

*Wisconsin*  
*Chapter DHS 157 -Radiation Protection*  
*Regulatory Guide*  
**December, 2011**

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**Guidance for Industrial Radiography Use**

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Radiation Protection Section  
P.O Box 2659  
Madison, WI 53701-2659  
Phone: (608) 267-4797  
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P-45045 (12/11)

## EXECUTIVE SUMMARY

Wisconsin Regulatory Guides (WISREGs) are issued to describe and make available to the applicant or licensee, acceptable methods of implementing specific parts of **Wisconsin Administrative Code, Chapter DHS 157 ‘Radiation Protection’**, to delineate techniques used by the Department of Health Services (DHS) staff in evaluating past specific problems or postulated accidents, and to provide guidance to applicants and licensees. WISREGs are not substitutes for **Chapter DHS 157 ‘Radiation Protection’**, therefore compliance with them is not required. Methods and solutions different from those set forth in this guide will be acceptable if they provide a basis for the DHS, Radiation Protection Section to determine if a radiation protection program meets the current rule and protects health and safety.

Comments and suggestions for improvements in this WISREG are encouraged. This WISREG will be revised, as appropriate, to accommodate comments and to reflect new information or experience. Comments should be sent to **Department of Health Services, Radiation Protection Section, P.O. Box 2659, Madison, WI 53701-2659**.

To request copies of this guide (which may be reproduced) call DHS, Radiation Protection Section at (608) 267-4797 or for electronic copy go to our web site at: <http://www.dhs.wisconsin.gov/radiation/>

This WISREG ‘Guidance for Industrial Radiography Use’ has been developed to streamline the application process for an industrial radiography license. A copy of the application DPH form F-45013, ‘*Application for a Radioactive Material License Authorizing the use of Industrial Radiography*’ is located in **Appendix A** of this guide.

**Appendices C through P** provide examples, models and additional information that can be used when completing the application.

It typically takes 60-90 days for a license to be processed and issued if the application is complete. When submitting the application be sure to include the appropriate application fee listed in **DHS 157.10** for an industrial radiography license.

In summary, the applicant will need to perform the following for submitting an industrial radiography license application:

- Use this regulatory guide to prepare the application, DPH form F-45013, ‘*Application for a Radioactive Material License Authorizing the use of Industrial Radiography*’ (**Appendix A**).
- Complete the application, DPH form F-45013, ‘*Application for a Radioactive Material License Authorizing the use of Industrial Radiography*’ (**Appendix A**). See ‘Contents of Application’ of the guide for additional information.
- Include any additional attachments:
  - All supplemental pages should be on 8 ½” x 11” paper.
  - Please identify all attachments with the applicant’s name and license number (if a renewal).
- Do not submit proprietary information;
- Mark facility diagrams and other sensitive information “Withhold from public disclosure under S. 19.36(1), WI STATS.” See Wisconsin Regulatory Issue Summary 2006-01.
- Submit an original signed application along with attachments (if any);
- Submit the application fee; and
- Retain one copy of the licensee application and attachments (if any) for your future reference. You will need this information because the license will require that radioactive material be possessed and used in accordance with statements, representation, and procedures provided in the application and supporting documentation.

Rem, and its SI equivalent Sievert, will be used in this guide whenever units of radiation exposure or dose are required. This is done since **Chapter DHS 157 ‘Radiation Protection’** sets dose limits in units of rem, not rad or roentgen, and the sealed sources used in radiography emit gamma rays. A useful rule of thumb for gamma radiation is an exposure of 1 roentgen is equivalent to an absorbed dose of 1 rad and dose equivalent of 1 rem.

If you have any questions about the application process please contact DHS, Radiation Protection Section at (608) 267-4797.

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## ABBREVIATIONS

AEA/QSA	AEA Technology, QSA Inc.
ALARA	As low as is reasonably achievable
ANSI	American National Standards Institute
Bq	Becquerel
CFR	Code of Federal Regulations
cm	Centimeter
COC	Certificate of Compliance
DHS	Wisconsin Department of Health Services
DOE	United States Department of Energy
DOT	United States Department of Transportation
DU	Depleted uranium
hr	Hour
IC	Increased Control
IN	Information Notice
INC	Industrial Nuclear Company
mrem	Millirem
mSv	Millisievert
NARM	Naturally-occurring and Accelerator-produced Radioactive Material
NIST	National Institute of Standards and Technology
NMSS	Office of Nuclear Materials Safety and Safeguards
NRC	United States Nuclear Regulatory Commission
NSTS	National Source Tracking System
NVLAP	National Voluntary Laboratory Accreditation Program
OSL	Optical Stimulated Luminescent Dosimeters
QSA	QSA Global, Inc.
QOC	Quantities of Concern
RIS	Regulatory Issue Summary
RPS	Radiation Protection Section
RQ	Reportable quantities
RSO	Radiation Safety Officer
SI	International System of Units (abbreviated SI from the French Le Systeme Internationale d'Unites)
SPEC	Source Production and Equipment Company
SSD	Sealed Source and Device
Sv	Sievert
TEDE	Total effective dose equivalent
TI	Transportation Index
TLD	Thermoluminescent dosimeters

## PURPOSE OF WISREG

This WISREG provides guidance to an applicant in preparing an industrial radiography license application as well as criteria for evaluating a radiography license application. The term "radiography" as used in this guide means an examination of the structure of materials by nondestructive methods, using ionizing radiation to make radiographic images generally using gamma-emitting radioactive materials (radioisotopes). The radioisotopes most commonly used for radiography are iridium-192 (Ir-192), cobalt-60 (Co-60) and selenium-75 (Se-75); however, other radioisotopes [e.g. californium-252 (Cf-252), ytterbium-169 (Yb-169), cesium-137 (Cs-137)] with unique radiological characteristics may also be used. This WISREG does not address the research and development of radiography devices or associated equipment, or the commercial aspects of manufacturing, distribution, and service of such devices or equipment.

This WISREG identifies the information needed to complete DPH form F-45013, *'Application for a Radioactive Material License Authorizing the use of Industrial Radiography'* (**Appendix A**).

**Chapter DHS 157 'Radiation Protection'** requires the applicant to develop, document, and implement procedures that will ensure compliance with the rule. Each applicant should read the rule and procedures carefully and then decide if the procedure addresses specific radiation protection program needs at the applicant's facility. Applicants may adopt a procedure(s) in this guide or they may develop their own procedures to comply with the applicable rule.

The format within this guide for each item of technical information is as follows:

- **Rule** - references the requirements from **Chapter DHS 157 'Radiation Protection'** applicable to the item;
- **Criteria** - outlines the criteria used to judge the adequacy of the applicant's response;
- **Discussion** - provides additional information on the topic sufficient to meet the needs of most readers; and
- **Response from Applicant** - indicates that a written response is required and/or offers the option of an alternative reply, or indicates that no response is needed on that topic during the licensing process.

Notes, boxes, and references are self-explanatory and may not be found for each item on the application. The application does not have sufficient space for applicants to provide full responses on all items. As indicated on the application, the answers to those items are to be provided on separate sheets of paper and submitted with the completed form.

The information submitted in the application must be sufficient to demonstrate that proposed equipment, facilities, personnel, and procedures are adequate to protect the health and safety of the citizens of Wisconsin according to DHS's guidelines. Submission of incomplete or inadequate information will result in delays in the approval process for the license. Additional information will be requested when necessary to ensure that an adequate radiation safety program has been established. Such requests for additional information will delay completion of the application's review and may be avoided by a thorough study of the rule and these instructions prior to submitting the application.

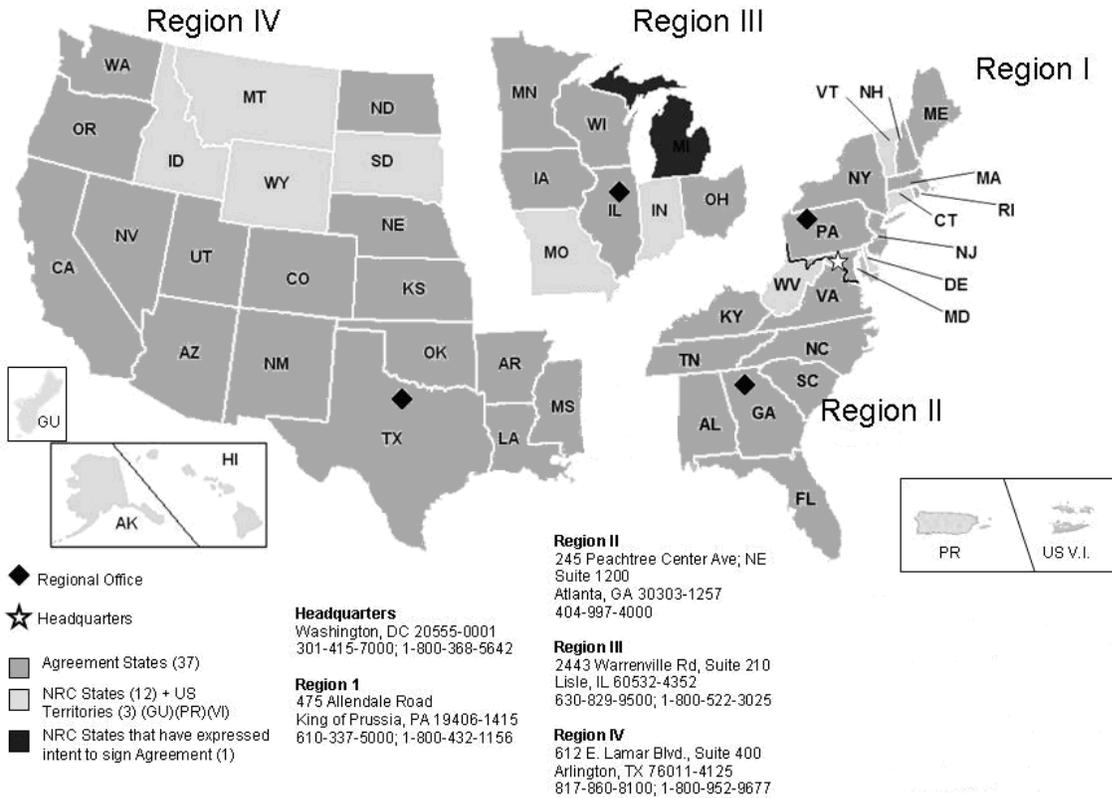
## WHO REGULATES FACILITIES IN WISCONSIN

In the special situation of work at federally controlled sites in Wisconsin, it is necessary to know the jurisdictional status of the land to determine whether the Nuclear Regulatory Commission (NRC) or DHS has regulatory authority. The NRC has regulatory authority over land determined to be under “exclusive federal jurisdiction,” while DHS has jurisdiction over non-exclusive federal jurisdiction land (see **Table 1**). Applicants and licensees are responsible for finding out, in advance, the jurisdictional status of the specific areas where they plan to conduct licensed operations. DHS recommends that applicants and licensees ask their local contacts for the federal agency controlling the site (e.g., contract officer, base environmental health officer, district office staff) to help determine the jurisdictional status of the land and to provide the information in writing, so that licensees can comply with DHS or NRC regulatory requirements, as appropriate. The following table lists examples of regulation authority.

**Table 1: Who Regulates the Activity?**

Applicant and Proposed Location of Work	Regulatory Agency
Federal agency regardless of location (except that Department of Energy [DOE] and, under most circumstances, its prime contractors are exempt from licensing [ <i>10 CFR 30.12</i> ])	NRC
Non-federal entity in non-Agreement State, U.S. territory, or possession	NRC
Non-federal entity in WI at non-federally controlled site	DHS
Non-federal entity in WI at federally-controlled site not subject to exclusive Federal jurisdiction	DHS
Non-federal entity in WI at federally-controlled site subject to exclusive federal jurisdiction	NRC

## Locations of NRC Offices and Agreement States



**Figure 1: U.S. Map Location of NRC Offices and Agreement States**

**Reference:** A current list of Agreement States (States that have entered into agreements with the NRC that give them the authority to license and inspect radioactive material used or possessed within their borders), (including names, addresses, and telephone numbers of responsible officials) may be obtained upon request from NRC’s Regional Offices. NRC Office of Federal and State Materials and Environmental Management Programs (FSME) also provides the current list of Agreement States at: <http://nrc-stp.ornl.gov/>.

