

RI - DNMS Licensee Event Report Disposition

Licensee: Professional Testing

Event Description: Gauge Damaged

License No: 37-28744-01 Docket No: 03032724 MLER-RI: 2005-055
 Event Date: 7-26-05 Report Date: 7-26-05 HQ Ops Event #: _____

1. REPORTING REQUIREMENT

<input type="checkbox"/> 10 CFR 20.1906 Package Contamination <input type="checkbox"/> 10 CFR 20.2201 Theft or Loss <input checked="" type="checkbox"/> 10 CFR 20.2203 30 Day Report <input type="checkbox"/> Other _____	<input type="checkbox"/> 10 CFR 30.50 Report <input type="checkbox"/> 10 CFR 35.3045 Medical Event <input type="checkbox"/> License Condition
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2. REGION I RESPONSE

<input type="checkbox"/> Immediate Site Inspection <input checked="" type="checkbox"/> Special Inspection <input checked="" type="checkbox"/> Telephone Inquiry <input type="checkbox"/> Preliminary Notification/Report <input checked="" type="checkbox"/> Information Entered in RI Log <input type="checkbox"/> Report Referred To: _____	Inspector/Date: _____ Inspector/Date: <u>TBD</u> Inspector/Date: <u>S. Ledhi 7/26/05</u> <input type="checkbox"/> Daily Report <input type="checkbox"/> Review at Next Inspection
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3. REPORT EVALUATION

<input checked="" type="checkbox"/> Description of Event <input checked="" type="checkbox"/> Levels of RAM Involved <input checked="" type="checkbox"/> Cause of Event	<input checked="" type="checkbox"/> Corrective Actions <input checked="" type="checkbox"/> Calculations Adequate <input type="checkbox"/> Additional Information Requested from Licensee
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4. MANAGEMENT DIRECTIVE 8.3 EVALUATION

<input type="checkbox"/> Release w/Exposure > Limits <input type="checkbox"/> Repeated Inadequate Control <input type="checkbox"/> Exposure 5x Limits <input type="checkbox"/> Potential Fatality If any of the above are involved: <input type="checkbox"/> Considered Need for IIT Decision/Made By/Date: _____	<input type="checkbox"/> Deliberate Misuse w/Exposure > Limits <input type="checkbox"/> Pkging Failure > 10 rads/hr or Contamination > 1000x Limits <input type="checkbox"/> Large# Indivs w/Exp > Limits or Medical Deterministic Effects <input type="checkbox"/> Unique Circumstances or Safeguards Concerns <input type="checkbox"/> Considered Need for AIT
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5. MANAGEMENT DIRECTIVE 8.10 EVALUATION (additional evaluation for medical events only)

<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Timeliness - Inspection Meets Requirements (5 days for overdose / 10 days for underdose) Medical Consultant Used-Name of Consultant/Date of Report: _____ Medical Consultant Determined Event Directly Contributed to Fatality Device Failure with Possible Adverse Generic Implications HQ or Contractor Support Required to Evaluate Consequences
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6. SPECIAL INSTRUCTIONS OR COMMENTS

Review During Next inspect

Non-Public Inspector Signature: [Signature] Date: 10/3/05
 Public-SISP REVIEW COMPLETE Branch Chief Initials: [Signature] Date: 10/2/05

PITS

Professional Inspection
and
Testing Services, Inc.

CORPORATE OFFICE

56 North Second Street
Chambersburg PA 17201
Phone: 717-263-7964
Fax: 717-263-7734

BRANCH OFFICES

4572 Beech Road
Temple Hills MD 20748
Phone: 301-702-2610
Fax: 301-702-1282

1 Park Avenue
Mount Airy, MD 21771
Phone/Fax: 301-829-2296

1990 M St NW
Washington, DC 20036
Phone: 202-223-9311
Fax: 202-223-9312

ON-SITE OFFICES

Office and Fully Equipped
Laboratory Located at
Dulles International Airport
South Staging Area
3601 Stonecroft Blvd
Chantilly, VA 20151
703-572-3346
703-572-7388

WEB SITE

www.p-i-t-s.org

EMAIL

pits@innernet.net

MINORITY CERTIFICATIONS

Penn DOT
MDOT
WDOT
Allegheny County, PA
MWAA
WMATA
City of Harrisburg
PA DGS
Amtrak
SEPTA
District of Columbia
Prince George's County

LAB CERTIFICATIONS

ASSHTO
Corps of Engineers
NIST/CCRL

August 23, 2005

U.S. NRC Region 1
475 Allendale Road
King of Prussia, PA 19406-1415

RECEIVED
REGION 1

2005 AUG 27 PM 1:05

Attn: Sattar Lodhi

Dear Mr. Lodhi,

The following is our 30 day initial report:

(i) **EVENT**

On July 26, 2005, Professional Inspection and Testing Services, Inc.'s (PITS) inspector Olusesan Johnson was operating a Troxler 3430 Nuclear Density Gauge serial number 023190 at The New Army Reserve Center at Fort Indiantown Gap in Annville, PA (Area 3 - Coulter Rd & Service Rd). Mr. Johnson had just finished taking a test and was recording the results when he noticed a trackhoe coming towards him. Mr. Johnson waved his arms and yelled for the equipment operator to stop. Mr. Johnson had to jump out of the way so he wouldn't get hit by the trackhoe. The probable cause of the event was neglect by the equipment operator.

(ii) **LOCATION**

Fort Indiantown Gap in Annville, PA
Area 3 (the NE corner of Coulter Rd & Service Rd)

(iii) **NUCLEAR MATERIAL**

ISOTOPES AND THEIR QUANTITIES

8 mCi of Cesium 137 (serial number 75-5022)
40 mCi of Americium 241:Be (serial number 47-19018)

CHEMICAL AND/OR PHYSICAL FORM

Cesium - Sealed source registered either with NRC under 10 CFR 32.210 or with an Agreement State and incorporated in a compatible portable gauging device as specified in item 9 of this license.

Americium - Sealed neutron sources registered either with NRC under 10 CFR 32.210 or with an Agreement State and in a compatible portable gauging device as specified in item 9 of this license.

(iv) **DATE & TIME OF EVENT**

July 26, 2005 at approximately 9:45 am EST

(v) **CORRECTION ACTION TAKEN & RESULT**

Mr. Johnson immediately contacted PITS' RSO Ingrid Kalb and she instructed the area was to be isolated and all entry be denied. She further instructed all equipment and persons involved to be detained. Troxler and NRC were notified at approximately 10:00am EST. Ms. Kalb arrived on site at 11:00am EST and evaluated the incident. Due to the extreme external damage of the Nuclear Density Gauge, Ms. Kalb contacted Lebanon County EMA. Upon arrival, Lebanon County EMA had the source bagged and double over-packed and could not identify any breach of integrity. The area of the incident was surveyed by Lebanon County EMA with no detectable radiation above a natural occurring background. Ms. Kalb transported the Nuclear Density Gauge to PITS' office to be sent to Troxler for disposal.

(vi) **EXPOSURE**

There were no individuals exposed to radiation or radioactive material. All persons involved were examined and scanned by Lebanon County EMA

If you have any questions, please feel free to contact me at 717-263-7964, ext. 152.

Sincerely,



Ingrid Kalb
Radiation Safety Officer