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R.E. GINNA
NUCLEAR POWER PLANT

January 13, 2014

U.S. Nuclear Regulatory Commission
Washington, DC 20555-0001

ATTENTION: Document Control Desk

SUBJECT: R. E. Ginna Nuclear Power Plant
Renewed Facility Operating License No. DPR-18
NRC Docket No. 50-244
R.E. Ginna Independent Spent Fuel Storage Installation
General License
NRC Docket No. 72-67

Submittal of Report in Accordance with 10 CFR 26.719(c)(1)

In accordance with 10 CFR 26.719(c)(1), R.E. Ginna Nuclear Power Plant is submitting the following report regarding two unsatisfactory blind performance sample testing events:

Description of Incidents

1. Blind sample 1307N-AMP (containing amphetamine and methamphetamine) was purchased from a contracted blind sample provider (Professional Toxicology). The sample was prepared for testing in support of 10 CFR 26.168 and sent from R.E. Ginna to a Health and Human Services (HHS) laboratory (Quest Diagnostics). The HHS laboratory reported the expected substances (amphetamine and methamphetamine) to the Medical Review Officer. The HHS laboratory did not properly identify the two substances; however, due to the sample's unexpected low creatinine, the HHS result also indicated the sample met the criteria for an invalid result in accordance with 10 CFR 26.161(f)(1). The HHS laboratory director was contacted to verify the creatinine readings. According to the laboratory director, the creatinine was tested with two different instruments and similar readings were obtained. As the site evaluation of the event was completed on December 16, 2013, this report is required to be submitted January 15, 2014.
2. Blind sample 1308THCLO (containing marijuana metabolite) was purchased from a contracted blind sample provider (Professional Toxicology). The sample was prepared for testing in support of 10 CFR 26.168 and sent from R.E. Ginna to a Health and Human Services (HHS) laboratory (Quest Diagnostics). The HHS laboratory reported the expected substance (marijuana metabolite)

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to the Medical Review Officer. The HHS laboratory did properly identify the substance; however, due to the sample's unexpected low creatinine, the HHS result also indicated the sample met the criteria for an invalid result in accordance with 10 CFR 26.161(f)(1). The HHS laboratory director was contacted to verify the creatinine readings. According to the laboratory director, the creatinine was tested with two different instruments and similar readings were obtained. As the site evaluation of the event was completed on December 20, 2013, this report is required to be submitted January 19, 2014.

Corrective Actions Taken or Planned

In both instances, the HHS Laboratory and the Blind Sample provider were contacted. According to the Blind Sample provider, the reduction in creatinine might be a result of the bleach rinse they use on their sample containers; or it may be a result of the donor sample composition.

1. After the first event, the industry was benchmarked to see if anybody else had issues with the sample. Three other utilities reported having the same issue with the same lot number. Recent operating experience identified seven other utilities having recent issues with Professional Toxicology.
2. After the second event, the industry was benchmarked and one other utility was discovered to have had multiple issues with this blind sample provider.
3. R.E. Ginna is using a new blind sample provider as of January 2014.

No new regulatory commitments have been identified in this letter.

Should you have any questions regarding the information in this submittal, please contact Thomas L. Harding at (585) 771-5219.

Sincerely,



Eugene F. Palmer
Director, Security

EFP/MRP/ces

cc: NRC Regional Administrator, Region I
NRC Project Manager, Ginna
NRC Senior Resident Inspector, Ginna