## MANAGEMENT RESPONSIBILITY

DHS recognizes that effective radiation safety program management is vital to achieving safe and compliant operations. DHS believes that consistent compliance with its rules provides reasonable assurance that licensed activities will be conducted safely. DHS also believes that effective management will result in increased safety and compliance. Ineffective management is often the underlying cause of safety and compliance problems. “Management” refers to a senior-level manager who has responsibility for overseeing licensed activities.

To ensure adequate management involvement, a management representative must sign the submitted application acknowledging management's commitments and responsibility for the following:

- Ensuring radiation safety, security, control of radioactive materials, and compliance with **Chapter DHS 157 ‘Radiation Protection’**;
- Ensuring completeness and accuracy of the radiation safety records;
- Knowing the contents of the license and application;
- Committing adequate resources (including space, equipment, personnel, time, and, if needed, contractors) to the radiation protection program to ensure that public and worker safety is protected from radiation hazards;
- Selecting and assigning a qualified individual to serve as the Radiation Safety Officer (RSO) with responsibility for the overall radiation safety program;
- Confirming that the RSO has independent authority to stop unsafe operations and will be given sufficient time to fulfill his/her radiation safety duties and responsibilities;
- Ensuring worker audits are conducted at 6-month intervals (may be performed by the RSO);
- Ensuring workers have had adequate training;
- Reporting equipment failures as required under *s. DHS 157.46*;
- Ensuring current, up-to-date DHS and Department of Transportation (DOT) rules and regulations are available to all employees;
- Ensuring Operating & Emergency Procedures are available to all employees; and
- Notifying DHS in writing, within 10 days following filing of petition for voluntary or involuntary bankruptcy.

Management may delegate individuals (i.e., an RSO or other designated individual) to submit amendment requests to DHS. A correspondence delegation letter must be completed, signed by management, and submitted to DHS. A sample letter has been included in Appendix C.

## APPLICABLE RULE

It is the applicant's or licensee's responsibility to obtain read and follow **Chapter DHS 157 'Radiation Protection'**.

The following subchapters of **Chapter DHS 157 'Radiation Protection'** contain requirements applicable to radiography devices:

- Subchapter I 'General Provisions'
- Subchapter II 'Licensing of Radioactive Material'
- Subchapter III 'Standards for Protection from Radiation'
- Subchapter IV 'Radiation Safety Requirements for Industrial Radiographic Operations'
- Subchapter X 'Notices, Instructions and Reports to Workers'
- Subchapter XI 'Inspection by the Department'
- Subchapter XII 'Enforcement'
- Subchapter XIII 'Transportation'

Licensees that exceed Quantities of Concern (QOC) as described in Appendix T (Nationally Tracked Sources Thresholds) of DHS 157. Licensees will have to meet the Increased Control (IC) requirements in Appendix D. DHS will include license conditions that reference the requirements from NRC's Orders EA-05-090 and EA-07-305.

To request copies of the above documents, call DHS, Radiation Protection Section at (608) 267-4797 or for an electronic copy, go to our web site at: <http://www.dhs.wisconsin.gov/radiation/>

# HOW TO FILE

## Paper Application

Applicants for a materials license should do the following:

- Be sure to use the current WISREG guidance from DHS in preparing an application;
- Complete DPH form F-45013, ‘*Application for a Radioactive Material License Authorizing the use of Industrial Radiography*’ (**Appendix A**);
- For each separate sheet submitted with the application, identify and key it to the item number on the application, or the topic to which it refers;
- Submit all documents, on 8-1/2 x 11 inch paper;
- Do not submit proprietary information;
- Mark facility diagrams and other sensitive information “Withhold from public disclosure under S. 19.36(1), WI STATS.” See Wisconsin Regulatory Issue Summary 2006-01.
- Submit an original signed application along with attachments (if any);
- Submit the application fee; and
- Retain one copy of the license application for your future reference.

Deviations from the suggested wording of responses as shown in this guide or submission of alternative procedures will require a more detailed review.
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Personal employee information, i.e.; home address, home telephone number, Social Security Number, and date of birth should not be submitted to DHS.

## **WHERE TO FILE**

Applicants wishing to possess or use radioactive material in Wisconsin are subject to the requirements of **Chapter DHS 157 'Radiation Protection'** and must file a license application with:

*Department of Health Services  
Radiation Protection Section  
P.O. Box 2659  
Madison, WI 53701-2659*

## LICENSE FEES

The appropriate fee must accompany each application or license amendment request. Refer to *s. DHS 157.10* to determine the amount of the fee. DHS will not issue the new license prior to fee receipt. Once the application review has begun, no fees will be refunded. Application fees will be charged regardless of DHS's disposition of an application or the withdrawal of an application.

Licensees are also subject to annual fees; refer to *s. DHS 157.10*.

Direct all questions about DHS's fees or completion of **Item 12** of DPH form F-45013, '*Application for a Radioactive Material Authorizing the use of Industrial Radiography*' (**Appendix A**) to DHS, Radiation Protection Section at (608) 267-4797.

# CONTENTS OF APPLICATION

## Item 1: Type of Application

On the application check the appropriate box and list the license number for renewal or amendments.

### Response from Applicant:

<b>Item 1 Type Of Application</b> (Check one box) <input type="checkbox"/> New License <input type="checkbox"/> Renewal License Number _____
---

## Item 2: Name and Mailing Address of Applicant

List the legal name of the applicant's corporation or other legal entity with direct control over use of the radioactive material. A division or department within a legal entity may not be a licensee. An individual may be designated as the applicant only if the individual is acting in a private capacity and the use of the radioactive material is not connected with employment in a corporation or other legal entity. Provide the mailing address where correspondence should be sent. A Post Office box number is an acceptable mailing address.

Notify DHS of changes in the mailing address, change of ownership or control, and bankruptcy proceedings, see below for more details.

### Response from Applicant:

<b>Item 2 Name And Mailing Address Of Applicant:</b>   <hr/> <b>Applicant's Telephone Number</b> (Include area code):
--

## **Timely Notification of Change of Ownership or Control**

**Rule:** *s. DHS 157.13(10) & (15)*

**Criteria:** Licensees must provide full information and obtain DHS written consent prior to transferring control of the license, also known as "transferring the license".

**Discussion:** Changes in ownership may be the results of mergers, contractual agreements, buyouts, or majority stock transfers. Although it is not DHS intent to interfere with the business decisions of licensees, it is necessary for licensees to obtain prior DHS written consent. This is to ensure the following:

- Radioactive materials are possessed, used, or controlled only by persons who have a valid DHS license;
- Materials are properly handled and secured;
- Persons using these materials are competent and committed to implementing appropriate radiological controls;
- A clear chain of custody is established to identify who is responsible for final disposal of radiography devices; and
- Public health and safety are not compromised by the use of such materials.

**Note:** **Appendix E** identifies the information to be provided about transfer of control.

## **Notification of Bankruptcy Proceedings**

**Rule:** *s. DHS 157.13(10)*

**Criteria:** *s. DHS 157.13(10)(e)* states: "A licensee shall notify DHS in writing within 10 days of filing of a voluntary or involuntary petition for bankruptcy for or against a licensee, the licensee must notify DHS in writing, identifying the bankruptcy court in which the petition was filed and the date of filing".

**Discussion:** Even though a licensee may have filed for bankruptcy, the licensee remains responsible for compliance with all regulatory requirements. DHS needs to know when licensees are in bankruptcy proceedings in order to determine whether all licensed material is accounted for and adequately controlled and whether there are any public health and safety concerns (e.g., contaminated facility). DHS shares the results of

its determinations with other entities involved (e.g., trustees) so that health and safety issues can be resolved before bankruptcy actions are completed.

### **Item 3: Person to Contact Regarding Application**

**Criteria:** Identify the individual who can answer questions regarding the application and include their telephone number.

**Discussion:** This is typically the proposed RSO or knowledgeable management official. DHS will contact this individual if there are any questions about the application.

Notify DHS if the contact person or telephone number changes. This notice is for “information only” and does not require a license amendment fee.

#### **Response from Applicant:**

<b>Item 3 Person To Contact Regarding Application:</b>
<b>Contact's Telephone Number</b> (Include area code):

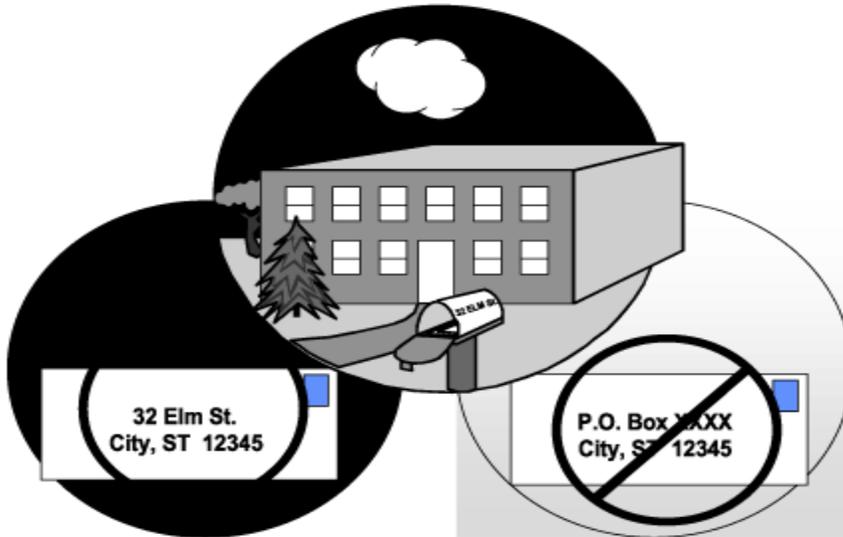
### **Item 4: Address(es) Where Radioactive Material Will Be Used or Possessed**

**Rule:** *s. DHS 157.13(2), (6); s. DHS 157.46(3)*

**Criteria:** Applicants must provide a specific address for each location where radioactive material will be used, stored, or dispatched.

**Discussion:** Specify the street address, or other descriptive address (such as on Highway 10, 5 miles east of the intersection of Highway 10 and State Route 234), city and zip code for each permanent storage or use facility and field station. A field station is a location where licensed material may be stored or used, and from which

the applicant will dispatch equipment to jobsites. **A Post Office Box address is not acceptable as illustrated in Figure 2**, because DHS needs a specific address to allow a DHS inspector to find the use and/or storage location.



**Figure 2: Location of Use**

If devices will NOT be stored at a dispatch site or field station, indicate this. The applicant should indicate whether a location will be used to perform radiographic operations, store sources and devices, or both. The applicant should indicate if a permanent cell is located at the address.

Obtaining a DHS license does not relieve a licensee from complying with other applicable federal, state or local regulations (e.g., local zoning requirements for storage locations).

**Response from Applicant:**

Item 4 List all address(es) where radioactive material may be used or possessed. Attach additional pages if necessary.		
	Address (Do not use Post Office Box)	Telephone Number (Include area code)
<input type="checkbox"/> Used <input type="checkbox"/> Stored <input type="checkbox"/> Used and Stored <input type="checkbox"/> Permanent Cell Facility		
<input type="checkbox"/> Used <input type="checkbox"/> Stored <input type="checkbox"/> Used and Stored <input type="checkbox"/> Permanent Cell Facility		
<input type="checkbox"/> Used <input type="checkbox"/> Stored <input type="checkbox"/> Used and Stored <input type="checkbox"/> Permanent Cell Facility		

**Note:** If radiography operations are expected to exceed 180 days at a temporary jobsite, provide written notification to DHS prior to exceeding the 180 days (a license amendment is not required). Sites where radiography is performed more than 180 days per year must be explicitly listed on the license.

**Item 5: Radiation Safety Officer (RSO)**

**Rule:** *s. DHS 157.13(6); s. DHS 157.44(2)*

**Criteria:** RSO and potential designees are responsible for ensuring that the licensee's radiation safety program is implemented in accordance with approved procedures, and must have adequate training and experience.

