memorandum

DATE: June 21, 2001

REPLY TO ATTN OF: CBFO:QA:MLC:VW:01-1149:UFC:2300

SUBJECT: Issuance of Corrective Action Report (CAR) 01-045

TO: Lori Fritz, ID

The Carlsbad Field Office (CBFO) has identified a condition adverse to quality regarding the use of the SWEPP Waste Assay Gamma Spectrometer (WAGS) System by INEEL without first being certified to use this system by CBFO.

Please document on the attached CAR Continuation Sheet your proposed corrective actions and a schedule for completion and forward to me prior to the response due date identified in CAR Block 14.

If you have any questions or comments, please contact me at (505) 234-7423.

Attachment

cc: w/attachment
K. Watson, CBFO
L. Chism, CBFO
J. Wells, DOE-ID
G. Beausoleil, DOE-ID
T. Preston, BBWI
T. Monk, BBWI
M. Eagle, EPA
D. Winter, DNFSB
S. Zappe, NMED
B. Walker, EEG
M. Gerle, WTS
J. Schuetz, CTAC

Samuel A. Vega
Quality Assurance Manager
### CORRECTIVE ACTION REPORT

1. **CAR No.:** 01-045  
2. **Activity Report No.:** NA  
3. **Page:** 1 of 1

5. **CBFO Assessment Team Leader:** Kerry Watson

6. **Responsible Organization:** INEEL  
7. **CAQ Was Discussed With:** Lori Fritz, Jerry Wells, Tom Monk

8. **Requirement that was violated:**  
The CBFO certification letter dated May 18, 2001, contains the following stipulation, “TRU waste characterization, certification, or transportation using significantly revised or new processes and systems must be evaluated by the CBFO prior to their implementation.”

9. **Condition Adverse to Quality:**  
The INEEL began using the SWEPP Waste Assay Gamma Spectrometer (WAGS) System in December 2000 to assay waste that has been shipped to WIPP. This system and its operating procedure (TPR-1654) had not been evaluated by CBFO and the operating procedure had not been listed as approved in a CBFO certification letter.

10. **Suggested Actions (Optional):**

11a. **Significant CAQ** (Yes or No): Yes  
11b. **Work Suspension Recommended** (Yes or No): No  
11c. **CCA-Related** (Yes or No): Yes  
11d. **RCRA-Related** (Yes or No): No

12. **Types of Actions:** Remedial: X  
    Investigative: X  
    Root Cause: X  
    Actions to Preclude Recurrence: X

13. **CAR Initiator:** Wayne Ledford  
    **Date:** 6/20/2001

14. **Response Due Date:** July 4, 2001  
    **Corrective Action Plan Required:** YES

15. **Concurrence:**  
    Assessment Team Leader:  
    Date: 6/20/01  
    Responsible Assistant Manager:  
    Date: NA

16. **Corrective Actions Proposed by the Responsible Organization:** Use CAR Continuation Sheet

17. **Acceptance of Proposed Corrective Actions:**

18. **Verification of Corrective Action Completion:** (Use CAR Continuation Sheet)

19a. **Verified By:**  
    **Date:**

19b. **Trend Cause Code:**

20. **Closure:**  
    Quality Assurance Manager:  
    **Date:**