all of the checks conducted were in compliance with TS required values and parameters.

c. Conclusions

The program for the control of experiments satisfied regulatory, procedural and TS requirements.

**4. Health Physics**

a. Inspection Scope (IP 69001)

The inspector reviewed the following to verify compliance with 10 CFR Parts 19 and 20, and the applicable TS requirements:

- radiological signs and posting in various areas of the facility
- area and personnel dosimetry results for 2006 and 2007
- facility and equipment during tours
- radiation protection training records
- maintenance and calibration of radiation monitoring equipment, including the water radioactivity monitor, area radiation monitor, and the continuous air monitor
- organization and staffing
- radiological signs and posting
- facility monthly, annual, and other periodic contamination and area radiation surveys from October 2006 to November 2007
- monthly pool water Tritium analyses from October 2006 to November 2007
- TRIGA Reactor 2006 Annual Audit, dated February 26, 2007
- Radiation Safety Committee Meeting Minutes, dated November 28, 2006 and February 26, May 7, and August 16, 2007
- The Dow Chemical Company Radiation Protection Program Audit - Michigan Operations, dated May 2007
- Procedure entitled, "Personnel and Area Survey Procedures Using a Geiger-Mueller (GM) Survey Meter," dated May 11, 2004

- Procedure entitled, "Wipe Testing Procedures - Loose Isotopes," dated May 11, 2004
- DNRRP No. 3.3.3, "Handling, Storage, and Disposal of Radioactive Material," dated September 2006
- DNRRP No. 4.2.2, "Area Monitor Calibration," dated November 2006
- DNRRP No. 4.2.3, "Water Radioactivity Monitor Calibration," dated November 2006
- DNRRP No. 4.2.4, "Continuous Air Monitor Calibration," dated November 2006
- DNRRP No. 4.7.1, "Wipe Tests and Radiation Surveys," dated November 2006
- DNRRP No. 4.7.2, "Procedure for the Disposal of Waste Generated in the Neutron Activation Analysis Group," dated November 2006
- Standard IH-477 - Radiation Protection Program, "Control of Ionizing Radiation Hazards," revised May 22, 2007
- Fate of Radioactive Effluents from the Michigan Operations Buildings, undated

b. Observations and Findings

(1) Surveys

The inspector reviewed monthly radiation and contamination surveys of the reactor building, which were conducted by the facility staff. The results were documented on the appropriate forms, evaluated as required and corrective actions taken when readings or results exceeded set action levels. The number and location of survey points was adequate to characterize the radiological conditions. The licensee investigates any readings above background levels. The inspector verified that the Radiation Safety Officer (RSO) reviews all of the survey records. No elevated readings were discovered in the previous year. If any contamination is discovered, the inspector verified that the licensee would implement corrective action to reduce the levels of contamination. The RSO also conducts an annual independent contamination survey of the facility and has verified that all of the readings are as expected.

(2) Postings and Notices

The inspector reviewed the postings required by 10 CFR Part 19 at the entrances to various controlled areas including the Reactor Bay, and radioactive material storage areas. The postings were acceptable and indicated the radiation and contamination hazards present. The facility's radioactive material storage areas were found to be properly posted. No unmarked radioactive material was found in the facility.

(3) Dosimetry

The licensee used a National Voluntary Laboratory Accreditation Program-accredited vendor to process personnel dosimetry. Through direct observation, the inspector determined that dosimetry was used in an acceptable manner by facility personnel. For visitors to the facility, radiation exposures are recorded through the permanent staff at the facility. Records indicate that no abnormal readings were obtained.

An examination of the records for the inspection period showed that all exposures were well within NRC limits and within licensee action levels. All of the staff and researchers associated with the facility wear Optically Stimulated Luminescence Dosimeter (OSLD)

badges and minimal doses were recorded for 2006 through present. The licensee formally investigates any dosimetry readings that indicate a quarterly exposure above 125 millirem (mrem) for whole body. The as low as reasonably achievable (ALARA) goal specified in the radiation safety procedures is to keep exposures to less than 10% of the applicable NRC requirements and the licensee consistently meets this goal.