**Discussion:** The person responsible for the radiation protection program is called the RSO. DHS believes the RSO is the key to overseeing and ensuring safe operation of the licensee's radiography program. The RSO needs independent authority to stop operations that he or she considers unsafe. He or she must have sufficient time and commitment from management to fulfill certain duties and responsibilities to ensure radioactive materials are used in a safe manner.

The RSO may delegate certain day-to-day tasks of the radiation protection program to other responsible individuals (potential designees). For example, a large testing company with multiple field stations may appoint individuals designated as "site RSO" who assist the corporate RSO and are responsible for the day-to-day activities at the field station. Licensees may also appoint other individuals who may "step-in" as an

emergency contact when the RSO is unavailable. The potential designees do not need to meet the required RSO qualifications; however, these individuals should be qualified, experienced radiographers who are adequately knowledgeable of the activities to which they are assigned. Applicants do not have to identify other responsible individuals if day-to-day tasks, etc. will not be delegated.

Typical RSO duties are illustrated in **Figure 3**. DHS requires the name of the RSO on the license to ensure that licensee management has identified a responsible, qualified person and that the named individual knows their designation as RSO. Provide DHS with a copy of an organizational chart showing the RSO and other designated responsible individuals, to demonstrate they have sufficient independence and direct communication with responsible management officials. Also, show in the organizational chart the position of the individual who signs the application in **Item 13** of the DPH form F-45013, '*Application for a Radioactive Material License Authorizing the use of Industrial Radiography*' (**Appendix A**).

To be considered eligible for the RSO position, an individual must be a qualified radiographer, have a minimum of 2,000 hours (one-year full-time field experience) of hands-on experience as a qualified radiographer, and have formal training in establishing and maintaining a radiation protection program. This should be a course specifically designed to provide training in running a radiation safety program, a basic radiation safety course is not acceptable. While a course particular to industrial radiography would be highly encouraged, this is not required. Hands-on experience means experience in all areas considered to be directly involved in the radiography process; this includes taking radiographs, surveying devices, transporting the radiography equipment to temporary jobsites, posting, work sites, radiation area surveillance, and completing and maintaining records. Excessive time spent in only one or two of these operations (film development and/or area surveillance) should not be counted toward the 2,000 hours. Experience with radiography using x-rays can be included; however, the majority of experience should be in isotope radiography.

DHS will consider individuals with alternative training and experience as RSOs. For example, a person certified in health physics or industrial hygiene with previous experience in managing a radiation safety program of comparable size and scope could be considered on an individual case. The qualifications, training, and experience required of the RSO may vary depending upon the complexity of the applicant's operations and number of radiography personnel.

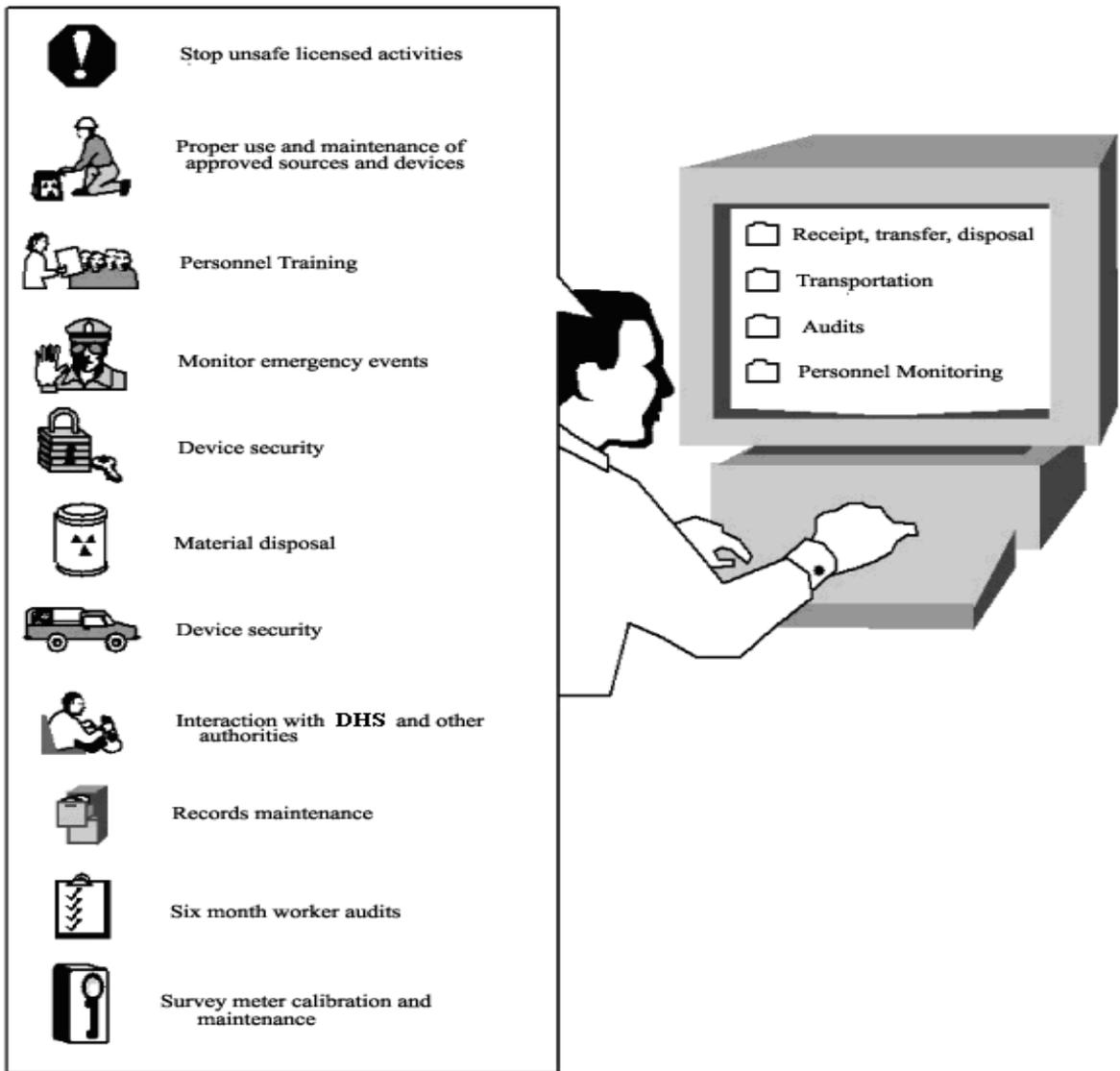


Figure 3: RSO Responsibilities.

## Response from Applicant:

### Item 5 Radiation Safety Officer (RSO) (Check all that apply)

- We will provide the name of the proposed RSO and other potential designees who will be responsible for ensuring that the licensee's radiation safety program is implemented in accordance with approved procedures.

NAME: \_\_\_\_\_

TELEPHONE NUMBER (Include area code) \_\_\_\_\_

AND

- We will demonstrate that the RSO has sufficient independence and direct communication with responsible management officials by providing a copy of an organizational chart by position and will confirm that the RSO has day-to-day oversight of the radiation safety activities.

AND EITHER

- We will provide the specific training and experience of the RSO. Include the following:
1. Specific dates of certification and/or training in radiation safety.
  2. Documentation to show that the RSO has a minimum of 2,000 hours of hands-on experience as a qualified radiographer in industrial radiographic operations.
  3. Documentation to show that the RSO has obtained formal training in the establishment and maintenance of a radiation protection program.

OR

- We will provide alternative information demonstrating that the proposed RSO is qualified by training and experience (e.g. Board Certification by the American Board of Health Physicists, completion of a bachelor's and/or master's degree in the sciences with at least one year of experience in the conduct of a radiation safety program of comparable size and scope), including documentation to show that the RSO has obtained formal training in the establishment and maintenance of a radiation protection program.

### Notes:

- It is important to notify DHS and obtain a license amendment prior to changing the RSO responsible for the radiation safety program.
- If the RSO leaves the organization before an amendment is approved by DHS, management shall appoint a designee who meets the RSO qualification requirements in the interim.

### Item 6: Training for Radiographers and Radiographer's Assistants

**Rule:** *s. DHS 157.13(2) & (6); s. DHS 157.44(3); s. DHS 157.45(9); s. DHS 157.88(2)*

**Criteria:** Radiographers and radiographer's assistants must have adequate training and experience as outlined in *s. DHS 157.44(3)*.

**Discussion:**

- A radiographer is a person who performs or personally supervises industrial radiography operations and is responsible for ensuring compliance with DHS rules and the safe use of radioactive materials.
- A certified radiographer is an individual who has been certified by a certifying entity such that he/she has met established standards in radiation safety, testing, and experience criteria.
- A radiographer's assistant is an individual, who under the direct supervision (in the physical presence) of the certified radiographer uses radiographic equipment in performing industrial radiographic operations.

*s. DHS 157.44(3)* describes specific training requirements for radiographers and radiographer's assistants and requires that all radiographers be certified. It also addresses annual refresher training and semiannual job performance audits of radiographers and radiographer's assistants.

Refer to **Appendix G** as an aid to determining the specific training requirements for radiographers and radiographer's assistants. The applicant must submit a description of their training program for radiographers and radiographer's assistants.

Because *s. DHS 157.44(3)* contains different requirements for radiographers and radiographer's assistants, include training programs for each. When describing the training programs for these positions, include the sequence of events from the time of hiring through the designation of individuals as radiographers or radiographer's assistants. Experienced radiographers who have worked for another licensee should receive formal instruction similar to that given to prospective radiographer's assistants. This instruction must include training in your operating and emergency procedures, in the use of your exposure devices and associated equipment, and in the use of survey meters and other radiation monitoring devices.

Instructors who provide classroom training to individuals in the principles of radiation and radiation safety should have knowledge and understanding of these principles beyond those obtainable in a course similar to the one given to prospective radiographers. Individuals who provide instruction in the hands-on use of radiography equipment should be qualified radiographers with at least 1 year of experience in performing radiography, or should possess a thorough understanding of the operation of radiographic equipment (e.g., a manufacturer's service representative).

An internal inspection program (semiannual audit program) of the job performance of each radiographer and radiographer's assistant ensures that DHS rules, license requirements, and the licensee's operating and

emergency procedures are followed. The audit must include observation of the performance of each radiographer and radiographer's assistant during an actual industrial radiographic operation at intervals not to exceed 6 months. If a radiographer or radiographer's assistant has not participated in an industrial radiographic operation for more than 6 months, the individual must demonstrate knowledge of the training requirements by practical examination before participating in a radiographic operation. The person conducting internal inspections should have a minimum of one-year actual experience as a radiographer and be designated to perform the job performance audit by the RSO.

The applicant shall:

- Submit an outline of the training to be given to prospective radiographer's assistants. Submit your procedures for experienced radiographers who have worked for another licensee.
- Specify the qualifications of your instructors in radiation safety principles and describe their experience with radiography. If training will be conducted by someone outside the applicant's organization, identify the course by title and provide the name and address of the company providing the training.
- Describe the initial practical examination that will be given to radiographer's assistants described in s. DHS 157.44(3)(c). DHS suggests using the checklist in **Appendix H** as a source of potential areas to review during the field examination.
- Describe the annual refresher training program, including topics to be covered and how the training will be conducted.
- Submit your procedures for verifying and documenting the certification status for verifying that their certification remains valid. As a minimum your procedures for newly hired, previously certified individuals should require documentation of your contacting the certifying entity and confirming the certification. Your procedures should also ensure you are aware of certification expiration dates and that individuals with expired certifications do not act as radiographers.
- Submit a description of your program for inspecting the job performance of each radiographer and radiographers' assistant at intervals not to exceed 6 months as described in s. **DHS 157.44(3)**.

**Response from Applicant:**

**Item 6 Training For Radiographers and Radiographer's Assistants** (Check box and attach requested information)

- We will submit the information outlined in section titled "Training for Radiographers and Radiographer's Assistants" in WISREG 'Guidance for Industrial Radiography Use'.

**Note:** X-ray training by itself will not be considered adequate experience for performing gamma radiography.

## **Item 7: Radioactive Material**

**Rule:** *s. DHS 157.13(1) & (2); s. DHS 157.36*

**Criteria:** Applicants must provide the manufacturers (or distributor's) name and model number for each requested source assembly (sealed source), exposure device (camera), and source changer. Licensees will only be authorized for radiographic exposure devices, source assemblies or sealed sources containing radioactive material and associated equipment meeting DHS performance requirements and specifically approved or registered by the NRC or an Agreement State. Also, identify any depleted uranium that is used as shielding material (radiographic exposure devices, source changers and some collimators contain depleted uranium).

