December 23, 2010

Mr. Jimmy D. Givens
Deputy Executive Director
Department of Environmental Quality
707 N. Robinson
P. O. Box 1677
Oklahoma City, Oklahoma 73101-1677

Dear Mr. Givens:

On November 29, 2010, the Management Review Board (MRB) met to consider the proposed final Integrated Materials Performance Evaluation Program (IMPEP) report on the Oklahoma Agreement State Program. The MRB found the Oklahoma Agreement State Program adequate to protect public health and safety and compatible with the U.S. Nuclear Regulatory Commission's (NRC) program.

Section 5.0, page 12, of the enclosed final report contains a summary of the IMPEP review team's findings. Based on the results of the current IMPEP review, the next full review of the Oklahoma Agreement State Program will take place in approximately 4 years, with a periodic meeting tentatively scheduled for September 2012.

During the periodic meeting and at the next IMPEP review, NRC will evaluate the effectiveness of the State's response to the review team's recommendations, as well as the overall implementation of your Agreement State program.

I appreciate the courtesy and cooperation extended to the IMPEP team during the review. I also wish to acknowledge your continued support for the Agreement State Program. I look forward to our agencies continuing to work cooperatively in the future.

Sincerely,

/RA/
Michael F. Weber
Deputy Executive Director for Materials, Waste,
Research, State, Tribal, and Compliance Programs
Office of the Executive Director for Operations

Enclosure:
Oklahoma Final IMPEP Report

cc: Mike Broderick, Manager
Radiation Management Section

Letter to J. Givens from Michael F. Weber dated: 12/23/10

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INTEGRATED MATERIALS PERFORMANCE EVALUATION PROGRAM

REVIEW OF THE OKLAHOMA AGREEMENT STATE PROGRAM

SEPTEMBER 13-17, 2010

FINAL REPORT

Enclosure

1.0 INTRODUCTION

This report presents the results of the review of the Oklahoma Agreement State Program. The review was conducted during the period of September 13-17, 2010, by a review team composed of technical staff members from the U.S. Nuclear Regulatory Commission (NRC) and the State of Alabama. 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 Final General Statement of Policy," published in the *Federal Register* on October 16, 1997, and NRC Management Directive 5.6, "Integrated Materials Performance Evaluation Program (IMPEP)," dated February 26, 2004. Preliminary results of the review, which covered the period of June 9, 2006, to September 17, 2010, were discussed with Oklahoma managers on the last day of the review.

A draft of this report was issued to Oklahoma for factual comment on October 13, 2010. The State responded by email dated November 15, 2010, from Mike Broderick, Manager, Radiation, Management Section (the Section). A copy of the State's response is included as the Attachment to this report. The Management Review Board (MRB) met on November 29, 2010, to consider the proposed final report. The MRB found the Oklahoma Agreement State Program adequate to protect public health and safety and compatible with NRC's program.

The Oklahoma Agreement State Program is administered by the Section, which is located within the Land Protection Division (the Division) of the Department of Environmental Quality (the Department). Organization charts for the Department and the Division are included as Appendix B.

At the time of the review, the Oklahoma Agreement State Program regulated 242 specific licenses authorizing possession and use of radioactive materials. The State of Oklahoma became an Agreement State on September 29, 2000. The review focused on the radioactive materials program as it is carried out under the Section 274b. (of the Atomic Energy Act of 1954, as amended) Agreement between NRC and the State of Oklahoma. The Agreement includes source material only when it is used to take advantage of the density and high-mass property where the use of the specifically licensed source material is subordinate to the primary specifically licensed use of either 11e.(1) byproduct material or special nuclear material.

In preparation for the review, a questionnaire addressing the common and applicable non-common performance indicators was sent to the Section on May 10, 2010. The Section provided its response to the questionnaire on August 31, 2010. A copy of the questionnaire response can be found in NRC's Agencywide Documents Access and Management System (ADAMS) using the Accession Number ML102660226.

The review team's general approach for conduct of this review consisted of: (1) examination of the Section's response to the questionnaire, (2) review of applicable Oklahoma statutes and regulations, (3) analysis of quantitative information from the Section's database, (4) technical review of selected regulatory actions, (5) field accompaniments of three inspectors, and (6) interviews with staff and managers. The review team evaluated the information gathered against the established criteria for each common and the applicable non-common performance

indicator and made a preliminary assessment of the Oklahoma Agreement State Program's performance.

Section 2.0 of this report covers the State's actions in response to recommendations made during previous reviews. Results of the current review of the common performance indicators are presented in Section 3.0. Section 4.0 details the results of the review of the applicable non-common performance indicators, and Section 5.0 summarizes the review team's findings.

2.0 STATUS OF ITEMS IDENTIFIED IN PREVIOUS REVIEWS

During the previous IMPEP review, which concluded on June 8, 2006, the review team made four recommendations regarding the Oklahoma Agreement State Program's performance. The current status of each recommendation is as follows:

1. The review team recommends that all inspections be fully documented, and that license files be complete and accurate. (Section 3.2 of the 2002 IMPEP report)

   Current Status: The State has taken appropriate measures to assure license files are complete and accurate, and inspections are fully documented. Measures included hiring experienced administrative personnel to address the inadequate recordkeeping identified during previous reviews. This recommendation is closed.

2. The review team recommends that the State document corrective actions for cited violations issued on DEQ Form 410-591. (Section 3.3 of the 2006 IMPEP report)

   Current Status: The review team concluded that the Section has taken appropriate measures to review and document all corrective measures for cited violations, including violations issued on DEQ Form 410-591. This recommendation is closed.

3. The review team recommends that the State take measures to ensure proper documentation and appropriate response, review, enforcement, and follow up of all radioactive materials incidents. (Section 3.5 of the 2006 IMPEP report)

   Current Status: The review team concluded that the State has done an excellent job of responding to radioactive materials incidents, including follow up during subsequent inspections and with enforcement tools. Documentation of incidents was found to be incomplete, however, and documents were not located in license files as per Section policy. This recommendation remains open. (See Section 3.5)

4. The review team recommends that the State take measures to ensure proper documentation and appropriate tracking and closure of all allegations involving radioactive material. (Section 3.5 of the 2006 IMPEP report)

   Current Status: The review team identified that the State could not verify that allegers were provided with the results of allegation investigations for two allegations referred to the State by the NRC. This recommendation remains open. (See Section 3.5)

3.0 COMMON PERFORMANCE INDICATORS

Five common performance indicators are used to review NRC Regional and Agreement State radioactive materials 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 staffing level and staff 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 managers and staff, reviewed job descriptions and training records, and considered workload backlogs.

