

801 32nd Ave.
Brookings, SD 57006
P. 605/697-8500
F. 605/697-8507

Biogenetic Services, Inc.

Fax

To: Jim Montgomery

From: Arla Bush

Fax: 925/673-0112

Pages: 4

Phone:

Date: 12/3/2004

Re: Calibration report

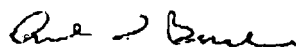
CC:

Dear Mr. Montgomery,

Following are the documents you requested. The last isotope we purchased was one mCi in January, 2004. As of September, 2004 it had decayed to a specific activity of 0.00002 mCi. I hope these documents will be sufficient to allow decommissioning to proceed.

Thank you.

Sincerely,



Arla L. Bush, Ph.D.

Dec 01 04 04:29p

Paul Hurley

(208) 523-5898

P.2

Form #108 Revision 1, 9-8-01

Dose Rate Probe



Instrumentation and Professional Services
101 Technology Dr. Idaho Falls, Idaho 83401
(208) 523-5857 FAX (208) 523-6855

DOSE RATE INSTRUMENT

CUSTOMER INFORMATION									
Customer: Biogenetic Services Inc.				Address: 881 32nd Ave		Brookings SD 57808			
Contact: Aris Bush				ITS #: 5348-82		PO #: verbal		Phone #: 605-687-5508	
Comments:				Date: 7/18/2002		FAX #:			
INSTRUMENT IDENTIFICATION									
MFG'R: Ludlum		MOD #: Mod 2		S/N: 73847		CAL DATE: 7/17/2002		Next Cal Due: 7/17/2003	
PROBE IDENTIFICATION									
MFG'R: Ludlum		MOD #: 44-7		S/N: 11351		CAL DATE: 7/17/2002		Next Cal Due: 7/17/2003	
QAL-TEK QA & CALIBRATION PROCEDURE									
QAL-TEK Quality Assurance Management Plan (QP-PRO-001) Rev. #2						Procedure #: CP-PRO-248		Revision #1	
ENVIRONMENTAL CONDITIONS									
Temp.: 24 C		Press.: 25.25		In Hg		% Humidity: 42%		Laboratory Elevation: 4,786 Feet	
INSTRUMENT & PROBE RECEIPT CONDITION									
Contamination: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Battery Condition: <input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail		Damage Category: <input checked="" type="checkbox"/> N/A <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3					
High Voltage: <input checked="" type="checkbox"/> OK		Batteries Replaced: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Quantity & Type:					
MEASUREMENT & TEST EQUIPMENT									
Ludlum Mod. 500-48 Pulser		Cal Due: 2-22-03		Lab Equip #12		Fluke Mod. # 88 IV DVM, sn 73980331		Cal Due 8-16-03	
Shepherd Mod. 81-10 sn 9004		Cal Due: 2-22-03		Lab Equip #01		Eberline Mod. MP2 Pulser sn 906		Cal Due 8-16-03	
AS FOUND DOSE RATE PROBE TEST RESULTS									
Source ID #	Isotope	Scale/Range	Auto Range	Expected Reading	Observed Reading	Background Reading	Net Reading	Tolerance %	Pass/Fail
pulser		X0.1	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	0.25 mR	0.21 mR	0 µR	0.2 mR	20%	P
01-500	Cs 137	X1	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	2.5 mR	2.76 mR	20 µR	2.7 mR	20%	P
01-500	Cs 137	X10	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	25 mR	27.00 mR	20 µR	27.0 mR	20%	P
01-500			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	mR	mR	µR	mR	20%	
01-110			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	mR	mR	µR	mR	20%	
AS LEFT CALIBRATION & TEST MEASUREMENTS									
Source ID #	Isotope	Scale/Range	Auto Range	Expected Reading	Observed Reading	Background Reading	Net Reading	Tolerance %	Pass/Fail
pulser		X0.1	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	0.1 mR	0.10 mR	0 µR	0.1 mR	10%	P
pulser		X0.1	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	0.4 mR	0.40 mR	0 µR	0.4 mR	10%	P
01-500	Cs 137	X1	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	1 mR	1.00 mR	20 µR	1.0 mR	10%	P
01-500	Cs 137	X1	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	4 mR	4.20 mR	20 µR	4.2 mR	10%	P
01-500	Cs 137	X10	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	10 mR	10.00 mR	20 µR	10.0 mR	10%	P
01-500	Cs 137	X10	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	40 mR	43.00 mR	20 µR	43.0 mR	10%	P
			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	mR	mR	µR	mR	10%	
			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	mR	mR	µR	mR	10%	
			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	mR	mR	µR	mR	10%	
			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	mR	mR	µR	mR	10%	
POST CALIBRATION OPERATIONAL CHECKS									
Reproducibility: <input type="checkbox"/> N/A <input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail		High Voltage: <input checked="" type="checkbox"/> OK <input type="checkbox"/> 900		Stability: <input type="checkbox"/> N/A <input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail					
Zero Check: <input type="checkbox"/> N/A <input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail		Geotropism: <input type="checkbox"/> N/A <input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail		FAIL <input type="checkbox"/>					
CALIBRATION RESULTS									
CALIBRATION TECHNICIAN						DATE 7/17/2002			
OPERATIONS MANAGER						DATE 7/17/2002			
<p>QAL-TEK ASSOCIATES, LLC, certify that the above instrument has been calibrated by radioactive standards traceable to the National Institute of Standards and Technology (NIST), or traceable to calibration facilities for other International Standards Organization members, or have been derived from accepted values of natural/physical constants, or have been derived by the ratio type of calibration techniques. Accuracy of the principal radiation sources used in the calibration is greater or equal to the required accuracy of the equipment being calibrated. The QAL-TEK calibration system conforms to ANSI N323-1997. All calibrations are performed in accordance with the customers Purchase Order requirements and the QAL-TEK Quality Assurance Management Program (QP-PRO-001 Revision 3, 2001) which is available at the customers request.</p>									

2004 decommissioning, 2004 monthly rad material.xlsSpecific Activity calc: $(\#mCi) \cdot (0.5)^{(\text{days past ref.}/14.3)}$ NOTE: 365 + current day of yr =
day of yr for 2003 receipts

Date Rcd	Ref. Date	Ref. Date- Day of Yr.	Current Day of Yr.	Days past ref.	Amt (mCi)	SA of 1 mCi	Total SA	vial #
14-Jan	1/17/2004	17	244	227	1	0.00002	0.00002	1323

Total on Hand: 0.00002

all

12/3/2004

TELEPHONE CONVERSATION RECORD

Date: November 23, 2004

Name of person called or who called you:

Arla Bush

Organization: Biogenetic Services, Inc.

☐ Incoming

☒ Outgoing

Phone No.: 605-697-8500

Subject: Deficiency Phone Call

Summary: Laboratory close out survey record need to show:

1. Date of last survey instrument calibration, who calibrated and efficiency factor for P-32. Ms. Bush will locate records and fax to me.
2. Date of survey was 9/23/04.
3. Last P-32 purchase (1 mCi) was in January 2004.

Signature of person documenting this conversation:


James L. Montgomery

\RA\ Date: 11/23/04

ML043380410