**Discussion:** The NRC or an Agreement State performs a safety evaluation of radiography source assemblies (sealed sources) exposure devices and source changers prior to distribution of these sources/devices to specific licensees. The safety evaluation is documented in a Sealed Source and Device (SSD) Registration Certificate issued to the manufacturer (or distributor). Therefore, if the source assemblies, exposure devices, or source changers are approved for use by the NRC or an Agreement State, the applicant need only note the manufacturer's (or distributor's) name and model number of the sources/devices in its license application to demonstrate that the requirements are met.

Consult with the proposed supplier to ensure that sources and devices conform to the sealed source and device designations registered with the NRC or an Agreement State. For licensees to ensure that they use radiographic equipment in accordance with registration certificates, licensees may want to review the certificate, discuss with the manufacturer, or obtain a copy of the certificate. Licensees may not make modifications to exposure devices, source changers, source assemblies and associated equipment unless the design of any replacement component, including source holder, source assembly, controls or guide tubes would not compromise the safety features of the system.

Consult with the manufacturer of the associated equipment (i.e., equipment that is used in conjunction with the exposure device that drives, guides, or comes in contact with the source) to be sure that the associated equipment is compatible with the sources and devices. Licensees must demonstrate that associated equipment meets the performance requirements in *s. DHS 157.36*. NRC Regulatory Issue Summary (RIS) 2005-10,

'Performance-Based Approach For Associated Equipment in 10 CFR 34.20' (**Appendix F**) alerts licensees to distinguish associated equipment that meets the minimum performance criteria required in 10 CFR 34.20 from associated equipment that does not. For example, the portion of the connector that is attached to the end of the control cable is actually a component of the source assembly and is subject to the safety evaluation that must be completed by the NRC or an Agreement State before the source assembly may be specifically authorized for use by a licensee. NRC RIS 2005-10 also contains a number of ways that licensees can demonstrate that their associated equipment meets the performance requirements stated in *s. DHS 157.36*.

**Note:** DHS has added total possession limits for all types of sealed source and exposure device combinations to licenses since the National Source Tracking System database was established.

**Response from Applicant:**

Item 7 Sealed Source Radioactive Material (Attach additional pages if necessary)				
Indicate the single source possession limit (column 3) and the total possession limit for each source and exposure device combination requested (column 5).				
Radioactive material	Sealed source model number	Maximum activity per source	Manufacturer and model number for exposure device(s) and source changer(s)	Total possession limit for this sealed source and exposure device combination

Is Depleted Uranium used as a shielding material?  Yes  No

Only radiographic exposure devices, source assemblies or sealed sources, and associated equipment which meets the requirements specified in *s. DHS 157.36* will be used in radiographic operations.  Yes  No

**Notes:**

- Below is an example of how the licensee should request radioactive material.

Radioactive material	Sealed source model number	Maximum activity per source	Manufacturer and model number for exposure device(s) and source changer(s)	Total possession limit for this sealed source and exposure device combination
Ir-192	INC model 7	100 Ci	INC IR-100, INC IR-50, QSA model 650L, SPEC model C-1	300 Ci

- The limiting component in all sealed source and exposure device combinations is the exposure device maximum activity listed on the associated SSD sheet:
- This activity limit per exposure device is listed in the heading of each of the following tables;
- The following tables list several device combination with associated radionuclide and amounts:

**Table 2: Industrial Nuclear Company (INC) Model IR-100 Exposure Device Maximum Authorization – Ir-192 (120 Ci)**

**Note:** An overpack is required to ship an INC IR-100 exposure device.

Element	Sealed Source	Curies	Source Changer Meeting 10 CFR 34 Requirements	Maximum Curies Authorized
Ir-192	INC model 7	100 Ci	QSA model 650L INC model IR-50	240 Ci 120 Ci
Ir-192	INC model 32	120 Ci	INC model IR-50 QSA model 650L SPEC model C-1	120 Ci 240 Ci 300 Ci
Ir-192	INC model 33	120 Ci	INC model IR-50 SPEC model C-1	120 Ci 300 Ci
Ir-192	INC model 704	155 Ci*	INC model IR-50 QSA model 650L SPEC model C-1	120 Ci 240 Ci 300 Ci
Ir-192	AEA/QSA models 87702, 87703, and 87704	120 Ci	INC model IR-50 QSA model 650L SPEC model C-1	120 Ci 240 Ci 300 Ci
Ir-192	SPEC model T-5 or T-5F	150 Ci*	QSA model 650L SPEC model C-1	240 Ci 300 Ci
Ir-192	SPEC model G-40F or G-40T	240 Ci*	QSA model 650L SPEC model C-1	240 Ci 300 Ci

\* Indicates that the sealed source maximum activity exceeds the maximum exposure device activity.

**Table 3: SPEC Model 150 Exposure Device Maximum Authorization – Ir-192 (150 Ci)**

Element	Sealed Source	Curies	Source Changer Meeting 10 CFR 34 Requirements	Curie Authorization
Ir-192	SPEC model G-60	240 Ci*	QSA model 650L SPEC model C-1	240 Ci 300 Ci
Ir-192	QSA model 969	150 Ci	QSA model 650L SPEC model C-1	240 Ci 300 Ci

\* Indicates that the sealed source maximum activity exceeds the maximum exposure device activity.

**Table 4: QSA Global, Inc. Model 660 System Exposure Devices Maximum Authorization --**

**Ir-192 (120 Ci)**

**Se-75 (81 Ci)**

**Yb-169 (20 Ci)**

**Co-60 (110 mCi)**

**Cs-137 (10.8 Ci or 380 mCi)**

Element	Sealed Source	Curies	Source Changer Meeting 10 CFR 34 Requirements	Curie Authorization
Ir-192	INC model 7	100 Ci	INC model IR-50 QSA model 650L SPEC model C-1	120 Ci 240 Ci 300 Ci
Ir-192	INC model 702	155 Ci*	INC model IR-50 QSA model 650L SPEC model C-1	120 Ci 240 Ci 300 Ci
Ir-192	QSA model 91813	20 Ci	QSA model 650L	240 Ci
Ir-192	QSA model A424-9	150 Ci*	INC model IR-50 QSA model 650L SPEC model C-1	120 Ci 240 Ci 300 Ci
Ir-192	SPEC model T-5 or T-5F	150 Ci*	QSA model 650L SPEC model C-1	240 Ci 300 Ci
Se-75	QSA model A424-25W	150 Ci*	QSA model 650L	240 Ci
Yb-169	QSA model 91810	108 Ci*	QSA model 650L	40 Ci
Co-60	QSA model A424-19	120 mCi	QSA model 650L	120 mCi
Cs-137	QSA model A424-30	380 mCi	QSA model 650L	10.8 Ci
Cs-137	QSA model A424-22	10.8 Ci	QSA model 650L	10.8 Ci

\* Indicates that the sealed source maximum activity exceeds the maximum exposure device activity.

**Table 5: QSA Global, Inc. Model 660-B and Model 660-BE Exposure Device Maximum Authorization –**

**Ir-192 (140 Ci)**

Element	Sealed Source	Curies	Source Changer Meeting 10 CFR 34 Requirements	Curie Authorization
Ir-192	QSA model A424-9	150 Ci*	INC model IR-50 QSA model 650L SPEC model C-1	120 Ci 240 Ci 300 Ci

\* Indicates that the sealed source maximum activity exceeds the maximum exposure device activity.

**Note:** The QSA Global, Inc. Model 660 Series exposure devices Certification of Compliance Number USA/9283/B(U)-96 approved by the NRC will expire on **June 30, 2013**.

The following are options for licensees as of June 30, 2013:

- If QSA does not request renewal of the Certification of Compliance, the package (exposure device) would no longer be authorized for transport;
- Obtain a radiography projector that has a current Certification of Compliance. Users should be aware that obtaining a new projector may require changes to the possession and use license issued by DHS;
- Users are encouraged to make arrangements for final disposition of the 660 Series radiography devices in their possession prior to June 30, 2013, expiration date;
- Licensees could ask the NRC to approve a very limited number of shipments pursuant to 10 CFR 71.17(a). These approvals are issued on a very limited basis to address unique situations.

**Table 6: QSA Global, Inc. Model 880 Delta Exposure Device Maximum Authorization --**

**Ir-192 & Se-75 (150 Ci)**

**Yb-169 (30 Ci)**

**Co-60 (65 mCi)**

**Cs-137 (380 mCi)**

<b>Element</b>	<b>Sealed Source</b>	<b>Curies</b>	<b>Source Changer Meeting 10 CFR 34 Requirements</b>	<b>Maximum Curies Authorized</b>
Ir-192	INC model 7	100 Ci	INC model IR-50 QSA model 650L SPEC model C-1	120 Ci 240 Ci 300 Ci
Ir-192	INC model 702	155 Ci*	INC model IR-50 QSA model 650L SPEC model C-1	120 Ci 240 Ci 300 Ci
Ir-192	QSA model A424-9	150 Ci	INC model IR-50 QSA model 650L SPEC model C-1	120 Ci 240 Ci 300 Ci
Ir-192	SPEC model T-5 or T-5F	150 Ci	QSA model 650L SPEC model C-1	240 Ci 300 Ci
Se-75	QSA model A424-25W	150 Ci	QSA model 650L	300 Ci
Yb-169	QSA model 91810	108 Ci*	QSA model 650L	40 Ci
Co-60	QSA model A424-19	120 mCi*	QSA model 650L	120 mCi
Cs-137	QSA model A424-30	380 mCi	QSA model 650L	10.8 Ci

\* Indicates that the sealed source maximum activity exceeds the maximum exposure device activity.

**Table 7: QSA Global, Inc. Model 880 Sigma Exposure Device Maximum Authorization --**

**Ir-192 (130 Ci)**

**Se-75 (150 Ci)**

**Yb-169 (30 Ci)**

**(Co-60 (25 mCi)**

**Cs-137 (380 mCi)**

<b>Element</b>	<b>Sealed Source</b>	<b>Curies</b>	<b>Source Changer Meeting 10 CFR 34 Requirements</b>	<b>Maximum Curies Authorized</b>
Ir-192	INC model 7	100 Ci	INC model IR-50 QSA model 650L SPEC model C-1	120 Ci 240 Ci 300 Ci
Ir-192	QSA model A424-9	150 Ci*	INC model IR-50 QSA model 650L SPEC model C-1	120 Ci 240 Ci 300 Ci
Ir-192	SPEC model T-5 or T-5F	150 Ci*	QSA model 650L SPEC model C-1	240 Ci 300 Ci
Se-75	QSA model A424-25W	150 Ci	QSA model 650L	300 Ci
Yb-169	QSA model 91810	108 Ci*	QSA model 650L	40 Ci
Co-60	QSA model A424-19	120 mCi*	QSA model 650L	120 mCi
Cs-137	QSA model A424-30	380 mCi	QSA model 650L	10.8 Ci

\* Indicates that the sealed source maximum activity exceeds the maximum exposure device activity.

**Table 8: QSA Global, Inc. Model 880 Elite Exposure Devices Maximum Authorization --**

**Ir-192 (50 Ci)**

**Se-75 (150 Ci)**

**Yb-169 (30 Ci)**

**Co-60 (25 mCi)**

**Cs-137 (380 mCi)**

<b>Element</b>	<b>Sealed Source</b>	<b>Curies</b>	<b>Source Changer Meeting 10 CFR 34 Requirements</b>	<b>Maximum Curies Authorized</b>
Ir-192	INC model 7	100 Ci*	INC model IR-50 QSA model 650L SPEC model C-1	120 Ci 240 Ci 300 Ci
Ir-192	INC model 702	155 Ci*	INC model IR-50 QSA model 650L SPEC model C-1	120 Ci 240 Ci 300 Ci
Ir-192	QSA model A424-9	150 Ci*	INC model IR-50 QSA model 650L SPEC model C-1	120 Ci 240 Ci 300 Ci

Ir-192	SPEC model T-5 or T-5F	150 Ci*	QSA model 650L SPEC model C-1	240 Ci 300 Ci
Se-75	QSA model A424-25W	150 Ci	QSA model 650L	300 Ci
Yb-169	QSA model 91810	108 Ci*	QSA model 650L	40 Ci
Co-60	QSA model A424-19	120 mCi*	QSA model 650L	120 mCi
Cs-137	QSA model A424-30	380 mCi	QSA model 650L	10.8 Ci

\* Indicates that the sealed source maximum activity exceeds the maximum exposure device activity.