The Oklahoma Agreement State Program is composed of the Section manager, nine technical staff positions (Environmental Program Specialists) and administrative staff. Technical staff members conduct inspections, perform licensing actions, and respond to incidents and allegations, based on individual qualifications. The technical staff members also have responsibilities outside the Agreement State program, notably the regulation of industrial and therapeutic x-ray, and radon in Oklahoma. The Section currently devotes approximately 4.8 technical staff full-time equivalents to administer the Agreement State program.

At the time of the review, the Section had two Environmental Program Specialist vacant positions. One of the vacancies has been open since January 2010 and the other since July 2010. Since the review, another technical staff member gave notice that he is leaving State employment for a higher-paying private sector job. Due to a Department funding shortage, no approval to fill the positions has been given to the Section Manager. The Section Manager stated that the reason for the shortage is a deficit in program fees, which have not been raised since 2004. The Department has initiated a rulemaking process to raise fees to a level that will fully fund the Agreement State program after July 2011; however, no definitive approval of this rulemaking is guaranteed.

The review team noted that staffing levels did not present any performance issues affecting implementation of the Agreement State program; however, continued vacancies could potentially impact the Section's ability to remain current on all regulatory actions. This potential vulnerability was discussed with Department managers, who acknowledged the issue and indicated that they were researching future staffing solutions.

The Section has a documented training plan for technical staff that is consistent with the requirements in the NRC/Organization of Agreement States Training Working Group Report and NRC's Inspection Manual Chapter (IMC) 1246, "Formal Qualification Programs in the Nuclear Material Safety and Safeguards Program Area." The Section uses on-the-job training, such as inspector accompaniments, to supplement formal coursework. Staff members are assigned increasingly complex duties as they progress through the qualification process. The Section Manager signs off on all staff qualifications, which are documented by the training coordinator in staff members' personal files. The review team noted that the most recently hired technical staff members were successfully progressing through the Section's qualification process. The review

team concluded that the Section's training program is adequate to carry out its regulatory duties and noted that Oklahoma management supports the Section training program.

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

3.2 Status of Materials Inspection Program

The review team focused on five factors while reviewing this indicator: inspection frequency, overdue inspections, initial inspections of new licenses, timely dispatch of inspection findings to licensees, and performance of reciprocity inspections. The review team's evaluation was based on the Section's questionnaire response relative to this indicator, data gathered from the Section's database, examination of completed inspection casework, and interviews with the Section Manager and staff members.

The review team verified that the Section's inspection frequencies for all types of radioactive materials licenses are at least the same frequency as those listed in IMC 2800, "Materials Inspection Program." The only major difference noted between IMC 2800 and the Section's list of inspection frequencies was program code 2121 "Medical Institution – WD Not Required," which had a priority code of 3 instead of a priority code of 5 as prescribed by IMC 2800. This was discussed with the Section Manager and it was determined that this was an oversight. The Section Manager indicated that the program code would be updated to reflect the same priority as in IMC 2800. Other differences included program codes identified as telephone notifications in IMC 2800 were assigned a priority code of 7 by the Section and decommissioning activities identified in IMC 2800 were assigned a priority code of 1 by the Section. The review team also verified that the Section conducts inspections of multiple locations of use for multi-site licenses. In all instances reviewed by the team, the Section met or exceeded the minimum criterion identified in IMC 2800 of sites inspected for licenses with multiple locations of use listed on the license.

The Section indicated in its response to the questionnaire that a total of 198 Priority 1, 2, and 3 (high priority) inspections were conducted during the review period. The Section initially indicated in its response to the questionnaire that 33 of the 198 high priority inspections were conducted overdue by more than 25 percent of the inspection frequency prescribed by IMC 2800. The review team noted that the response to the questionnaire did not include inspection numbers for the entire time period since the last review. During the on-site review, the Section provided the requested inspection information for the 2006 timeframe, and the review team determined that during the review period, a total of 215 Priority 1, 2, and 3 inspections were conducted during the review period and 33 of the these inspections were conducted overdue by more than 25 percent of the inspection frequency prescribed by IMC 2800. Days overdue ranged from 6 to 695 days. The review team verified that no high priority inspections were overdue at the time of the review.

The review team also evaluated the Section's timeliness for conducting initial inspections. The review team noted that the Section conducted 42 initial inspections during the review period, of which 13 were conducted greater than 12 months after license issuance as prescribed by IMC

2800. The review team verified that no initial inspections were overdue at the time of the review.

Based on conversations with the manager and staff members, the review team noted that during the review period, 15 of the 33 Priority 1, 2 and 3 inspections and 11 of the 13 initial inspections conducted overdue were assigned for inspection after they were already due. This occurred for a variety of factors including:

- Initial inspection data that needed to be created by the license reviewer upon issuance of a new license was not always performed by the license reviewer.

- New inspection data that needed to be created by the inspectors following the completion of their assigned inspections was not always completed by the inspector.

- Inspection assignments had been the responsibility of a staff member prior to retirement in March, 2007. An incorrect assumption was made by management that inspection assignments for the remainder of 2007 had been completed by the individual prior to the retirement. This incorrect assumption caused a delay in the assignment of inspection responsibilities to inspection staff.

Overall, the review team calculated that the Section performed 17.9 percent of its Priority 1, 2, and 3 and initial inspections overdue during the review period. The review team recognized that the Section promptly self identified this problem early in the review period and immediately undertook a corrective action program. The review team recommends that the Section take appropriate measures to conduct their inspection program in a sustainable manner by continuing to implement their corrective action program.

The review team evaluated the Section's timeliness of issuance of inspection reports. The Section has a policy of issuing the inspection findings to licensees within 30 days from the date of the inspection. Of the 30 inspection files reviewed, the review team identified four inspection findings that were issued beyond the 30-day goal. Days beyond the 30-day goal ranged from 2 to 18 days. Based on the review of the inspection files, the average time for the issuance of inspection findings was approximately 30 days.

During the review period, the Section granted 109 reciprocity permits, 46 were determined to be for Priority 1, 2 and 3 licensees. IMC 1220, "Processing of NRC Form 241 and Inspection of Agreement State Licensees Operating Under 10 CFR 150.20," requires inspection of 20 percent of candidate licensees operating under reciprocity annually. The review team determined that the Section met or exceeded the criterion of inspecting 20 percent of candidate licensees operating under reciprocity in each of the 4 years covered by the review period.

