Si Sensor Damage Test Beam

Pelle (w/ input from others obviously)





Introduction

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Real experts from UCSC gave talk in SVT meeting:

- <u>https://confluence.slac.stanford.edu/display/hpsg/08.27.2013+Weekly</u>
- Look there for additional details

Two components

- Readout chip damage (won't talk about it here; should be ok...)
- Breakdown of sensor strip implant capacitor

Spoiler

- Atlas studies show it's very hard to test behavior (beam loss scenarios are hard to produce in test)
- Vulnerability depends on *exact* details and specifications of the sensor
 - Bias "network", bias voltage, di-electric specifications on sensor, punchthrough structures, implant resistance, etc.
- Vulnerability depends on *exact* charge deposition details:
 - Total charge, time evolution, spatial distribution, etc.

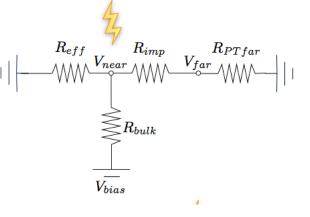
Implant Capacitor Damage

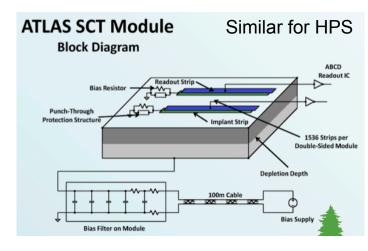
Large voltage on implant strip can permanently damage the coupling capacitor (rated for ~100V)

Operating at very high voltages (up to 1kV) increases risks

Large voltages on implant can occur if large charge deposition creates "ohmic path" in bulk (field breakdown)

- Implant voltage then depends on exact sensor design of:
 - Punch-through protection (on both sides)
 - Bias resistor
 - Strip implant resistance (incl. strip length)
 - Surface treatment and detailed geometry
- In addition, bias network will have an important impact on the circuit (may drop bias voltage which protects the implant voltage (depends on RC))

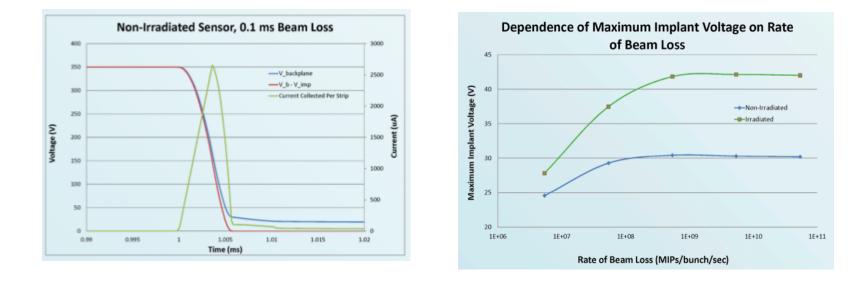




Implant Capacitor Damage (Atlas simulation)

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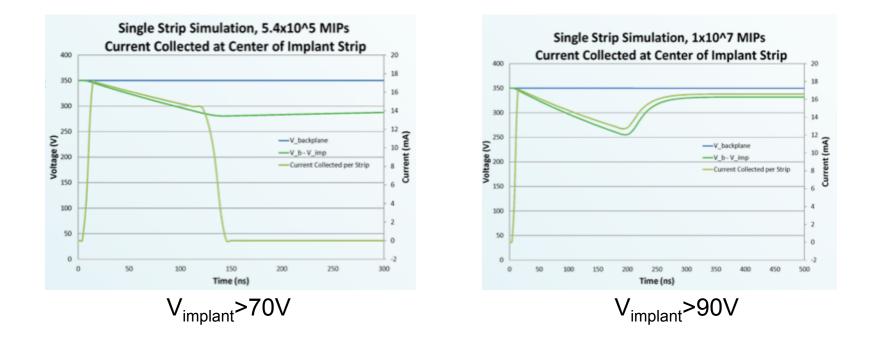
Full sensor exposure with linear beam loss (25ns "steps") Peak of ~0.5×10⁶ MIPs/strip/25ns



Backplane voltage drops (capacitance is depleted of charge) Peak implant voltage is <50V Rate of beam loss matters.

Implant Capacitor Damage (Atlas simulation)

Single strip exposure to single laser pulse



Backplane voltage do not protect for single strip exposure Spatial distribution is important SLAC

Summary (again)

Predicting vulnerability for <u>our</u> sensors is hard

- Implant strip resistance not measured
- Punch through protection not measured
- Bias network would need to analyzed with different exposure scenarios

Exact beam loss scenario is important

- How many strips get hit simultaneously
- What is the time evolution (gradual exposure?)