**Table 9: QSA Global, Inc. Model 880 Omega Exposure Device Maximum Authorization --**

**Ir-192 (15 Ci)**

**Se-75 (80 Ci)**

**Yb-169 (30 Ci)**

Element	Sealed Source	Curies	Source Changer Meeting 10 CFR 34 Requirements	Maximum Curies Authorized
Ir-192	INC model 7	100 Ci*	INC model IR-50 QSA model 650L SPEC model C-1	120 Ci 240 Ci 300 Ci
Ir-192	QSA model A424-9	150 Ci*	INC model IR-50 QSA model 650L SPEC model C-1	120 Ci 240 Ci 300 Ci
Ir-192	SPEC model T-5 or T-5F	150 Ci*	QSA model 650L SPEC model C-1	240 Ci 300 Ci
Se-75	QSA model A424-25W	150 Ci*	QSA model 650L	300 Ci
Yb-169	QSA model 91810	108 Ci*	QSA model 650L	40 Ci

\* Indicates that the sealed source maximum activity exceeds the maximum exposure device activity.

**Table 10: QSA Global, Inc. Model 989 Exposure Device Maximum Authorization – Se-75 (20 Ci)**

Element	Sealed Source	Curies	Source Changer Meeting 10 CFR 34 Requirements	Maximum Curies Authorized
Se-75	QSA model 97941	150 Ci*	Non-approved	

\* Indicates that the sealed source maximum activity exceeds the maximum exposure device activity.

**Table 11: AEA/QSA Inc. Model 676 series Exposure Devices Maximum Authorization – Co-60 (330 Ci)**

Element	Sealed Source	Curies	Source Changer Meeting 10 CFR 34 Requirements	Maximum Curies Authorized
Co-60	QSA model A424-13	550 Ci*	QSA model 770 QSA model 771	800 Ci 110 Ci

\* Indicates that the sealed source maximum activity exceeds the maximum exposure device activity.

**Table 12: AEA/QSA Model 680 series Exposure Device Maximum Authorization – Co-60 (110 Ci)**

Element	Sealed Source	Curies	Source Changer Meeting 10 CFR 34 Requirements	Maximum Curies Authorized
Co-60	QSA model A424-14	110 Ci	QSA model 770 QSA model 771	800 Ci 110 Ci
Co-60	QSA model 943	110 Ci	QSA model 770 QSA model 771	800 Ci 110 Ci

\* Indicates that the sealed source maximum activity exceeds the maximum exposure device activity.

**Table 13: AEA/QSA Inc. Model 684 series Exposure Devices Maximum Authorization – Co-60 (11 Ci)**

Element	Sealed Source	Curies	Source Changer Meeting 10 CFR 34 Requirements	Maximum Curies Authorized
Co-60	QSA model A424-15	11 Ci	QSA model 770	800 Ci

\* Indicates that the sealed source maximum activity exceeds the maximum exposure device activity.

**Table 14: AEA/QSA Inc. Model 741 series Exposure Devices Maximum Authorization --**

**Ir-192 (240 Ci)**

**Co-60 (33 Ci)**

Element	Sealed Source	Curies	Source Changer Meeting 10 CFR 34 Requirements	Maximum Curies Authorized
Ir-192	QSA model A424-9	240 Ci	QSA model 650L	240 Ci
Co-60	QSA model A424-18	33 Ci	QSA model 770	800 Ci

\* Indicates that the sealed source maximum activity exceeds the maximum exposure device activity.

## **Item 8: Financial Assurance and Recordkeeping for Decommissioning**

**Rule:** *s. DHS 157.13(9) & (10), s. DHS 157.15*

**Criteria:** Industrial radiography licensees authorized to possess sealed sources containing radioactive material in excess of the limits specified in *s. DHS 157.15* must provide evidence of financial assurance for decommissioning.

Licensees are required to maintain, in an identified location, decommissioning records related to structures and equipment where devices are used or stored and records related to leaking sources. Licensees must transfer

these records important to decommissioning either to any new licensee before licensed activities are transferred or assigned in accordance with *s. DHS 157.13(10)*, or to DHS before license is terminated.

**Discussion:** The requirements for financial assurance are specific to the types and quantities of radioactive material authorized on a license. Most industrial radiography applicants and licensees do not need to comply with the financial assurance requirements because the thresholds for sealed sources containing radioactive material are  $3.7 \times 10^5$  Bq (10,000 curies) of cobalt-60 and  $3.7 \times 10^6$  Bq (100,000 curies) of cesium-137. Thus, a licensee would need to possess hundreds of sources before the financial assurance requirements would apply. Applicants and licensees desiring to possess sources exceeding the threshold amounts must submit evidence of financial assurance.

The same rule also requires that licensees maintain records important to decommissioning in an identified location. All industrial radiography licensees need to maintain records of structures and equipment where radioactive material was used or stored. As-built drawings with modifications of structures and equipment shown as appropriate fulfill this requirement. If drawings are not available, licensees shall substitute appropriate records (e.g., a sketch of the room or building or a narrative description of the area) concerning the specific areas and locations. If no records exist regarding structures and equipment where radioactive materials were used or stored, licensees shall make all reasonable efforts to create such records based upon historical information (e.g., employee recollections). In addition, if radiography licensees have experienced unusual occurrences (e.g., incidents that involve spread of contamination, leaking sources), they also need to maintain records about contamination that remains after cleanup or that may have spread to inaccessible areas.

### **Response from Applicant:**

**Item 8 Financial Assurance and Recordkeeping For Decommissioning** (Check box)

- We shall maintain drawings and records important to decommissioning and will transfer these records to a new licensee before licensed activities are transferred in accordance with *s. DHS 157.15(7)(a)* and (c).

If financial assurance is required, submit the documentation required under *s. DHS 157.15*. NRC NUREG-1757, Vol. 3, ‘*Consolidated NMSS Decommissioning Guidance: Financial Assurance, Recordkeeping, and Timeliness*’ dated September 2003 contains acceptable wording for each mechanism authorized by the regulation to guarantee or secure funds. This document is available from the NRC website at: [www.nrc.gov](http://www.nrc.gov) or DHS upon request.

## Item 9: Facilities and Equipment

**Rule:** *s. DHS 157.03; s. DHS 157.13(2) & (6); s. DHS 157.23(1); s. DHS 157.26(1); s. DHS 157.28(1); s. DHS 157.42; s. DHS 157.45(14)*

**Criteria:** Licensees must specifically identify and describe permanent radiographic installations, field stations, and any other locations where radiography will be conducted.

**Discussion:** A permanent radiographic installation is an enclosed shielded room, cell, or vault, not located at a temporary jobsite, in which radiography is performed. A facility is considered “permanent” if it is intended to be used for radiography, even if radiography is rarely performed there. The nature of the installation, rather than the frequency of use, determines a permanent radiographic installation. All radiographic operations conducted at locations of use authorized on the license must be conducted in a permanent radiographic installation unless specifically authorized by DHS. If licensees need to perform radiography at their place of business outside of a permanent radiographic installation due to unique circumstances (the item to be radiographed is too large for the facility), then DHS must authorize this method of use. In this case, two individuals must be present whenever radiographic operations occur outside of a permanent radiographic installation.

The one primary (and perhaps the most important) reason licensees have for conducting radiography in a permanent radiographic installation is that they can limit access. In order to ensure this control, a permanent radiographic installation located on the ground must be enclosed by a minimum of four shielded walls (otherwise the floor must also be shielded). The use of materials that do not realistically provide shielding do not qualify. Areas outside of the facility generally should qualify as unrestricted areas. While the area outside of a permanent radiographic installation should qualify as an unrestricted area (i.e., not exceed 2 mR/hr), the rule does not specify radiation limits in order to allow for design flexibility for moving equipment into and out of the permanent radiographic installation, or other considerations. Radiation levels slightly exceeding these levels outside of the installation should only be allowed when the higher levels are due to "sky shine" or when moving equipment. If the roof of the installation does not qualify as a restricted area, or if no roof exists, mechanical access restrictions (fence, etc.) must be utilized and additional administrative controls must be imposed to ensure that unwanted access can be gained only through extraordinary effort. All entrances into the installation must be interlocked with required control devices as per *s. DHS 157.26(1)*. Unless all entrances are locked, at least one radiographer must be present at the facility whenever radiography is being performed.

A field station is a facility where licensed material may be stored or used and from which equipment is dispatched. Radiographic operations may be conducted in a permanent radiographic installation or at the place of business in the same manner as described above.

A restricted area is an area that licensees limit access for the purpose of protecting individuals from undue risks from exposure to sources of radiation. A restricted area cannot include areas used as residential quarters; consequently industrial radiography devices must not be stored in motel rooms or similar locations.

Requirements for a permanent radiographic installation:

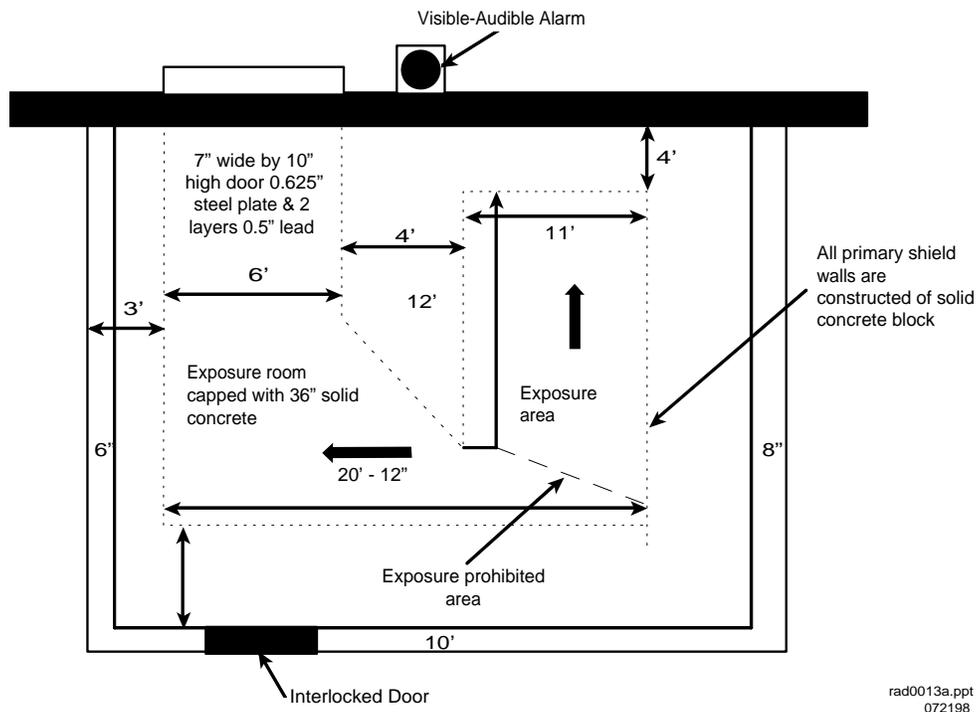
- Each access point is equipped with a visible-audible signal system. The visible signal is activated by radiation whenever the source is exposed. The audible signal will sound if anyone tries to enter the installation while the source is exposed. The requirement for the visible-audible signal system is in addition to other measures that may be taken to prevent access to the installation, such as locked doors.

As an alternative to the visible-audible alarm system, it is acceptable to use a control system that will reduce the radiation level if the entrance to a high-radiation area is opened while the source is out. The system must be automatic and independent of radiography personnel action. If this alternative is planned, provide a description of the system.