Based on the IMPEP evaluation criteria, the review team recommended that Oklahoma's performance with respect to the indicator, Status of Materials Inspection Program, be found satisfactory, but needs improvement. However, after discussion with regard to Oklahoma's self identification and improved performance, the MRB found that Oklahoma's performance with respect to the indicator, Status of Materials Inspection Program, be found satisfactory.

3.3 Technical Quality of Inspections

The review team evaluated inspection reports, enforcement documentation, and interviewed the responsible inspector, if possible, for 30 radioactive materials inspections conducted during the review period. The casework examined included a cross-section of inspections conducted by seven current inspectors and three former inspectors, and covered a wide variety of inspection types. These included diagnostic nuclear medicine, high dose-rate remote afterloaders, industrial radiography, nuclear pharmacy, well logging, research and development, portable and fixed gauges, and service providers. The casework included initial, routine, follow-up, reciprocity, and Increased Controls inspections. Appendix C lists the inspection casework files reviewed.

Based on the evaluation of casework, the review team determined that inspections covered all aspects of the licensees' radiation safety and security programs. The review team noted that the inspections evaluated Increased Controls, fingerprinting, and the National Source Tracking System when appropriate. The review team found that inspection reports were complete, consistent, and with sufficient documentation to ensure that the licensees' performances with respect to health, safety, and security were acceptable. Inspection report documentation supported violations, recommendations made to licensees, and unresolved safety issues.

While on site, the review team evaluated the Section's handling and storing of sensitive documents. The review team determined that documents containing sensitive information were appropriately protected and maintained in a manner to limit access.

The Section has a policy to accompany all staff performing radioactive materials inspections on an annual basis. The Section Manager performs the inspector accompaniments. It was noted that one inspector was not accompanied during the 2007 calendar year and another inspector was not accompanied during the 2008 calendar year. The review team verified that all other staff members that regularly perform inspections were accompanied annually during the review period. To ensure that accompaniments are performed annually for all inspection staff, the Section Manager has set a goal to accompany 75 percent of the inspection staff by September of each year and has also approved a senior inspector to assist in this function if needed.

The review team accompanied three of the Section's inspectors during the period of July 13-15, 2010. The inspectors conducted inspections of a medical therapy licensee, an industrial radiography licensee, and a veterinary nuclear medicine licensee. The inspector accompaniments are listed in Appendix C. The inspectors demonstrated performance-based inspection techniques and knowledge of the regulations. The inspectors were well trained, prepared for the inspections, and thorough in their audits of the licensees' radiation safety and security programs. The inspectors conducted interviews with appropriate personnel, observed licensed operations, conducted confirmatory measurements, and utilized good health physics practices. The review team determined that the inspections were adequate to assess radiological health, safety, and security at the licensed facilities.

Based on the IMPEP evaluation criteria, the review team recommended, and the MRB agreed, that Oklahoma's performance with respect to the indicator, Technical Quality of Inspections, be found satisfactory.

3.4 Technical Quality of Licensing Actions

The review team examined completed licensing casework and interviewed license reviewers for 27 licensing actions for 26 specific licenses. Licensing actions were reviewed for completeness, consistency, proper radioisotopes and quantities, qualifications of authorized users, adequacy of facilities and equipment, adherence to good health physics practices, financial assurance, security requirements, operating and emergency procedures, appropriateness of license conditions, and overall technical quality. The casework was also reviewed for timeliness, use of appropriate correspondence, reference to appropriate regulations, supporting documentation, consideration of enforcement history, pre-licensing visits, peer or supervisory review, and proper signatures.

The licensing casework was selected to provide a representative sample of licensing actions completed during the review period. Licensing actions selected for evaluation included five new licenses, eight renewals, nine amendments, and five license terminations. Casework reviewed included a cross-section of license types, including: medical and academic broadscope, medical institution, nuclear pharmacy, mobile nuclear medicine, industrial radiography, gauges, and self-shielded irradiator. A listing of the licensing casework reviewed can be found in Appendix D.

All licensing actions received by the Section are assigned a log number and entered into the RADMAN license database tracking system. Once the action is entered into the database, the Section Manager reviews the action and assigns it to a license reviewer. All licensing actions are reviewed by a peer license reviewer prior to having a final approval and signature by the Section Manager. The licensing staff uses formal correspondence to licensees for technical notices of deficiencies. The review team assessed that there was not a backlog of licensing actions at the time of the review.

The review team identified several instances where medical licensing actions were authorized with incomplete supporting documentation. For example:

- Physicians were authorized for 10 CFR 35.300 uses when the documentation supported only 10 CFR 35.100 and 200 uses or the authorization should have been limited to the use of sodium iodide I-131, only,

- Reviewers accepted specialty board certifications that were dated previous to the specialty board certifications recognized by the Commission,

- Physicians were approved without the required specialty board attestations provided in the supporting documentation,

- A Delegation of Authority was not included with the supporting documentation for a new Radiation Safety Officer,

- A medical physicist and authorized user were authorized for 10 CFR 35.600 materials, but did not appear to meet the authorized requirements for high-dose rate brachytherapy.

The review team recommends that the program retrain its staff to gain increased familiarity with the regulations under 10 CFR Part 35 and the appropriate NRC guidance documents for medical use authorizations. The Section requested the NRC Region IV office to provide on-site training involving medical license requirements to its staff, which the Region IV office is willing to support. The review team found this to be an acceptable approach to enhance the medical license review training for the Section.

The review team found that non-medical licensing actions were thorough, complete, consistent, and addressed health, safety, and security issues. License tie-down conditions were stated clearly, backed by information contained in the file and enforceable. The review team found that actions terminating licenses were well documented, included the appropriate material survey records, and contained documentation of proper disposal or transfer of radioactive material, as appropriate.

The review team evaluated the financial assurance documents and verified a sampling of the calculations and instruments provided for two licensees. The documentation was maintained by the Section and it was determined to be appropriate, physically secured, and contained the originally signed documents. The review team identified one license condition that allowed the cost estimate for a decommissioning funding plan to be adjusted at a 4-year interval rather than a 3-year interval, as required by regulation. The Section Manager indicated that they would modify the license condition to resolve this oversight. The review team determined that the financial assurance documents and determination of licenses that required financial assurance were adequate.

