

RI - DNMS Licensee Event Report Disposition

Licensee: Huntingdon Life Sciences
 Event Description: Sealed Source Leakage
 License No: 29-44001 Docket No: 03008072 MLER-RI: 2006011
 Event Date: 10/06/06 Report Date: 10/12/06 HQ Ops Event #: _____

1. REPORTING REQUIREMENT

<input type="checkbox"/> 10 CFR 20.1906 Package Contamination	<input type="checkbox"/> 10 CFR 30.50 Report
<input type="checkbox"/> 10 CFR 20.2201 Theft or Loss	<input type="checkbox"/> 10 CFR 35.3045 Medical Event
<input type="checkbox"/> 10 CFR 20.2203 30 Day Report	<input type="checkbox"/> License Condition
<input checked="" type="checkbox"/> Other: <u>NOT REQUIRED</u>	

2. REGION I RESPONSE

<input type="checkbox"/> Immediate Site Inspection	Inspector/Date	
<input type="checkbox"/> Special Inspection	Inspector/Date	
<input type="checkbox"/> Telephone Inquiry	Inspector/Date	
<input type="checkbox"/> Preliminary Notification/Report	<input type="checkbox"/> Daily Report	
<input checked="" type="checkbox"/> Information Entered in RI Log	<input checked="" type="checkbox"/> Review at Next Inspection	
Report Referred To: _____		

3. REPORT EVALUATION

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

4. MANAGEMENT DIRECTIVE 8.3 EVALUATION

<input checked="" type="checkbox"/> Release w/Exposure > Limits	<input checked="" type="checkbox"/> Deliberate Misuse w/Exposure > Limits
<input checked="" type="checkbox"/> Repeated Inadequate Control	<input checked="" type="checkbox"/> Pkgng Failure > 10 rads/hr or Contamination > 1000x Limits
<input checked="" type="checkbox"/> Exposure: 5x Limits	<input checked="" type="checkbox"/> Large# Indivs w/Exp > Limits or Medical Deterministic Effects
<input checked="" type="checkbox"/> Potential Fatality	<input checked="" type="checkbox"/> Unique Circumstances or Safeguards Concerns
If any of the above are involved:	
<input checked="" type="checkbox"/> Considered Need for IIT	<input checked="" type="checkbox"/> Considered Need for AIT
Decision/Made By/Date: _____	

5. MANAGEMENT DIRECTIVE 8.10 EVALUATION (additional evaluation for medical events only)

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

6. SPECIAL INSTRUCTIONS OR COMMENTS

review during next routine inspection

Non-Public Inspector Signature: _____ Date: _____
 Public-SUNSI REVIEW COMPLETE Branch Chief Initials: _____ Date: 11/14/06

12-Oct-06

RECEIVED
REGION 1

Huntingdon
Life Sciences

2006 OCT 18 PM 1: 14

Nuclear Materials Safety Branch
US Nuclear Regulatory Commission, Region I
475 Allendale Road
King of Prussia, PA 19406-1415

NRC Material License No. 29-14800-01

Subject: Report of Presumed Loss of 10 mCi of Kr-85 Gas from Sealed Source

Dear Sir:

On 6 October 2006 our Radiation Safety Officer did a physical inventory of our three Kr-85 sealed sources. Kr-85 is a noble gas with a half life of 10.76 years. Each of these sealed sources is in a device used to reduce the electric charge on aerosols flowing through a tube. Each device is tubular in shape with dimensions about 2 feet long and 4 inches in diameter. These devices are used only occasionally. They were all present and stored in Room P-416 which is the P-wing radioactive waste storage room. This room is locked and under strict access control. Persons enter this room only rarely to deliver and remove samples or other items for storage. The sealed sources were manufactured by Thermo Systems, Inc. (TSI) in St. Paul, Minn.

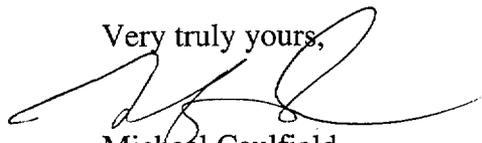
The RSO separated the three sealed source devices and measured the dose rate at the surface of each device using Huntingdon's Thermo-Bicon Surveyor 2000 survey meter with Eberline-Bicon pancake GM probe HP360, SN 003848. The instrument had a background of 0.04 mR/h and 40 cpm. The results, in mR/hr, are recorded below.

Kr-85	Activity (mCi)	Activity Date	Model	Serial No.	Surface Dose Rate, mR/hr
A	10	3-93	3054	2104	2.0
B	10	3-93	3054	2103	2.0
C	10	10-17-1980	3054	660T	0.04

The low dose rate (equal to background) for the oldest device (SN 660T) is indicative of a leak and the complete loss of the Kr-85 gas.

We are herein reporting the presumed leakage and loss of 10 mCi of Kr-85 gas from the device with serial number 660T. Although the condition was discovered on 6 October 2006, it is unknown as to when the actual leak occurred, and could have been many years ago.

Very truly yours,



Michael Caulfield
General Manager

Huntingdon Life Sciences, Inc.

Huntingdon Life Sciences, Inc. PO Box 2360, Mettlers Road, East Millstone, NJ 08875-2360 USA.

Tel: +1 732 873 2550 Fax: + 1 732 873 3992