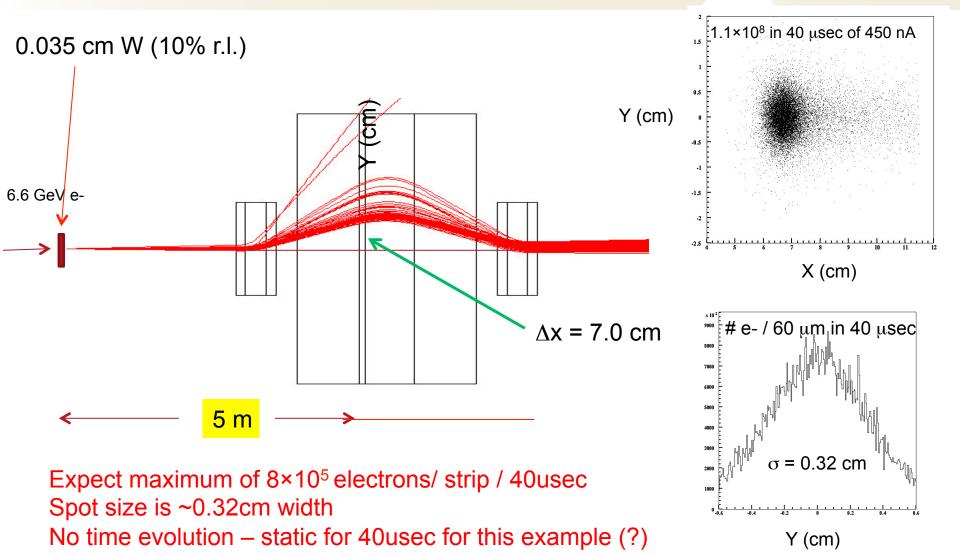
Conclusion is that we cannot say we are safe

- Experts guess that most likely we are more vulnerable than Atlas (worse PTP distance, longer strips, potentially larger implant resistance)
- → We need to test our susceptibility

Looking at beam tests – these are only at the idea stage yet. Who will help?

Collimator Scattering (Takashi)

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SLAC NLCTA (Next Linear Collider Test Accelerator)

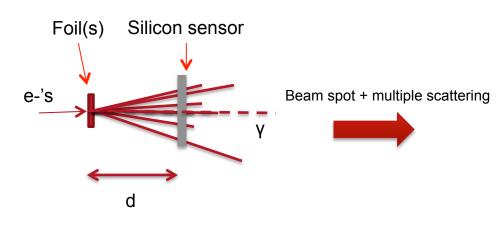
Propose to use NLCTA

- Beam available this fall
- Tests in parallel to other experiments
- High enough intensity
- Much higher dQ/dt -> worst case scenario
- Easy access and setup

Vary intensity

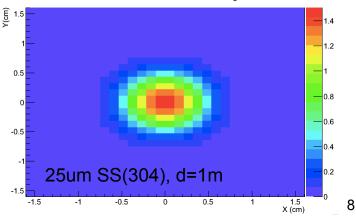
- Foil thickness and # foils
- Distance from foil

X-ray contribution should be small



	NLCTA
Beam Type	e⁻
Beam energy (MeV)	120
(range)	60, 80-120
Repetition Rate (Hz)	10
(range)	1-10
Bunch Intensity (E8)	1.2
(range)	0.06-12
Bunch Length (s , mm)	60
(range)	
Beam Spot size ((s , mm)	150
(range)	100-300
Comments/Notes	

d=1.000000m,t=0.001420X



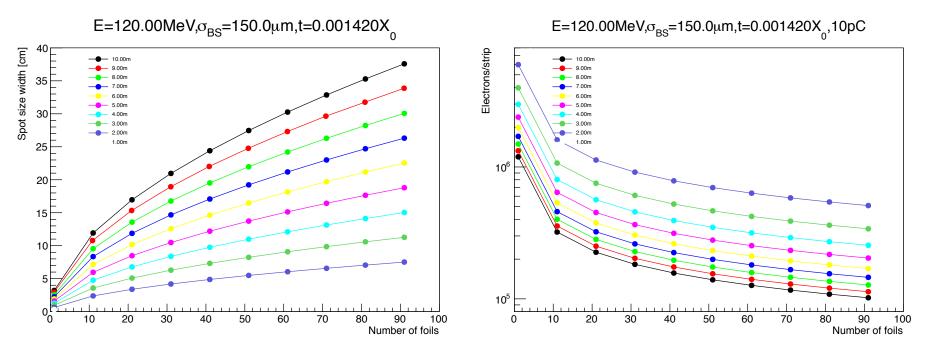
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SLAC NLCTA (Next Linear Collider Test Accelerator)

Start at "safe" level and then ramp up intensity

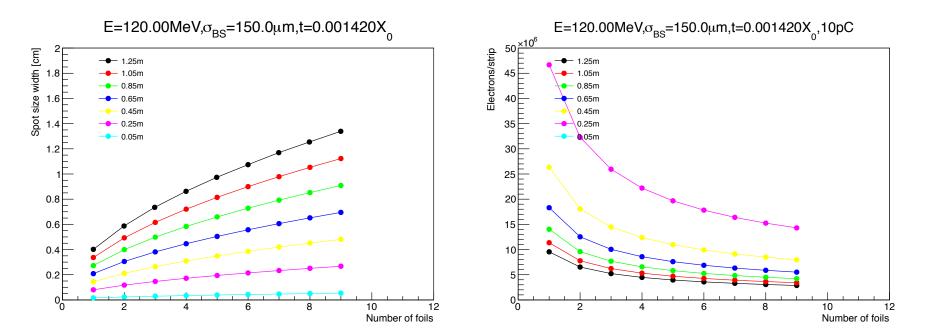
- Would like to see where it fails (if it fails)
- Can use bias voltage setting as safety measure as well



SLAC NLCTA (Next Linear Collider Test Accelerator)

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