The review team assessed the Section's implementation of the pre-licensing guidance. The Section had implemented the essential elements of NRC's pre-licensing guidance issued on September 22, 2008, and transmitted to the Agreement States via Office of Federal and State Materials and Environmental Management Programs (FSME) Letter RCPD-08-020, "Requesting Implementation of the Checklist to Provide a Basis for Confidence That Radioactive Material Will Be Used as Specified on a License and the Checklist for Risk-Significant Radioactive Material." Based on the files reviewed, the review team determined that the assigned license reviewer conducted the respective pre-licensing visit prior to the issuance of the license. The pre-licensing checklists were documented sufficiently and the licenses were issued from the office under the Section Manager's signature.

The Section had initiated the process to address maximum possession limits on radioactive materials licenses as requested by RCPD-10-007 letter dated June 21, 2010. The Section had identified the licenses affected and had sent letters to the respective licensees requesting information for the maximum possession limit authorization.

The radioactive materials license files were maintained in a secured location that was accessed by the records administration staff. The radiation management section had to request the license files from the records administration staff. Warning labels on all license files alert staff to ensure that files are appropriately reviewed by the Section for sensitive or security-related information prior to being released to a member of the public under the State's Freedom of Information laws. The Section decided, during the review, to also mark licensing documents that contained sensitive or security-related information, in the same manner that they were marking enforcement documents related to increased controls.

Based on the IMPEP evaluation criteria, the review team recommended, and the MRB agreed, that Oklahoma's performance with respect to the indicator, Technical Quality of Licensing Actions, be found satisfactory, but needs improvement.

3.5 Technical Quality of Incident and Allegation Activities

In evaluating the effectiveness of the Section's actions in responding to incidents and allegations, the review team examined the response to the questionnaire relative to this indicator, evaluated selected incidents reported for Oklahoma in the Nuclear Material Events Database (NMED) against those contained in the Section's files, and evaluated the casework for 16 of the 23 reported radioactive materials incidents. A listing of the casework examined may be found in Appendix E. The review team also evaluated the Section's response to seven allegations (complaints) received during the review period, including three allegations referred to the State by the NRC.

When notified of an incident or an allegation, the Section Manager and inspection staff discuss the initial response and the need for an on-site investigation, based on the safety significance. If the incident meets the reportability thresholds, as established in FSME Procedure SA-300 "Reporting Material Events," the Section notifies the NRC Headquarters Operations Center and updates NMED. Of the 16 incidents evaluated by the review team, all but one had been reported to NRC within the required time frame. The one incident not reported was a 2008 medical event. The Section Manager stated that it was an oversight and it would be sent to the Headquarters Operations Center. The incident was reported to the Headquarters Operations Center on September 24, 2010.

The incidents selected for review included lost or stolen radioactive material, medical, damaged equipment, overexposures, loss of control, contamination, and equipment failures. The review team determined that the Section's responses to incidents were thorough, 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 immediately dispatched inspectors to a site when the possibility of an immediate threat to public health and safety existed. The review team noted that the Section consistently made a strong commitment to perform on-site investigations of incidents.

During the 2006 IMPEP review, the review team recommended that the State take measures to ensure proper documentation and appropriate response, review, enforcement, and follow up of all radioactive materials incidents. As noted above, the review team determined that the Section's response to incidents during the review period was excellent. Documentation of incident investigations, however, was lacking for many of the incidents evaluated by the review team. Section policy is to maintain incident records in individual license files. Of the 16 files reviewed, six did not have the incident investigation reports or other indications to alert inspectors and license reviewers that an incident had occurred at that facility. Investigation reports, sometimes in draft form, were often located in inspectors' personal files. Based on the review team's findings, the recommendation from the 2006 IMPEP review regarding proper documentation of incidents will remain open.

In evaluating the effectiveness of the Section's response to allegations, the review team evaluated the completed casework for seven allegations. The review team concluded that the

Section consistently took prompt and appropriate action in response to concerns raised and adequately protected the identity of allegers. The review team noted that the Section thoroughly documented the investigations and retained all necessary documentation to appropriately close the allegations except that they could not verify that allegers were notified of investigation results at the conclusion of one investigation. Based on the review team's findings, the recommendation from the 2006 IMPEP review regarding proper closure of allegations will remain open.

During the review, the Section Manager provided a refresher training session for all staff members on the handling of allegations, including the alleger notification component.

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

4.0 NON-COMMON PERFORMANCE INDICATORS

Four non-common performance indicators are used to review Agreement State programs: (1) Compatibility Requirements, (2) Sealed Source and Device Evaluation Program, (3) Low-Level Radioactive Waste Disposal Program, and (4) Uranium Recovery Program. NRC's Agreement with Oklahoma does not relinquish regulatory authority for a sealed source and device evaluation program or a uranium recovery program; therefore, only the other two non-common performance indicators applied to this review.

4.1 Compatibility Requirements

4.1.1 Legislation

The Oklahoma Department of Environmental Quality is designated as the State's radiation control agency. The review team did not identify any legislative bills that would affect the State's agreement program that were passed or pending during the review period.

4.1.2 Program Elements Required for Compatibility

The State's regulations for radiation management are located in Chapter 410 of the Oklahoma Administrative Code, Title 252, and apply to all sources of radiation except materials subject to regulation under NRC or a diagnostic x-ray facility regulated by the Oklahoma Department of Public Health. Oklahoma regulations require a license for all persons who receive, possess, use, transfer, own, handle, dispose, store, house, or acquire sources of radiation.

The State of Oklahoma adopts NRC regulations by reference with a list of exemptions for those regulations for which NRC retains jurisdiction. Historically, the review team has found that adopting regulations by reference allows the State to implement regulations quickly and to avoid potential compatibility conflicts.

The Section Manager has the responsibility for maintaining the Oklahoma Radiation Management Regulations compatible with NRC regulations. The rule adoption process involves hearings before the Radiation Management Advisory Council, which recommends the rule to the

Environmental Quality Board. The Board approves or disapproves the proposed amendments. If approved by the Board, the State Legislature considers the amendments during their next session; however, there is no active legislature approval required. The Governor signs the rule or has the authority to veto proposed amendments. The Council usually considers rules in the summer or fall, the Board passes them in the winter, and the rule goes into effect in June or July of the following year. The State does have the ability to use emergency regulations. Emergency regulations can be effected immediately with the Governor's signature; however, they are effective only until the end of the next legislative session. Oklahoma regulations are not subject to "sunset" laws.