(4) Radiation Monitoring Equipment

The calibration verification of portable survey meters and friskers was completed by a contracted company. The fixed area radiation detectors were calibrated at the facility by the DTRR staff using a Cs-137 source. The calibration records of portable survey meters, friskers, fixed radiation detectors, and air monitoring equipment in use at the facility were reviewed. Calibration frequency met the requirements established in TS 4.4 while records were being maintained as required. The inspector verified that proper precautions are always used to maintain doses ALARA while conducting the calibrations. The inspector reviewed the licensee's tracking system for ensuring the instrument calibrations are completed on time and found it to be useful.

(5) Radiation Protection Program

The licensee's Radiation Protection Program (RPP) was established through the procedures. The RPP provides guidance for keeping doses ALARA and is consistent with the guidance in 10 CFR Part 20. The inspector verified that the RPP was being reviewed annually as required by 10 CFR 20.1101(c). No issues related to the RPP were identified in the review of the program. The RSO reviews the overall implementation of the radiation protection program at the DTRR.

The RPP requires that all personnel who work with radioactive materials receive training in radiation protection, policies, procedures, requirements, and the facilities prior to having unescorted access at the facility. The RSO is responsible for conducting the training and all of the training is typically conducted both on a computer and with practical applications. A test is administered at the end of the training to verify that the individuals understood the material presented. The training covered the topics required to be taught in 10 CFR Part 19 and the review of training materials and tests indicated that the staff were instructed on the appropriate subjects.

(6) Facility Tour

The inspector toured the reactor facility, counting laboratories and accompanying facilities. Control of radioactive material and control of access to radiation and high radiation areas were observed to be acceptable. The postings and signs for these areas were appropriate. Licensee personnel followed the indicated precautions for access to controlled areas.

(7) Environmental Monitoring

Several OSLDs were placed around the inside walls of the reactor facility and minimal doses were recorded. Records show that there was minimal radiation exposure to the environment from the reactor during the previous year. There was no liquid effluent discharged from the reactor facility. The licensee indicated that gaseous effluents from the reactor facility were less than 1 mrem/year.

c. Conclusions

The inspector determined that: (1) surveys were being completed and documented as required, (2) postings met regulatory requirements, (3) personnel dosimetry was being worn and recorded doses were within the NRC's regulatory limits, (4) radiation monitoring equipment was being maintained and calibrated as required, (5) the RPP satisfied regulatory requirements, (6) the radiation protection training program was being administered as required, and 7) environmental monitoring satisfied license and regulatory requirements.

5. **Design Changes**

a. Inspection Scope (IP 69001)

In order to verify that any modifications to the facility were consistent with 10 CFR 50.59, the inspector reviewed selected aspects of:

- facility design changes and records
- facility configuration and associated records
- The Dow TRIGA Reactor (Docket No. 50-264) Facility Modification, 50.59 Review, Upgrade to the Heat Exchanger, dated December 10, 2004
- ROC meeting minutes, dated November 8, 2006 and February 22, June 25 and August 23, 2007
- DNRRP No. 3, "Administrative Procedures," dated September 2006
- DNRRP No. 3.2.2, "Reactor Operations Committee - DOW TRIGA Reactor," dated September 2006
- DNRRP No. 3.4, "Procedural and Administrative Limitations," dated September 2006
- DNRRP No. 4.5.3, "Maintenance," dated November 2006
- facility design change records for the past two years
- DOW TRIGA Research Reactor Annual Report - 2006, dated March 20, 2007

b. Observations and Findings

Through review of applicable records and interviews with licensee personnel, the inspector determined that one significant change had been initiated and completed at the facility in the previous year. The change was completed in January or February 2006. The change involved reprogramming the water chiller for the secondary coolant system to allow operation during the winter months. The chiller provides a heat sink for the heat exchanger to effectively perform its function of cooling the primary coolant. The licensee stated that a design change review was not completed on this modification. 10 CFR 50.59 states, "The licensee shall maintain records of changes in the facility, of changes in procedures, and of tests and experiments made pursuant to paragraph (c) of this section. These records must include a written evaluation which provides the bases for the determination that the change, test, or experiment does not require a license amendment pursuant to paragraph (c)(2) of this section." The inspector could not verify that the change to the coolant system was presented to and reviewed by the ROC as required. DNRRP No. 4.5.3 specifies that the Maintenance Form must be completed for

any maintenance on the water system. The licensee stated that no maintenance form was completed for this activity. The licensee was informed that failure to conduct a written evaluation of design changes was identified as an Unresolved Item<sup>1</sup> (URI) pending corrective actions and implementation of controls to prevent recurrence. This issue will be reviewed during a future inspection (URI 50-264/2007-201-02).

c. Conclusions

Based on the records reviewed, the inspector determined that the licensee's design change program was generally being implemented as required.

