

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED: Purdue University Radiological and Environmental Management 550 Stadium Drive Mall West Lafayette, IN 47907 REPORT NUMBER(S) 14-001		2. NRC/REGIONAL OFFICE Region III U. S. Nuclear Regulatory Commission 2443 Warrenville Road, Suite 210 Lisle, IL 60532-4352	
3. DOCKET NUMBER(S) 030-00696	4. LICENSE NUMBER(S) 13-02812-04	5. DATE(S) OF INSPECTION October 20-22 , 2014	

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:

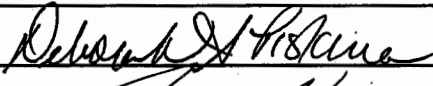
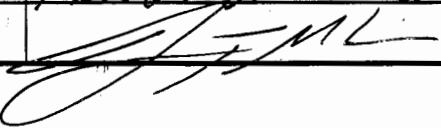
- 1. Based on the inspection findings, no violations were identified.
- 2. Previous violation(s) closed.
- 3. The violation(s), specifically described to you by the inspector as non-cited violations, are not being cited because they were self-identified, non-repetitive, and corrective action was or is 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	Deborah A. Piskura, Health Physicist		10/23/14
BRANCH CHIEF	Aaron T. McCraw, Chief, MIB		10/30/14

Docket File Information
SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED: Purdue University Radiological and Environmental Management 550 Stadium Drive Mall West Lafayette, IN 47907 REPORT NUMBER(S) 14-001	2. NRC/REGIONAL OFFICE Region III U. S. Nuclear Regulatory Commission 2443 Warrenville Road, Suite 210 Lisle, IL 60532-4352
--	---

3. DOCKET NUMBER(S) 030-00696	4. LICENSE NUMBER(S) 13-02812-04	5. DATE(S) OF INSPECTION October 20-22, 2014
--------------------------------------	---	---

6. INSPECTION PROCEDURES USED 87124 & 87126	7. INSPECTION FOCUS AREAS 03.01- 03.07
--	---

SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM CODE(S) 01100	2. PRIORITY 3	3. LICENSEE CONTACT James Schweitzer, Ph.D., CHP, RSO	4. TELEPHONE NUMBER (765) 494-2350
---------------------------------	----------------------	--	---

Main Office Inspection Next Inspection Date: 10/20/2017

Field Office Inspection _____

Temporary Job Site Inspection _____

PROGRAM SCOPE

This was a routine inspection of Purdue University which operated a Type A broad scope academic R&D program. The majority of the licensee's activities were conducted at the main campus in West Lafayette, Indiana. The university was authorized to use byproduct material with atomic numbers 1 thru 83, numerous sealed sources, transuranics, veterinary pharmaceuticals, portable gauges, and gas chromatographs. The daily radiation safety operations were managed by the university's Radiological and Environmental Management (REM) office. The REM was staffed with a dedicated full-time RSO, 2 HPs, 3 HP techs, and supporting staff. The licensee established an RSC to review and approve all uses, users, and facilities. The RSC approved 80-100 principal investigators working in 200 labs; 300-400 individuals work under the supervision on the principal investigators. The majority of the licensee's use of RAM involved CHIPS and Tc-99m for veterinary use. The REM ordered and received all RAM for the university; staff delivered the packages to the laboratories. The REM performed audits and surveys of the labs at frequencies based on the type and amount of RAM used by the laboratory.

This inspection consisted of interviews with licensee personnel; a review of select records; tours of the REM office and waste storage areas, the veterinary medical practice, and numerous research laboratories; and independent measurements. The inspector observed licensee personnel using RAM and devices, conducting radiation surveys, package receipt surveys, source inventories, security of byproduct material and use of personnel monitoring. The inspector also observed REM personnel conduct a laboratory audit of a physics principal investigator.

No violations of NRC requirements were identified during this inspection.