Current NRC policy requires that Agreement States adopt certain equivalent regulations or legally binding requirements no later than 3 years after the effective date of NRC's regulations. At the time of the review, it was identified that the following five amendments had not been reviewed for compatibility by NRC and were considered overdue. The Section had promulgated regulations to incorporate the NRC regulations by reference and was implementing the NRC regulations dated January 1, 2008. The Section had not, however, submitted the final regulations to the NRC for a formal compatibility review. During the IMPEP review, the Section submitted the final rule revisions to the NRC for compatibility review. The five overdue amendments were:

- "Financial Assurance for Materials Licensees," 10 CFR Parts 30, 40, 70 amendment (68 FR 57327), that was due for Agreement State implementation on December 3, 2006.

- "Security Requirements for Portable Gauges Containing Byproduct Material," 10 CFR Part 30 amendment (70 FR 2001), that was due for Agreement State implementation on July 11, 2008.

- "Medical Use of Byproduct Material – Recognition of Specialty Boards," 10 CFR Part 35 amendment (70 FR 16336, 71 FR 1926), that was due for Agreement State implementation on April 29, 2008.

- "Minor Amendments," 10 CFR Parts 20, 30, 32, 35, 40 and 70 amendment (71 FR 15005), that was due for Agreement State implementation on March 27, 2009.

- "National Source Tracking System – Serialization Requirements," 10 CFR Part 32 amendment with reference to Part 20 Appendix E (71 FR 65685), that was due for Agreement State implementation on February 6, 2007.

The review team identified the following regulation amendments that are also included in the compatibility package submitted; however, they are not considered overdue because the date of adoption has not passed:

- "Medical Use of Byproduct Material – Minor Corrections and Clarifications," 10 CFR Parts 32 and 35 amendment (72 FR 45147, 54207), that is due for Agreement State adoption by October 29, 2010.

- "Requirements for Expanded Definition of Byproduct Material," 10 CFR Parts 20, 30, 31, 32, 33, 35, 61, 150 amendment (72 FR 55864), that is due for Agreement State adoption by November 30, 2010.

- "Exemptions from Licensing, General Licenses, and Distribution of Byproduct Material: Licensing and Reporting Requirements," 10 CFR Parts 30, 31, 32, 150 amendment (72 FR 58473), that is due for Agreement State adoption by December 17, 2010.

The Section will need to address the following regulations in upcoming rulemaking or by adopting alternate legally binding requirements:

- "Occupational Dose Records, Labeling Containers, and Total Effective Dose Equivalent," 10 CFR Parts 19, 20 amendment (72 FR 68043), that is due for Agreement State adoption by February 15, 2011.

- "Medical Use of Byproduct Material – Authorized User Clarification," 10 CFR Part 35 amendment (74 FR 33901), that is due for Agreement State adoption by September 28, 2012.

The Section Manager expressed his intent to submit regulations for a formal compatibility review every 2 years in order to meet the 3-year requirement. The State was operating under NRC regulations dated January 1, 2008, so while the regulations were not considered compatible, the State did not have any significant compatibility issues.

Based on the IMPEP evaluation criteria, the review team recommended, and the MRB agreed, that Oklahoma's performance with respect to the indicator, Compatibility Requirements, be found satisfactory.

4.2 Low-Level Radioactive Waste Disposal Program

In 1981, the NRC amended its Policy Statement, "Criteria for Guidance of States and NRC in Discontinuance of NRC Regulatory Authority and Assumption Thereof by States Through Agreement" to allow a State to seek an amendment for the regulation of low-level radioactive waste (LLRW) as a separate category. Although the Oklahoma Agreement State Program has LLRW disposal authority, NRC has not required States to have a program for licensing a LLRW disposal facility until such time as the State has been designated as a host State for a LLRW disposal facility. When an Agreement State has been notified or becomes aware of the need to regulate a LLRW disposal facility, they are expected to put in place a regulatory program which will meet the criteria for an adequate and compatible LLRW disposal program. There are no plans for a LLRW disposal facility in Oklahoma. Accordingly, the review team did not review this indicator.

5.0 SUMMARY

As noted in Sections 3.0 and 4.0 above, Oklahoma's performance was found satisfactory, but needs improvement, for the indicators, Status of Materials Inspection Program and Technical Quality of Licensing Actions, and satisfactory for the remaining performance indicators

reviewed. After further discussions, the MRB determined that Oklahoma's performance with regard to the Status of Materials Inspection Program indicator was satisfactory, and found Oklahoma's performance to be satisfactory but needs improvement for Technical Quality of Licensing Actions, and satisfactory for all other indicators. The review team made two recommendations regarding program performance by the State and recommends that two recommendations from the 2006 IMPEP review remain open.

Accordingly, the review team recommends that the Oklahoma Agreement State Program be found adequate to protect public health and safety and compatible with NRC's program. Based on the results of the current IMPEP review, the review team recommends that the next full IMPEP review take place in approximately 4 years, with a periodic meeting tentatively scheduled for September 2012. During the periodic meeting and at the next IMPEP review, NRC will evaluate the effectiveness of the State's response to the review team's recommendations, as well as the overall implementation of the Agreement State program.

Below are the recommendations, as mentioned earlier in the report, for evaluation and implementation by the State:

1. The review team recommends that the Section take appropriate measures to conduct their inspection program in a sustainable manner by continuing to implement their corrective action program. (Section 3.2)

2. The review team recommends that the Program retrain its staff to gain increased familiarity with the regulations under 10 CFR Part 35 and the appropriate NRC guidance documents for medical use authorizations. (Section 3.4)

3. The review team recommends that the State take measures to ensure proper documentation and appropriate response, review, enforcement, and follow up of all radioactive materials incidents. (From the 2006 IMPEP report) (Section 3.5)

4. The review team recommends that the State take measures to ensure proper documentation and appropriate tracking and closure of all allegations involving radioactive material. (From the 2006 IMPEP report) (Section 3.5)

LIST OF APPENDICES

APPENDIX A

IMPEP REVIEW TEAM MEMBERS

Name	**Area of Responsibility**
Jim Lynch, Region III	Team Leader Technical Quality of Incident and Allegation Activities Inspector Accompaniments
David Turberville, Alabama	Status of Materials Inspection Program Technical Quality of Inspections
Rachel Browder, Region IV	Technical Quality of Licensing Actions Compatibility Requirements
Maria Arribas-Colon, FSME	Technical Staffing and Training

APPENDIX B

OKLAHOMA ORGANIZATION CHARTS

ADAMS ACCESSION NO.: ML102450147

APPENDIX C

INSPECTION CASEWORK REVIEWS

NOTE: CASEWORK LISTED WITHOUT COMMENT IS INCLUDED FOR COMPLETENESS.