**6. Committees, Audits and Reviews**

a. Inspection Scope (IP 69001)

The inspector reviewed the following to ensure that the audits and reviews stipulated in TS Section 6.2 were being completed by the ROC:

- ROC meeting minutes, dated November 8, 2006 and February 22, June 25 and August 23, 2007
- Peer Review Audit of The Dow Chemical Company TRIGA Research Reactor - 2006, dated March 2007
- DNRRP No. 3, "Administrative Procedures," dated September 2006
- DNRRP No. 3.2.2, "Reactor Operations Committee - DOW TRIGA Reactor," dated September 2006
- DNRRP No. 3.4, "Procedural and Administrative Limitations," dated September 2006

b. Observations and Findings

The ROC is defined in the TSs and the inspector verified that the committee is following all aspects of the requirements. The ROC had quarterly meetings as required by TS 6.2.1.c and a quorum was always present as required. Review of the minutes indicated the ROC provided guidance, direction and oversight, and ensured suitable use of the reactor. The minutes provided an acceptable record of ROC review functions and of their safety oversight of reactor operations.

Audits of the items required by TS 6.2.3 were completed by individuals appointed by members of the ROC. Minor issues that were not safety related were noted in the audit reports and meeting minutes and the inspector observed that any safety related items were properly controlled. The inspector noted that the safety reviews and audits, and the associated findings, were acceptably detailed. The licensee immediately responded to all audit findings and ensured that the corrective actions were properly completed.

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<sup>1</sup> An Unresolved Item is a matter about which more information is required to determine whether the issue in question is an acceptable item, a deviation, a nonconformance, or a violation.

c. Conclusions

Review and oversight functions required by the TSs were acceptably completed by the ROC.

**7. Inspection of Transportation Activities**

a. Inspection Scope (IP 86740)

To verify compliance with regulatory and procedural requirements for transferring or shipping licensed radioactive material, the inspector reviewed the following:

- selected records of various types of radioactive material shipments

b. Observations and Findings

Through records review and discussions with licensee personnel, the inspector determined that the licensee had not shipped any radioactive material since the previous inspection in this area.

c. Conclusions

No radioactive material shipments had been made under the auspices of the reactor license during the past year.

**8. Exit Interview**

The inspector presented the inspection results to licensee management at the conclusion of the inspection on December 6, 2007. The inspector described the areas inspected and discussed in detail the inspection observations. No dissenting comments were received from the licensee. The licensee acknowledged the findings presented and did not identify as proprietary any of the material provided to or reviewed by the inspector during the inspection.

## KEY POINTS OF CONTACT

### Licensee Personnel

B. Haskins	Senior Reactor Operator
T. Quinn	Senior Reactor Operator and Alternate Reactor Supervisor
W. Rigot	Facility Director and Reactor Supervisor
J. Weldy	Radiation Safety Officer
S. Yusuf	Senior Reactor Operator

## INSPECTION PROCEDURES USED

IP 69001	CLASS II NON-POWER REACTORS
IP 86740	INSPECTION OF TRANSPORTATION ACTIVITIES

## LIST OF ITEMS OPENED, CLOSED, AND DISCUSSED

### Opened

50-264/2007-201-01 IFI Follow up to verify the licensee's implementation of a more structured procedural tracking system

50-264/2007-201-02 URI Failure to conduct a written evaluation of design changes

### Closed

None

## LIST OF ACRONYMS USED

ADAMS	Agencywide Documents Access and Management System
ALARA	As Low As Reasonably Achievable
CFR	Code of Federal Regulations
DNRRP	Dow Nuclear Research Reactor Procedure
DTRR	Dow TRIGA Research Reactor
FD/RS	Facility Director/Reactor Supervisor
IFI	Inspector Follow-up Item
IP	Inspection Procedure
MREM	Millirem
NRC	Nuclear Regulatory Commission
OSLD	Optically Stimulated Luminescence Dosimeter
ROC	Reactor Operations Committee
RPP	Radiation Protection Program
RS	Reactor Supervisor
RSO	Radiation Safety Officer
TRIGA	Training Research Isotope Production General Atomics
TS	Technical Specification
URI	Unresolved Item