- Diagram depicting the shielding, layout, and audible-visual alarms. A diagram of the installation is helpful in evaluating the shielding and determining compliance with rules regarding restricted and unrestricted areas, location of access points, and locations of audible-visible signals. **Figure 4** shows an example installation diagram; and
- Calculations or survey results of radiation levels:  
For a determination of installation adequacy, provide information showing that the radiation level in all directions around the installation, including the roof, will not exceed a dose of 0.02 mSv (2 mrem) in any one hour. Take into account the highest quantity of radioactive material that will be used in the installation and any limitations on source positioning in the installation. Radiation levels in all directions around the installation that are below 0.02 mSv (2 mrem) in any one hour are considered acceptable. If the radiation levels will exceed 0.02 mSv (2 mrem) in any one hour, then steps should be taken (use lower-activity source, use collimator, or move setup farther away) to reduce the radiation to the acceptable level.

A radiation level on the roof that exceeds 1.0 mSv (100 mrem) in one hour at 30 cm from the surface is considered a "high radiation area" and requires special precautions to control access to the area. Licensees should make efforts to lower a radiation level exceeding 1.0 mSv (100 mrem) in any one hour by using additional shielding, collimators, or other engineering controls. The roof of a fixed radiography cell is a potentially occupied area, and applicants must demonstrate that no individual member of the public could receive effective doses in excess of 0.02 mSv (2 mrem) in any one hour or 1 mSv (100 mrem) in a year.

**Security-Related Information— Withhold from Public Disclosure Under S. 19.36(1), WI stats.**



**Security-Related Information— Withhold from Public Disclosure Under S. 19.36(1), WI stats.\***

\* The above diagram is only an example and does not contain real security-related information.

**Figure 4: Diagram of a Permanent Radiographic Installation.**

Provide the following as applicable:

- If radiography is planned in a permanent radiography installation (including field stations with permanent exposure cells), provide the following information for each installation:

An annotated sketch or drawing of the facility and its surroundings (properly marked “Security-Related Information – Withhold from Public Disclosure under S.19.36 (1), WI stats).”

- .
- The scale to which the sketch or drawing is made. The same scale should be used for all sketches and drawings; the recommended scale is 1/4 inch = 1 foot. Drawings to this scale that do not fit on 8 1/2” X 11” paper may be provided as sectional drawings;
- The type, thickness and density of shielding materials on all sides, including the floor and the roof;
- The locations of entranceways and other points of access to the facility;
- A description of the areas adjacent to the facility and the distance to these areas. Include information on areas adjacent to, above, and below the facility;
- A description of the general location of each proposed permanent installation listed in **Item 4** (e.g., located in an industrial park, an office complex, etc.) and its current use. If any proposed permanent installation is a private residence, provide diagrams of the installation that include the building, the proposed restricted area(s), and adjacent areas, including above and below the restricted areas; provide commitments that restricted areas do not include residential quarters, and explain how radiation levels in unrestricted areas will be maintained at less than 1 mSv (100 mrem) per year;
- A description of the visible-audible signal system or entrance control system and its location.
- The results of radiation-level calculations or actual radiation measurements adjacent to, above, and below the installation. The radiation level in all directions around the installation, including the roof, should not exceed 0.02 mSv (2 mrem) in any one hour. Clearly identify the isotope, the amount of radioactive material in the source, and the position of the source within the installation for the calculations or measurements.

**Note:** Mark all drawings and diagrams that provide exact location of licensed materials or depict specific locations of safety or security equipment as “Security-Related Information—Withhold From Public Disclosure Under S.19.36(1), WI stats.”

- Variances will be considered if construction requirements preclude shielding the roof in order to

meet the requirement not to exceed 0.02 mSv (2 mrem) in any one hour.

- Provide the following information to obtain approval for a variance:
  - Procedures for ensuring that no individual is on the roof or could gain access to the roof during radiography;
  - Means of preventing access to the roof;
  - A commitment that the roof will be posted with "Caution (or Danger) Radiation Area" signs;
  - Steps taken to minimize radiation on the roof; and
  - Limitations (if needed) on positioning of sources or isotope and amount of radioactive material that may be used in the installation to ensure that areas adjacent to, above, and below the installation will be unrestricted areas during the performance of radiography.
- If radiation levels on the radiography installation roof exceed 1.0 mSv (100 mrem) in any one hour, then provide the following additional information:
  - A commitment that the roof will be posted with "Caution (or Danger) High Radiation Area" signs;
  - Evidence of constant surveillance of the roof by closed circuit TV;
  - A description of a control device that would automatically reduce the radiation level to 1 mSv (100 mrem) in any one hour at 30 cm from the radiation source if someone accesses the roof; and
  - A description of a control device that activates a visible-audible signal so that both an individual accessing the roof and the radiographer on duty are made aware of the entry.
- Field Stations:
  - Describe the storage location(s) at the address(es) listed in **Item 4** and submit a diagram showing where the radiography camera will be stored at the field stations.
  - Indicate whether or not radiography will be performed at the place of business outside of a permanent radiography installation.
  - If radiography will be performed at a site outside of a permanent radiography installation, provide a diagram of the location where radiography may be performed and its surroundings, including a description of adjacent property;

### Response from Applicant:

**Item 9 Facilities And Equipment** (Check box and attach requested information)

- We will submit the required information as listed in the section titled "Facilities and Equipment" of WISREG 'Guidance for Industrial Radiography Use'.

**Note:**

- Certain records described in the regulations which pertain to radiation safety may need to be on file at these field stations and each temporary jobsite. Documentation containing security-related information needs to comply with the applicant or licensee's security program
- A licensee may need to implement enhanced security measures before licensed material may be transferred to a new field station. In addition, the new field station needs to be authorized on the license before licensed material is transferred to it. Keep in mind that the Department license amendment requests are processed within 90 days after receipt in the Department. The licensee's RSO should take into consideration the 90-day processing time when planning to open a new field station.

**Item 10: Radiation Safety Program**

**Rule:** *s. DHS 157.13(2) & (6); s. DHS 157.21; s. DHS 157.45(14)*

**Criteria:** A radiation protection program must be established and submitted to DHS as part of the application. The program must be commensurate with the scope and extent of activities for the use of licensed materials in industrial radiography. Each applicant for an industrial radiography license must develop, document, and implement a radiation protection program containing the following elements:

- Steps to keep radiation exposures as low as is reasonably achievable (ALARA);
- Description of equipment and facilities adequate to protect personnel, the public and the environment;
- Conduct of licensed activities by individuals qualified by training and experience;
- Written operating and emergency procedures;
- Program to inspect the job performance of radiographic personnel at least every 6 months;
- Description of organization structure and individuals responsible for ensuring implementation of radiation safety program; and
- Refer to s. DHS 157.45(14) for records that are required to be available at temporary jobsites.

**Discussion:** The specific components of the applicant's radiation safety program are detailed in this guide. Some topics will not require the applicant to submit information as part of an application, but simply provide the applicant with guidance to comply with a specific DHS requirement.

## Item 10.1: Radiation Safety Program Audit

**Rule:** *s. DHS 157.21; s. DHS 157.31(2)*

**Criteria:** Licensees must review the content and implementation of their radiation protection programs annually to ensure:

- Compliance with DHS and DOT requirements, and the terms and conditions of the license;
- Occupational doses and doses to members of the public that are ALARA; and
- Records of audits and other reviews of program content are maintained for 3 years.

**Discussion:** **Appendix I** contain a suggested annual audit program that is specific to industrial radiography and is acceptable to DHS. All areas indicated in **Appendix I** may not be applicable to every licensee and may not need to be addressed during each audit.

Audit records should contain the following information:

- Date of audit;
- Name of person(s) who conducted the audit;
- Names of persons contacted by the auditor(s);
- Areas audited;
- Audit findings, and corrective actions; and
- Follow-up.

It is essential that once identified, problems be corrected in a timely manner. NRC Information Notice (IN) 96-28, '*Suggested Guidance Relating to Development and Implementation of Corrective Action*' provides guidance on this subject. DHS will review the licensee's audit results and determine if corrective actions are thorough, timely, and sufficient to prevent recurrence. If violations are identified by the licensee and these steps are taken, DHS can exercise discretion and may elect not to cite a violation. DHS's goal is to encourage prompt identification and prompt comprehensive correction of violations and deficiencies.

### Response from Applicant:

#### Item 10.1 Radiation Safety Program Audit

The applicant is not required to submit its audit program to DHS for review during the licensing phase. This matter will be examined during an inspection.

## Item 10.2: Termination of Activities

**Rule:** *s. DHS 157.13; s. DHS 157.15; s. DHS 157.31; s. DHS 157.32(8)*

**Criteria:** The licensee shall do the following:

- Notify DHS, in writing, within 60 days of:
  - The expiration of its license;
  - A decision to permanently cease licensed activity at the entire site or in any separate building or outdoor area if it contains residual radioactivity making it unsuitable for release according to DHS requirements;
  - No principal activities have been conducted at the entire site under the license for a period of 24 months;
  - No principal activities have been conducted for a period of 24 months in any separate building or outdoor area if it contains residual radioactivity making it unsuitable for release according to DHS requirements.
- Submit a decommissioning plan, if required by *s. DHS 157.13(11)(f)*;
- Conduct decommissioning, as required by *s. DHS 157.13(11)(j)* and *s. DHS 157.13(11)(L)*;
- Submit to DHS, a completed DPH Form F-45007 ‘*Certificate of Disposition of Materials*’ (**Appendix B**) and demonstrate that the premises are suitable for release for unrestricted use (e.g. results of final survey); and
- Before a license is terminated, send the records important to decommissioning to DHS. If licensed activities are transferred or assigned in accordance with *s. DHS 157.13(5)(c) 2*, transfer records important to decommissioning to the new licensee.

**Discussion:** For guidance on the disposition of radioactive material, see **Item 11** ‘Waste Management’. For guidance on decommissioning records, see **Item 8** ‘Financial Assurance and Record Keeping for Decommissioning’.

**Response from Applicant:**

**Item 10.2 Termination Of Activities** (Check box )

- We will notify the department, in writing, within 60 days of the decision to permanently cease radioactive material use. *s. DHS 157.13(11)(d)*

## Item 10.3: Instruments

**Rule:** s. *DHS 157.13(2)*; s. *DHS 157.38*; s. *DHS 157.41*; s. *DHS 157.45(3)*

**Criteria:** A radiation survey meter intended for industrial radiography shall be capable of accurately measuring the radiation fields produced by the radiography source currently in use. The survey meter shall be visually checked for damage and for proper operation with a check source or other appropriate means, such as an exposure device, at the beginning of each day of use. Licensees shall have written procedures to address inspection and routine maintenance of survey meters at intervals not to exceed 3 months.

**Discussion:** The licensee shall keep an adequate number of calibrated and operable radiation survey instruments at each location where radioactive material is present to make the required radiation surveys. The instrument shall be capable of measuring a range from 0.02 mSv (2 mrem) per hour through 10 mSv (1 rem) per hour. Each radiation survey instrument shall be calibrated at intervals not to exceed 6 months and after instrument servicing, except for battery changes. Records of survey instrument calibrations, equipment problems and maintenance shall be retained for a minimum of 3 years.

### Response from Applicant:

**Item 10.3 Instruments** (Check all boxes that apply)

- We will possess and use radiation survey meter(s) that meets the Criteria in the section titled "Instruments" in WISREG "Guidance for Industrial Radiography Use".
- AND EITHER
- If calibration is performed by a person or firm outside the applicant's organization, the calibration will be performed by a DHS, NRC or another Agreement State licensee specifically authorized to perform instrument calibration.
- OR
- We will follow the survey meter calibration procedures in accordance with Appendix J in WISREG "Guidance for Industrial Radiography Use".
- OR
- We will submit alternate procedures. (Procedures are attached)

**Note:** Identify the qualifications of the individuals who will perform the calibrations if performed by the applicant.

**Note:** For detailed information about survey instrument calibration, refer to ANSI N323-1978, 'Radiation Protection Instrumentation Test and Calibration'. Reaffirmed 1993 copies may be obtained from the American National Standards Institute, 25 W 43rd Street, 4th Floor, New York, NY, 10036.

## Item 10.4: Material Receipt and Accountability

**Rule:** *s. DHS 157.06(1); s. DHS 157.13(15) & (18); s. DHS 157.40; s. DHS 157.45(2); s. DHS 157.32(9)*

**Criteria:** Licensees shall do the following:

- Maintain records of receipt, transfer, and disposal of sources/devices;
- Conduct physical inventories at quarterly intervals (not to exceed 3 months) to account for all sources of radiation and for devices, including devices containing depleted uranium; and
- Report transactions involving nationally tracked sources per DHS 157.32(9).