File No.: 1
Licensee: INTEGRIS Grove Hospital — License No.: OK-31019-01
Inspection Type: Routine, Unannounced — Priority: 3
Inspection Date: 6/12/08 — Inspector: JM

File No.: 2
Licensee: The University of Oklahoma – Norman Campus — License No.: OK-07466-05
Inspection Type: Routine, Announced — Priority: 3
Inspection Date: 3/9/10 — Inspectors: NN, MV

File No.: 3
Licensee: AIMRIGHT Testing, LLC — License No.: OK-32106-01
Inspection Type: Initial, Announced — Priority: 5
Inspection Date: 9/2/09 — Inspector: KC

Comment:
The inspection letter was issued 10 days past the Section's 30-day goal.

File No.: 4
Licensee: APAC-Oklahoma, Inc. — License No.: OK-26937-02
Inspection Type: Routine, Unannounced — Priority: 5
Inspection Date: 4/1/10 — Inspectors: MV, MB

Comment:
The inspection letter was issued 13 days past the Section's 30-day goal.

File No.: 5
Licensee: Sherwood Construction Company, Inc. — License No.: OK-31031-01
Inspection Type: Routine, Unannounced — Priority: 5
Inspection Date: 8/11/10 — Inspector: KC

File No.: 6
Licensee: ConocoPhillips Co. — License No.: OK-07402-12
Inspection Type: Routine, Unannounced — Priority: 5
Inspection Date: 4/21/10 — Inspectors: MV, NN

File No.: 7
Licensee: Baker Hughes Oilfield Operations, Inc. — License No.: OK-02964-03
Inspection Type: Routine, Unannounced — Priority: 3
Inspection Dates: 7/10/08, 8/21/08 — Inspectors: JF, JR

File No.: 8
Licensee: Halliburton Energy Services, Inc. License No.: OK-00502-03
Inspection Type: Routine, Unannounced Priority: 3
Inspection Date: 1/12/09 Inspectors: JF, MB

File No.: 9
Licensee: Southeast 3 Circuit Engineering District License No.: OK-31056-01
Inspection Type: Routine, Unannounced Priority: 5
Inspection Date: 8/13/10 Inspector: MB

File No.: 10
Licensee: St. John Medical Center License No.: OK-00376-02
Inspection Type: Routine, Unannounced Priority: 2
Inspection Dates: 6/30/09, 9/15/09 Inspectors: NN, MV

File No.: 11
Licensee: Sagebrush Pipeline & Inspection Co., Inc. License No.: OK-32109-01
Inspection Type: Routine, Unannounced Priority: 1
Inspection Date: 10/28/09 Inspector: MI

File No.: 12
Licensee: Lone Star Industries, Inc. License No.: OK-32111-01
Inspection Type: Initial Priority: 5
Inspection Date: 3/10/10 Inspector: KC

Comment:
The inspection report was not complete at the time of review, 6 months after the inspection.

File No.: 13
Licensee: Team Industrial Services, Inc. License No.: OK-31066-01
Inspection Type: Routine, Unannounced Priority: 1
Inspection Date: 2/25/10 Inspectors: JR, KC

File No.: 14
Licensee: Oklahoma Heart Institute License No.: OK-27613-01
Inspection Type: Routine, Unannounced Priority: 3
Inspection Date: 10/8/08 Inspector: MI

File No.: 15
Licensee: American Piping Inspections, Inc. License No.: OK-27438-02
Inspection Type: Routine, Unannounced Priority: 1
Inspection Date: 8/25/09 Inspector: KS

File No.: 16
Licensee: Midwest Inspection Services License No.: OK-27005-01
Inspection Type: Routine, Unannounced Priority: 1
Inspection Dates: 8/10/09, 8/13/09 Inspector: KS

File No.: 17
Licensee: HCA Health Services of Oklahoma, Inc. License No.: OK-21035-01
Inspection Type: Routine, Unannounced Priority: 1
Inspection Date: 9/18/08 Inspector: MI

File No.: 18
Licensee: Memorial Hospital of Texas County License No.: OK-23125-01
Inspection Type: Routine, Unannounced Priority: 3
Inspection Dates: 10/1/09 – 1/15/10 Inspector: MV

File No.: 19
Licensee: Nuclear Rx, PC License No.: OK-31035-01MD
Inspection Type: Routine, Unannounced Priority: 2
Inspection Date: 2/7/08 Inspector: JF

File No.: 20
Licensee: Baylor Medical Center at Garland License No.: L02398
Inspection Type: Reciprocity, Announced Priority: 7
Inspection Date: 11/9/07 Inspectors: JM, MB

File No.: 21
Licensee: Koss Construction Company License No.: 22-B780
Inspection Type: Reciprocity, Unannounced Priority: 5
Inspection Date: 5/23/07 Inspectors: CC, KS

File No.: 22
Licensee: Gulf Coast Weld Specialists License No.: L054261
Inspection Type: Reciprocity, Unannounced Priority: 1
Inspection Date: 11/7/08 Inspectors: JM, MI

Comment:
The inspection letter was not in file and not located during the review. No violations were identified.

File No.: 23
Licensee: NQS Inspections, LTD License No.: L06262
Inspection Type: Reciprocity, Unannounced Priority: 1
Inspection Date: 2/16/10 Inspector: KS

File No.: 24
Licensee: J. L. Shepherd and Associates License No.: CA-1777-19
Inspection Type: Reciprocity, Unannounced Priority: 2
Inspection Dates: 9/14-15/06 Inspector: JM

Comment:
The inspection letter was issued 18 days past the Section's 30-day goal.

File No.: 25
Licensee: Nucletron Corporation License No.: MD-27-035-01
Inspection Type: Reciprocity, Unannounced Priority: 5
Inspection Date: 11/15/06 Inspectors: KS, JF

File No.: 26
Licensee: Nucletron Corporation License No.: MD-27-035-01
Inspection Type: Reciprocity, Unannounced Priority: 5
Inspection Date: 5/21/08 Inspector: JM

Comment:
The inspection letter was issued 18 days past the Section's 30-day goal.

