

# Region I NMSS Licensee Event Report

Licensee AGILENT TECHNOLOGIES

Event Description NOTICE OF GENERAL LICENSE DEVICE WITH HIGH REMOVABLE  
ACTIVITY

License # 07-28762-02G    Docket # 03002988    MLER-RI / 2004- 046  
 Event Date DEC 03    Report Date DEC 03

1. REPORTING REQUIREMENT

|   |   |
|---|---|
| <input type="checkbox"/> 10 CFR 20.2201 Theft or Loss<br><input type="checkbox"/> 10 CFR 20.2203 30 Day Report<br><input type="checkbox"/> 10 CFR 30.50 Report<br><input checked="" type="checkbox"/> Other <span style="border: 1px solid black; padding: 2px;">10 CFR 31.5</span> | <input type="checkbox"/> 10 CFR 35.33 Misadministration<br><input type="checkbox"/> License Condition |
|---|---|

2. REGION I RESPONSE

|   |  |                |  |                |  |                |  |                                       |  |   |  |
|---|--|----------------|--|----------------|--|----------------|--|---------------------------------------|--|---|--|
| <input type="checkbox"/> Immediate Site Inspection<br><input type="checkbox"/> Special Inspection<br><input type="checkbox"/> Telephone Inquiry<br><input type="checkbox"/> Preliminary Report<br><input checked="" type="checkbox"/> Information Entered in RI Log<br><input type="checkbox"/> Report referred to: _____ | <table border="0" style="width: 100%;"> <tr> <td style="width: 50%;">Inspector/Date</td> <td style="border: 1px solid black; width: 50%;"></td> </tr> <tr> <td>Inspector/Date</td> <td style="border: 1px solid black;"></td> </tr> <tr> <td>Inspector/Date</td> <td style="border: 1px solid black;"></td> </tr> <tr> <td><input type="checkbox"/> Daily Report</td> <td></td> </tr> <tr> <td><input checked="" type="checkbox"/> Review at next inspection</td> <td></td> </tr> </table> | Inspector/Date |  | Inspector/Date |  | Inspector/Date |  | <input type="checkbox"/> Daily Report |  | <input checked="" type="checkbox"/> Review at next inspection |  |
| Inspector/Date  |  |                |  |                |  |                |  |                                       |  |   |  |
| Inspector/Date  |  |                |  |                |  |                |  |                                       |  |   |  |
| Inspector/Date  |  |                |  |                |  |                |  |                                       |  |   |  |
| <input type="checkbox"/> Daily Report   |  |                |  |                |  |                |  |                                       |  |   |  |
| <input checked="" type="checkbox"/> Review at next inspection   |  |                |  |                |  |                |  |                                       |  |   |  |

3. REPORT EVALUATION

|  |   |
|--|---|
| <input checked="" type="checkbox"/> Description of Event<br><input checked="" type="checkbox"/> Levels of RAM Involved<br><input checked="" type="checkbox"/> Cause of Event | <input checked="" type="checkbox"/> Corrective Actions<br><input type="checkbox"/> Calculations Adequate<br><input type="checkbox"/> Additional Information Requested from Licensee |
|--|---|

4. SPECIAL INSTRUCTIONS OR COMMENTS


Public

X

Non-Public

Completed by: Ruth Ullrich  
 Reviewed by: [Signature]

Initials/Date 8/20/04  
 Date 8/20/2004

 **Agilent Technologies**  
2850 Centerville Road  
Wilmington, DE 19808

Division of Nuclear Materials Safety  
U.S. Nuclear Regulatory Commission  
Region I  
475 Allendale Road,  
King of Prussia, PA 19406

Re: Notice of General License device with high removable activity (NRC License 07-28762-02G)

December 18, 2003

Dear Sir or Madam,

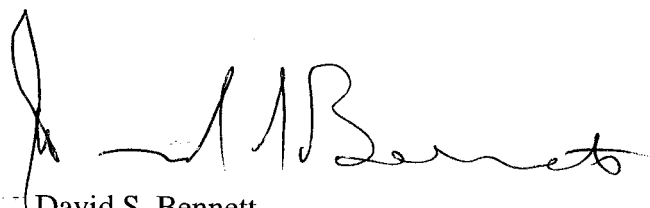
Per the requirements of 10 CFR 31.5, I am notifying your office of the following devices returned to us by customers from which we have obtained removable activity wipes in excess of 0.005  $\mu\text{Ci}$ . The cells were evaluated by support engineering and their disposition is identified below. Cell serial number K1394 is from a U.S. customer and the others were from foreign customers. I have contacted the U.S. customer for further information.

| Serial # | Model # | Activity<br>( $\mu\text{Ci}$ ) | Disposition | Comments   |
|----------|---------|--------------------------------|-------------|--|
| L2178    | 19235*  | 0.537                          | Scrapped    | Cell 16 years old. Source machined or abrasively cleaned by other provider |
| L4269    | 19235*  | 0.265                          | Scrapped    | Cell 15 years old. Source rough, dark color                                |
| S2023    | 19303*  | 0.006                          | Scrapped    | Cell 12 years old. Green scale on source                                   |
| L5481    | 19233   | 0.021                          | Scrapped    | Cell was 14 years old. Green scale on plated surface                       |
| L5510    | 19233   | 0.229                          | Scrapped    | Cell 14 years old. Source dark and rough                                   |
| F6879    | 19233   | 0.022                          | Scrapped    | Cell 10 years old. Source corroded   |
| U0633    | G2397A  | 0.016                          | Scrapped    | Cell 6 years old. Source coated with green fibers                          |
| U3253    | G2397A  | 0.078                          | Scrapped    | Cell 2 years old. Cracks in source plated surface                          |

\*Specific license model.

Please contact me at 302-633-8262 if there are any questions.

Thank you,

A handwritten signature in black ink, appearing to read "D. S. Bennett". The signature is fluid and cursive, with a large initial "D" and "S".

David S. Bennett  
Radiation Safety Officer