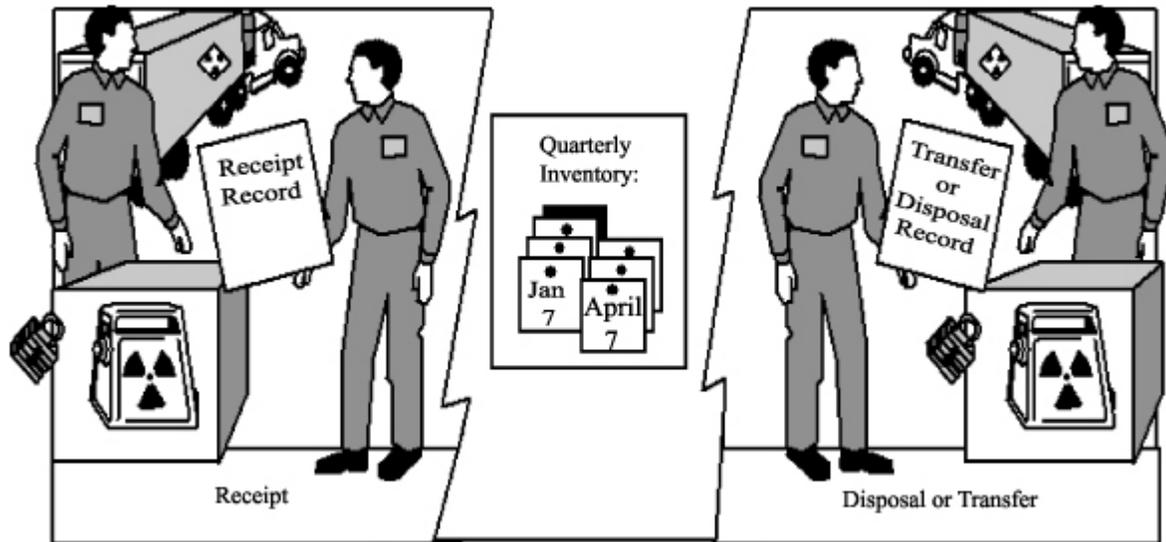
**Discussion:** As illustrated in **Figure 5** below, licensed materials must be tracked from "cradle to grave" in order to ensure accountability; identify when sources/devices may be lost, stolen, or misplaced; and ensure that the possession limit stated on the license is not exceeded.

Conduct physical inventories (i.e., locate, verify the presence of the material, and account for it in material transfer record) at quarterly intervals (not to exceed 3 months) to account for all sealed sources and devices containing depleted uranium.

Maintain inventory records that contain the following types of information:

- Radionuclide and amount (in units of GBq or curies) of radioactive material in each sealed source;
- Manufacturer's name, model number, and serial number of each sealed source;
- Manufacturer's name, model number, and serial number of each device containing depleted uranium or radioactive material;
- Location of each sealed source and device;
- Date of the inventory; and
- Name of individual performing inventory.

## Cradle to Grave Accountability



**Figure 5: Material Receipt and Accountability**

To register for National Source Tracking System go to [www.nrc.gov](http://www.nrc.gov).

### Response from Applicant:

#### Item 10.4 Material Receipt And Accountability (Check box)

- Quarterly physical inventories (not to exceed 3 months) will be conducted of all sealed sources and/or devices containing radioactive material (including depleted uranium) and the information contained in the discussion section titled "Material Receipt and Accountability" in WISREG 'Guidance for Industrial Radiography Use' will be documented.

### Item 10.5: Leak Tests

**Rule:** *s. DHS 157.13(6); s. DHS 157.39; s. DHS 157.45(4)*

**Criteria:** DHS requires testing to determine whether there is any radioactive leakage from the source or from devices containing depleted uranium shielding. DHS finds testing to be acceptable if it is conducted by an organization licensed by DHS, the NRC, or another Agreement State, or conducted in accordance with procedures approved by DHS.

**Discussion:** Manufacturers, consultants, and other organizations may be authorized by DHS, the NRC, or another Agreement State to either perform the entire leak test sequence for other licensees or provide leak test

kits to licensees. In the latter case, the licensee is expected to take the leak test sample according to the device manufacturer's and the kit supplier's instructions and return it to the kit supplier for evaluation and reporting results. Licensees may also be authorized by DHS to conduct the entire leak test sequence themselves. Measurement of the leak-test sample is a quantitative analysis requiring that instrumentation used to analyze the sample be capable of detecting 185 Bq (0.005 microcurie) of radioactivity.

Sealed sources containing radioactive material must be leak tested at intervals not to exceed 6 months and DU devices tested at intervals not to exceed 12 months.

**Response from Applicant:**

**Item 10.5 Leak Test** (Check one box)

Leak tests will be performed by an organization authorized by DHS, the NRC or another Agreement State to provide leak testing services to other licensees; or by using a leak test kit supplied by an organization licensed by DHS, the NRC or another Agreement State to provide leak test kits to other licensees according to kit suppliers' instructions.

List the name and license number of organization authorized to perform or analyze leak test (Specify whether DHS, NRC, or another Agreement State):

Organization Name \_\_\_\_\_ License Number \_\_\_\_\_ Issuing Entity \_\_\_\_\_

**Note:** An alternate organization may be used to perform or analyze leak test, without amending the license, provided the organization is specifically authorized by DHS, the NRC or another Agreement State.

**OR**

We will perform our own leak testing and sample analysis. We will follow the procedures in Appendix K of WISREG 'Guidance for Industrial Radiography Use.'

**OR**

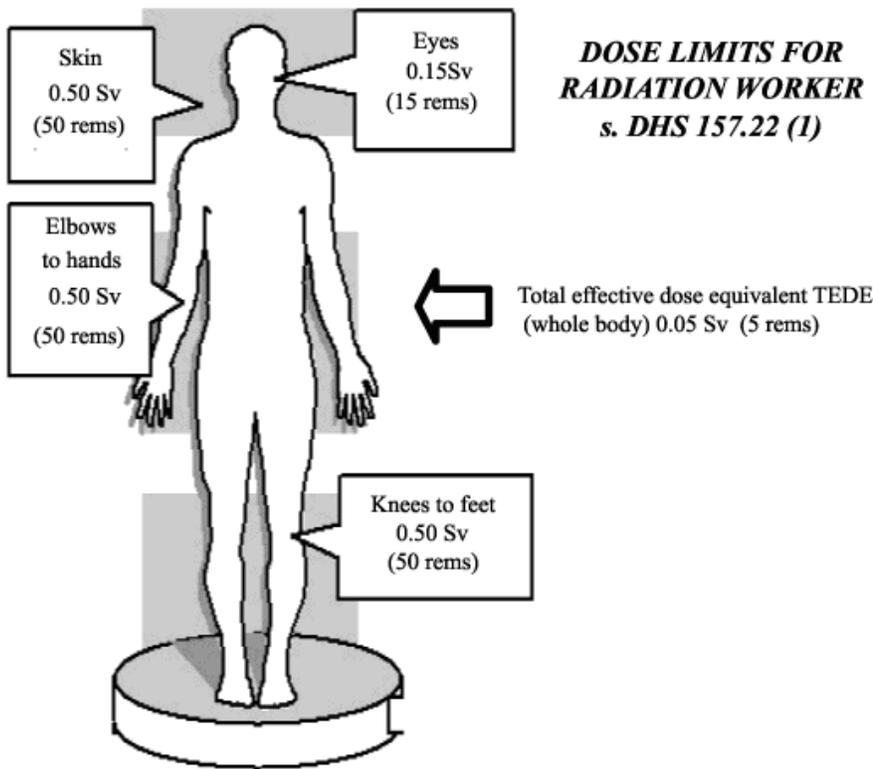
We will submit alternative procedures. (Procedures are attached)

**Note:** Requests for authorization to perform leak testing and sample analysis will be reviewed on a case-by-case basis.

**Item 10.6: Occupational Dosimetry**

**Rule:** *s. DHS 157.22(1), (7) & (8); s. DHS 157.88(3)*

**Criteria:** Licensees must provide to employees dosimetry that has been accredited under the National Voluntary Laboratory Accreditation Program (NVLAP) operated by the National Institute of Standards and Technology (NIST).



**Figure 6: Dose Limits.**

**Discussion:** The licensee may not permit any individual to act as a radiographer or a radiographer's assistant unless, at all times during radiographic operations each individual wears, on the trunk of the body, a combination of a direct-reading dosimeter (pocket dosimeter or electronic personal dosimeter), an operating alarm ratemeter, and either an OSL, TLD or similar approved device. At permanent radiography installations where other appropriate alarming or warning devices are in routine use, wearing an alarming ratemeter is not required. The pocket dosimeters must have a range from zero to 2 mSv (200 mrem), must be recharged at the start of each shift, and must be checked for correct response to radiation at intervals not to exceed 12 months. Electronic personal dosimeters may only be used in place of ion-chamber pocket dosimeters. Alarming ratemeters must be preset to give an alarm signal at a dose rate of 5 mSv/hr (500 mrem/hr) and must be calibrated for correct response at intervals not to exceed 12 months.

OSLs, TLDs or similar approved devices must be replaced at frequencies not to exceed 1 month.

## Response from Applicant:

### Item 10.6 Occupational Dosimetry (Check all boxes that apply)

- We will provide dosimetry processed and evaluated by a NVLAP-approved processor that is exchanged monthly.

AND

- The required personnel monitoring equipment, including 0 to 2 mSv (200 mrem) pocket dosimeters or electronic personal dosimeters, will be worn by radiographic personnel.

AND

- Alarming ratemeters will be worn by all radiography personnel and set to alarm at plus or minus 20% of 500 mrem/hour.

**Note:** Radiography personnel at permanent radiography installations where other appropriate alarming or warning devices are in use do not need alarming ratemeters.

AND

- Pocket dosimeters or electronic personnel dosimeters and alarm ratemeters will be checked for correct response at intervals not to exceed 12 months.

AND EITHER

- If adjustment is necessary, the devices will be returned to the manufacturer.

OR

- If adjustment is necessary, procedures for adjustments are described.

**Note:** The National Voluntary Accreditation Program (NVLAP) maintains a directory of accredited laboratories which is updated quarterly. This directory can be found at the following link:

<http://www.nist.gov/index.html>

### Item 10.7: Public Dose

**Rule:** *s. DHS 157.03; s. DHS 157.23(1) & (2); s. DHS 157.28(1)*

**Criteria:** Licensees shall do the following:

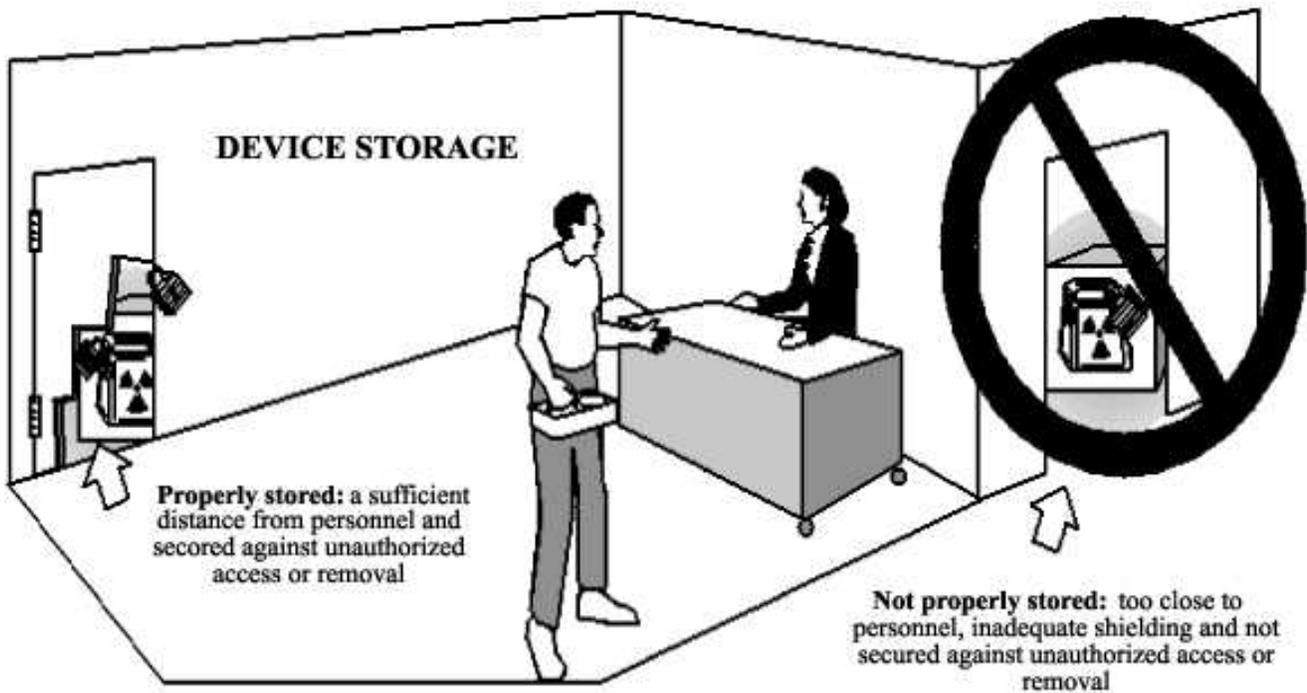
- Ensure that radiography devices will be used, transported, and stored in such a way that members of the public will not receive more than 1 mSv (100 mrem) in a year, and the dose from licensed operations in any unrestricted area will not exceed 0.02 mSv (2 mrem) in any one hour; and
- Control and maintain constant surveillance over devices that are not in storage and secure stored devices from unauthorized removal or use.