File No.: 27
Licensee: Nucletron Corporation License No.: MD-27-035-01
Inspection Type: Reciprocity, Unannounced Priority: 5
Inspection Dates: 1/13-15/08 Inspectors: MI, JR

File No.: 28
Licensee: Best Theratronics License No.: 45-31299-01
Inspection Type: Reciprocity, Unannounced Priority: 2
Inspection Date: 9/29/09 Inspector: JF

File No.: 29
Licensee: Alpha-Omega Services, Inc. License No.: CA-3925-19
Inspection Type: Reciprocity, Unannounced Priority: 2
Inspection Dates: 3/3-6/09 Inspector: MI

File No.: 30
Licensee: Nondestructive and Visual Inspection License No.: LA-5601-L01
Inspection Type: Reciprocity, Announced Priority: 1
Inspection Date: 9/5/08 Inspector: MI

INSPECTOR ACCOMPANIMENTS

The following inspector accompaniments were performed prior to the on-site IMPEP review:

Accompaniment No.: 1
Licensee: INTEGRIS Southwest Medical Center License No.: OK-13127-01
Inspection Type: Routine, Unannounced Priority: 2
Inspection Date: 7/13/10 Inspector: NN

Accompaniment No.: 2
Licensee: MISTRAS Group, Inc License No.: OK-31077-01
Inspection Type: Routine, Unannounced Priority: 1
Inspection Date: 7/14/10 Inspector: MI

Accompaniment No.: 3
Licensee: Equine Medical Associates, Inc. License No.: OK-27487-01
Inspection Type: Routine, Unannounced Priority: 5
Inspection Date: 7/15/10 Inspector: MV

APPENDIX D

LICENSE CASEWORK REVIEWS

NOTE: CASEWORK LISTED WITHOUT COMMENT IS INCLUDED FOR COMPLETENESS.

File No.: 1
Licensee: Cancer Care Associates — License No.: OK-27631-01
Type of Action: Renewal — Amendment No.: 18
Date Issued: 1/27/10 — License Reviewer: KS

Comment:
A Delegation of Authority for the Radiation Safety Officer was not included as part of the renewal package, to meet 10 CFR 35.24(b).

File No.: 2
Licensee: Century Geophysical Corporation — License No.: OK-04017-05
Type of Action: Renewal — Amendment No.: 07
Dates Issued: 11/12/08 — License Reviewer: JF

File No.: 3
Licensee: AIMRIGHT Testing, LLC — License No.: OK-32106-01
Type of Action: New — Amendment No.: New
Dates Issued: 4/22/09 — License Reviewer: KC

File No.: 4
Licensee: Comprehensive Cancer Center of Oklahoma — License No.: OK-31053-01
Type of Action: Amendment — Amendment No.: 05
Date Issued: 6/22/09 — License Reviewer: NN

Comments:
a) A physician was authorized for samarium-153, which is a 10 CFR 35.300 modality, without supporting documentation.
b) There was no Delegation of Authority for the new Radiation Safety Officer that was authorized on the license.

File No.: 5
Licensee: Muskogee Regional Medical Center — License No.: OK-13157-01
Type of Action: Amendment — Amendment No.: 60
Date Issued: 4/30/10 — License Reviewer: MV

Comment:
A physician was authorized for 10 CFR 35.300 uses without supporting documentation.

File No.: 6
Licensee: Oklahoma Blood Institute — License No.: OK-17900-02
Type of Action: Renewal — Amendment No.: 04
Date Issued: 8/22/07 — License Reviewer: JF

File No.: 7
Licensee: Oklahoma State University Medical Center License No.: OK-05860-01
Type of Action: Amendment Amendment No.: 66
Date Issued: 12/11/09 License Reviewer: MB

Comment:
A physician was authorized for 10 CFR 35.500 uses without supporting documentation.

File No.: 8
Licensee: Midwest City H.M.A., Inc. License No.: OK-14990-01
Type of Action: Renewal Amendment No.: 38
Date Issued: 7/29/10 License Reviewer: MV

Comment:
A physician was authorized for 10 CFR 35.300 uses; however, based on the documentation submitted, the physician should have been limited to "oral administration of sodium iodide I-131."

File No.: 9
Licensee: Schlumberger Technology Corporation License No.: OK-00090-03
Type of Action: Renewal Amendment No.: 06
Date Issued: 4/23/09 License Reviewer: JF

File No.: 10
Licensee: Lone Star Industries, Inc. License No.: OK-32111-01
Type of Action: New Amendment No.: New
Date Issued: 10/15/09 License Reviewer: JR

File No.: 11
Licensee: INTEGRIS Baptist Medical Center License No.: OK-11022-01
Types of Action: Amendment Amendment No.: 69
Dates Issued: 9/7/06 License Reviewer: KS

Comments:
a) A medical physicist was authorized for iridium-192 high dose-rate brachytherapy, without supporting documentation.
b) A physician was authorized for 10 CFR 35.600 uses without adequate supporting documentation.

File No.: 12
Licensee: Sagebrush Pipeline and Equipment Company, Inc. License No.: OK-32109-01
Types of Action: New Amendment No.: New
Dates Issued: 4/27/09 License Reviewer: KS

File No.: 13
Licensee: Terracon, Inc. License No.: OK-27070-02
Type of Action: Amendment Amendment No.: 09
Date Issued: 6/17/09 License Reviewer: RJ

File No.: 14
Licensee: J&L Oilfield Services License No.: OK-32093-01
Type of Actions: New & Termination Amendment Nos.: New & 01
Dates Issued: 10/19/07 & 11/14/08 License Reviewers: KS, MV

Comment:
The license reviewer did not authorize the correct quantity of americium-241 for Troxler Model 3440 gauges.

File No.: 15
Licensee: Desert Industrial X-Ray, L.P. License No.: OK-32104-01
Type of Action: New Amendment No.: New
Date Issued: 2/26/09 License Reviewer: KS

File No.: 16
Licensee: Core Laboratories LP License No.: OK-26928-02
Type of Action: Renewal Amendment No.: 07
Date Issued: 3/9/09 License Reviewer: KS

Comment:
The license reviewer authorized a 100 uCi quantity for collar markers which exceeded the regulatory limits authorized in 10 CFR 30.71.

File No.: 17
Licensee: American Castings, LLC License No.: OK-18099-01
Type of Action: Renewal Amendment No.: 17
Date Issued: 9/22/09 License Reviewer: JR

Comment:
The renewal application did not contain procedures, radiography test with answers, drawings of the facility/storage areas, policy for dosimetry and instrument calibration, which are considered to be some of the essential elements of the radiation safety program.

