



DUKE POWER

March 17, 1992

U. S. Nuclear Regulatory Commission
Attn: Document Control Desk
Washington, D.C. 20555

Subject: Oconee Nuclear Station
Docket Numbers 50-269, -270, and -287
McGuire Nuclear Station
Docket Numbers 50-269 and -270
Catawba Nuclear Station
Docket Numbers 50-413 and -414
Fitness-For-Duty Program;
Unsatisfactory Performance Test Result

Attached is a report, as required by 10CFR 26, Appendix A, of an unsatisfactory performance test result.

If there are any questions, please call Scott A. Gewehr at (704) 373-7581.

Very truly yours,

Hal. B. Tucker

xc: Mr. T. A. Reed, Project Manager
Office of Nuclear Reactor Regulation
U. S. Nuclear Regulatory Commission
Mail Stop 14H25, OWFN
Washington, D.C. 20555

Mr. R. E. Martin, project Manager
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Mr. L. A. Wiens, Project Manager
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Mr. S. D. Ebneter, Regional Administrator
U. S. Nuclear Regulatory Commission - Region II
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Duke Power Company
Human Resources Department
422 South Church Street
P.O. Box 33189
Charlotte, NC 28242



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SUBJECT: False Negative Blind Performance Urine Drug Screen

A blind urine performance drug screen requisition #3327003 was submitted from McGuire Nuclear Station to SmithKline Beecham Laboratory in Atlanta on January 7, 1992. The specimen was spiked with 450 ng/ml of benzoylecgonine. The laboratory reported the specimen negative on January 8, 1992.

Dr. Jerry McHan, Toxicologist of Quality Assurance Associates notified me of the result. He had already investigated the result with the laboratory. His letter of explanation (received 3/16/92) is attached.

W. E. Dukes, Jr. MD

W. E. Dukes, Jr., MD
Corporate Medical Director
Duke Power Company

Attachment

January 25, 1992

Dr. Gene Dukes
Medical Director
Duke Power Company
P.O. Box 33189
Charlotte, N.C. 28242


Dear Dr. Dukes:

This is to report that on 1/8/92, a "blind" urine sample (Lot# 055785) was tested by SmithKline Beecham Labs. The sample was identified by the social security number of 412 86 1176 on requisition #3327003 and accessioned as number 267225G. The laboratory report indicated that the drug test was totally negative, while in actuality, the sample contained benzoylecgonine at a level of 450 ng/ml

I contacted Mr. Ben Wells, the technical manager of forensic toxicology at SKBL. He indicated that the laboratory was unable to repeat the test because the sample had already been discarded. In reviewing their test data, they found that the sample had screened as negative with no indication of this analyte. In reviewing the data from adjacent samples they found no indication of a sample mix up.

There is no clear explanation for the false negative. We do know that while it occurs rarely, the screening system has produced a similar response for positive controls in the past.

Sincerely,



Jerry McHan PhD