REGION I

NMSS LICENSEE EVENT REPORT

License No. 08-01738-02

Docket No. 030-01317

MLER-RI 97-35

LICENSEE Walter Reed Army Med CTR.

EVENT DESCRIPTION Lost I-125 seed

EVENT DATE 6/9/97 REPORT DATE 6/26/97

1. REPORTING REQUIREMENT

(X) 10 CFR 20.2201 Theft or Loss
( ) 10 CFR 20.2203 30 Day Report
( ) 10 CFR 30.50 Report
( ) 10 CFR 35.33 Misadministration
( ) License Condition

( ) Other _____

2. REGION I RESPONSE

( ) Immediate Site Inspection Inspector/Date _____

( ) Special Inspection Inspector/Date _____

( ) Telephone Inquiry Inspector/Date _____

( ) Preliminary Notification
( ) Daily Report
(X) Information Entered on the Region I Log
(X) Review at Next Routine Inspection
( ) Report Referred to _____

3. REPORT EVALUATION

(X) Description of Event
(X) Levels of RAM Involved
( ) Cause of Event
(X) Corrective Actions
( ) Calculation Adequate
( ) Letter to Licensee Requesting Additional Information

4. SPECIAL INSTRUCTIONS OR COMMENTS

IX30 9/1

Completed by Jenny Johnson Date 9/4/97

Reviewed by M. Shakley Date 9/5/97

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(Revised 1/6/95)

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