File No.: 18
Licensee: Conoco Phillips Co. License No.: OK-07402-11
Type of Action: Termination Amendment No.: 14
Date Issued: 8/12/09 License Reviewer: KS

File No.: 19
Licensee: Ramey Testing Laboratory, Inc. License No.: OK-21291-01
Type of Action: Termination Amendment No.: 04
Date Issued: 5/3/10 License Reviewer: KC

File No.: 20
Licensee: HCA Health Services of Oklahoma, Inc. License No.: OK-12091-02
Type of Action: Amendment Amendment No.: 22
Date Issued: 7/7/07 License Reviewer: KC

Comment:
A physician was authorized for 10 CFR 35.600 (gamma knife) under a board certification that was prior to the date approved by the NRC; therefore, the applicant should have been reviewed under 10 CFR 35.690(b)(1), training and experience.

File No.: 21
Licensee: Cornerstone Healthcare Partners License No.: OK-31042-01
Type of Action: Termination Amendment No.: 07
Date Issued: 6/4/09 License Reviewer: NN

File No.: 22
Licensee: Bill Miller, Inc. License No.: OK-19048-02
Type of Action: Termination Amendment No.: 06
Date Issued: 6/2/10 License Reviewer: KS

File No.: 23
Licensee: The University of Oklahoma, Norman License No.: OK-07466-05
Type of Action: Renewal Amendment No.: 43
Date Issued: 7/22/08 License Reviewer: KS

File No.: 24
Licensee: Oklahoma State University License No.: OK-00237-03
Type of Action: Amendment Amendment No.: 39
Date Issued: 11/3/06 License Reviewer: BS

File No.: 25
Licensee: PetNet Solutions, Inc. License No.: OK-31050-01MD
Type of Action: Amendment Amendment No.: 02
Date Issued: 9/10/09 License Reviewer: NN

File No.: 26
Licensee: Oklahoma Medical Research Foundation License No.: OK-07464-03
Type of Action: Amendment Amendment No.: 48
Date Issued: 4/1/09 License Reviewer: MV

APPENDIX E

INCIDENT CASEWORK REVIEWS

NOTE: CASEWORK LISTED WITHOUT COMMENT IS INCLUDED FOR COMPLETENESS.

File No.: 1
Licensee: Capital X-Ray Services, Inc. License No.: OK-11114-02
Date of Incident: 8/16/09 NMED No.: 090720
Investigation Date: 10/16/09 Type of Incident: Overexposure
Type of Investigation: Site

Comment:
The incident report was not located in the license file.

File No.: 2
Licensee: Saint Anthony Hospital License No.: OK-01428-03
Date of Incident: 4/27/07 NMED No.: 070295
Investigation Date: 5/10/07 Type of Incident: Medical
Type of Investigation: Site

File No.: 3
Licensee: Oklahoma State University License No.: OK-00237-03
Date of Incident: 10/30/08 NMED No.: 080753
Investigation Date: 11/14/08 Type of Incident: Overexposure
Type of Investigation: Site

File No.: 4
Licensee: ThruBit LLC License No.: OK-32115-01
Date of Incident: 7/27/10 NMED No.: 100392
Investigation Date: 7/28/10 Type of Incident: Lost Source
Type of Investigation: Telephone

File No.: 5
Licensee: American Airlines License No.: OK-13964-01
Date of Incident: 11/21/09 NMED No.: 100184
Investigation Date: 3/30/10 Type of Incident: Lost/Stolen Material
Type of Investigation: Telephone

Comment:
The incident report was not located in the license file.

File No.: 6
Licensee: Standard Testing and Engineering Co. License No.: OK-17054-03
Date of Incident: 6/28/10 NMED No.: 100334
Investigation Date: 7/20/10 Type of Incident: Lost/Stolen Material
Type of Investigation: Site

File No.: 7
Licensee: Burgess Engineering and Testing License No.: OK-27554-01
Date of Incident: 7/24/10 NMED No.: 100385
Investigation Date: 7/27/10 Type of Incident: Lost/Stolen Material
Type of Investigation: Site

Comment:
The incident report was not located in the current license file, but rather in an old license file.

File No.: 8
Licensee: Midwest Inspection Services License No.: OK-27005-01
Date of Incident: 1/21/07 NMED No.: 070050
Investigation Date: 1/21/07 Type of Incident: Loss of Control
Type of Investigation: Site

Comment:
The incident report was not located in the license file.

File No.: 9
Licensee: Globe X-Ray Services License No.: OK-15194-02
Date of Incident: 8/31/07 NMED No.: 070598
Investigation Date: 10/3/07 Type of Incident: Overexposure
Type of Investigation: Site

File No.: 10
Licensee: Kleinfelder Central, Inc. License No.: OK-27597-02
Date of Incident: 10/24/07 NMED No.: 070658
Investigation Date: 10/26/07 Type of Incident: Lost/Stolen Material
Type of Investigation: Site

File No.: 11
Licensee: Kay County Hospital License No.: OK-14046-02
Date of Incident: 3/28/07 NMED No.: 070183
Investigation Date: 4/6/07 Type of Incident: Medical
Type of Investigation: Site

File No.: 12
Licensee: Oklahoma State Univ. Medical Center License No.: OK-05860-01
Date of Incident: 4/16/08 NMED No.: 080237
Investigation Date: 4/22/08 Type of Incident: Contamination
Type of Investigation: Site

File No.: 13
Licensee: Team Industrial Services, Inc. License No.: OK-31066-01
Date of Incident: 7/25/07 NMED No.: 070472
Investigation Date: 7/26/07 Type of Incident: Damaged Equipment
Type of Investigation: Site

Comment:
The incident report was not located in the license file.

File No.: 14
Licensee: Ramey Enterprises License No.: OK-21291-01
Date of Incident: 6/19/08 NMED No.: 080359
Investigation Date: 6/19/08 Type of Incident: Lost/Stolen Material
Type of Investigation: Site

File No.: 15
Licensee: Oklahoma Dept. of Transportation License No.: OK-15794-01
Date of Incident: 7/22/10 NMED No.: 090684
Investigation Date: 7/22/10 Type of Incident: Damaged Equipment
Type of Investigation: Telephone

Comment:
The incident report was not located in the license file.

File No.: 16
Licensee: St. John Medical Center License No.: OK-03760-02
Date of Incident: 1/10/08 NMED No.: N/A
Investigation Date: 1/30/08 Type of Incident: Medical
Type of Investigation: Site

Comment:
This incident was not reported to the NRC Operations Center nor entered into the Nuclear Material Events Database at the time of the review. The incident was reported to the NRC Operations Center, after the review, on September 24, 2010.

ATTACHMENT

November 15, 2010 Email from Mike Broderick
Oklahoma's Response to the Draft Report
ADAMS Accession No.: ML103190270