**Discussion:** Operating and emergency procedures that address security and surveillance should be sufficient to limit exposure of the public during use and after accidents. Public dose is controlled, in part, by ensuring that devices not in use are stored securely (e.g., stored in a locked area) to prevent unauthorized access or use. If devices are not in storage, then authorized users must maintain constant surveillance.

Public dose is also affected by the choice of the permanent radiographic installation and storage locations and conditions, as illustrated in **Figure 7** below. Use of area monitors such as an OSL or TLD is an acceptable means of demonstrating compliance with the annual limit of 1 mSv (100 mrem) in unrestricted areas.

Use the concepts of time, distance, and shielding when choosing a permanent radiographic installation or storage location. Decreasing the time spent near radiographic operations, increasing the distance of the device from occupied locations, using shielding material (i.e., high density concrete, solid block, or lead sheets), and implementing conservative operating procedures (i.e., use of collimators or limiting the direction of exposures towards the floor) will reduce the radiation exposure of personnel and members of the public. Alternatively, the remote location of and access to a permanent radiographic installation could prevent members of the public from receiving 1 mSv (100 mrem) in a year.

If, after an initial evaluation, a licensee makes changes affecting the permanent radiographic installation storage area (e.g., changing the location of devices within the storage area, removing shielding, adding devices, changing the occupancy of adjacent areas, moving the storage area to a new location), then the licensee must perform a new evaluation to ensure that the public dose limits are not exceeded and devices are properly secured.



**Figure 7: Storing Devices.** Devices must be stored away from occupied areas and secured against unauthorized removal.

**Response from Applicant:**

**Item 10.7 Public Dose**

No response is required, in this license application, however the licensee's evaluation of public dose will be examined during an inspection.

**Note:** Appendix L provides additional information for determining that radiation doses to other licensee personnel and members of the public will not be exceed allowable limits.

**Item 10.8: Quarterly Maintenance**

**Rule:** *s. DHS 157.14; s. DHS 157.41; s. DHS 157.45(7); s. DHS 157.96(6)*

**Criteria:** The licensee shall have written procedures for inspecting and maintaining radiographic exposure devices, source changers, associated equipment, transport and storage containers, and survey instruments. Inspection and maintenance must be conducted at intervals not to exceed every 3 months. The licensee must also have procedures necessary to maintain the Type B packaging used to transport radioactive materials, ensure that Type B packages are shipped properly, and maintain Type B packages in accordance with the Certificate of Compliance (COC) issued by NRC or other agencies approving such transport packages.

If equipment problems are found, the equipment must be withdrawn from service until repaired. Records of repairs are required.

**Discussion:** These procedures are intended to allow the licensee's staff to evaluate equipment used in radiography for safe continued use, to provide a record of this evaluation, and to guide the staff in maintenance. Equipment found to be unsuitable for service must be withdrawn until repair and an evaluation for return to service is made. These procedures may be based on the manufacturer's recommendations. The procedures are to be specific to the equipment. For example, radiography drive cable assemblies should be cleaned and lubricated (when operationally appropriate) in accordance with the recommendations of the equipment manufacturer or the cable manufacturer or alternatively, with any lubrication and cleaning recommendations established by the industrial radiography community.

Procedures are also required for Type B packaging used to transport radioactive materials. These procedures are to be used for shipping and maintenance, and may be properly drawn from the manufacturer's procedures and information submitted as a basis for the COC or other transport package approval.

**Response from Applicant:**

<p><b>Item 10.8 Quarterly Maintenance</b> (Check both boxes)</p> <p><input type="checkbox"/> We have included procedures for quarterly maintenance as part of the operating and emergency procedures.</p> <p style="text-align: center;">AND</p> <p><input type="checkbox"/> Before using a new sealed source/device combination, we will have written inspection and maintenance procedures that address the use of new equipment as a Type B transport package. In addition, we will provide training to radiographic personnel before using a new sealed source/device combination.</p>
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**Item 10.9: Operating and Emergency Procedures**

**Rule:** *s. DHS 157.13(6); s. DHS 157.44(4)*

**Criteria:** Operating and emergency procedures must be established and submitted to DHS as part of the application for a new license or for a license renewal. In addition, if radiographers will perform other operations such as source exchange, leak-testing, and quarterly (not to exceed 3 months) inspection and maintenance of equipment, appropriate procedures and instructions for these operations should be included in the operating and emergency procedures.

Each licensee must develop, implement, and maintain operating and emergency procedures containing the following elements:

- Instructions for maintaining security during storage and transportation;
- Instructions to keep radiography devices under control and immediate surveillance during use;
- Steps to take to keep radiation exposures ALARA;
- Steps to maintain accountability during use;
- Steps to control access to work sites;
- Use of personnel monitoring and radiation survey equipment;
- Instructions for packaging and transporting licensed material; and
- Steps to take and whom to contact when an emergency occurs.

**Discussion:** The purpose of operating and emergency procedures is to provide radiography personnel with specific guidance for all operations they will perform. A sequential set of procedures and instructions from the beginning to the end of the workday is an acceptable format. Instructions for non-routine operations, for example, quarterly (not to exceed 3 months) inspection and maintenance or instrument calibration, may be included as separate appendices.

It is not necessary for operating and emergency procedures to be specific to a particular make and model of exposure device, source exchanger, or survey instrument. Procedures submitted to DHS should provide sufficient guidance and instruction for each specific type of device. For example, you may submit a single operating procedure for crank-out regardless of the manufacturer and/or a single operating procedure for pipeliner exposure devices regardless of manufacturer.

Applicants who plan to conduct lay-barge, offshore platform, or underwater radiography are required to have their procedures approved by DHS. If you plan to conduct lay-barge, offshore platform or underwater radiography, your radiation safety program will be reviewed to assure that it contains procedures that specifically address:

- Transport of licensed material;
- Storage facilities for licensed material;
- Methods for restricting access to radiation areas;
- Radiation safety procedures and radiographer responsibilities unique to lay-barge, offshore platform, or underwater radiography;
- Radiographic equipment and radiation safety procedures unique to underwater radiography;
- Methods appropriate for use of equipment in water environments;
- Applicable inspection and maintenance procedures unique to lay-barge, offshore platform, or underwater radiography equipment; and
- Emergency procedures unique to lay-barge, offshore platform, or underwater radiography.

Operating and emergency procedures must be submitted to DHS for review.

**Note:** Consider revising operating and emergency procedures if a new sealed source/device combination is requested.

## Item 10.9.1: Handling and Use of Sealed Sources and Radiography Exposure Devices

**Rule:** *s. DHS 157.44(4)*

**Criteria:** Licensees need to establish operating and emergency procedures.

**Discussion:** There are two types of devices normally used for radiography; crankout and pipeliner. There should be separate instructions for each type of device. Separate instructions are not necessary for each different model of a given type of device since the operation of each type is essentially the same regardless of the manufacturer. Some applicants may choose to use one basic instruction for all crankout devices; others may choose to have separate instructions for each model. Either approach is acceptable.

Specific procedures are required for performing source exchanges, including those at temporary jobsites, field stations, and in a permanent radiographic installation. The procedures should contain warnings of areas of concern during source exchanges. Recent incidents of sources becoming dislodged from the shielded position indicate the importance of training personnel in the appropriate techniques. Procedures should require the use of survey instruments, dosimetry, and surveys during and after movement of sources.

### Response from Applicant:

#### Item 10.9.1 Handling and Use of Sealed Sources and Radiography Exposure Devices (Check Box)

We have included the following in the operating and emergency procedures:

Step-by-step instructions for using each type of radiographic devices;

Instructions for performing source exchanges; and

Instructions for crankout devices should be separate from those for pipeliner devices.

**Note:** Manufacturers' manuals and similar documents should not be incorporated into the procedures, rather, information should be extracted from them and paraphrased.

**Appendix M** provides information for applicants to consider when developing their procedures for operating radiography equipment.

## Item 10.9.2: Methods and Occasions for Conducting Radiation Surveys

**Rule:** *s. DHS 157.23(2); s. DHS 157.29(6); s. DHS 157.36(1)(a); s. DHS 157.37(1); s. DHS 157.39; s. DHS 157.44(7); s. DHS 157.94(1)(j)*

**Criteria:** Perform radiation surveys during use, movement, and storage of licensed material to ensure its safe use and comply with regulatory requirements.

**Discussion:** In general, surveys need to be made whenever a source is manipulated or moved. Surveys should be made with a radiation survey instrument calibrated in accordance with *s. DHS 157.38*. The following table provides examples of surveys made during radiographic and associated operations that should be included in the operating and emergency procedures.

**Table 15:** Surveys Required for Radiographic Operations

Type of Radiation Survey	Frequency	Requirement
Boundary of restricted area at temporary jobsite does not exceed 0.02 mSv (2 mrem) in any one hour	During the first exposure for each set up of radiographic device	<i>s. DHS 157.23(2)</i>
Unrestricted area in vicinity of permanent radiographic installation or storage area does not exceed 1 mSv (100 mrem) per year	At intervals not to exceed 12 months	<i>s. DHS 157.23(2)</i>
External radiation levels when a package is received and opened	Each receipt of package	<i>s. DHS 157.29(6)</i>
Exposure rate does not exceed 2 mSv/hr (200 mrem/hr) on surface and 0.1 mSv/hr (10 mrem/hr) at one meter	Each installation of new source in exposure device	<i>s. DHS 157.36(1)(a)</i>
Exposure rate does not exceed 2 millisieverts (200 millirem) per hour at any exterior surface, and 0.1 millisieverts (10 millirem) per hour at 1 meter from any exterior surface with the sealed source in the shielded position.	Each installation of new source in a storage container or source changer	<i>s. DHS 157.37(1)</i>
Contamination level for leak tests of sealed sources does not exceed 185 Bq (0.005 microcuries)	At intervals not to exceed 6 months	<i>s. DHS 157.39</i>
DU contamination level for leak test of S tube of exposures device with DU does not exceed 185 Bq (0.005 microcuries)	At intervals not to exceed 12 months	<i>s. DHS 157.39</i>
Confirm source has returned to a shielded position	After every radiographic exposure	<i>s. DHS 157.44(7)</i>
Confirm source is in shielded position	After every source exchange or	<i>s. DHS 157.44(7)</i>

	exposure device is placed in storage	
Exposure rates meet labeling of package (i.e., Yellow II) and determine Transportation Index	Every movement of licensed material on public roads	<i>s.DHS 157.94(1)(j)</i>
Exposure rates in and around vehicle do not exceed 0.002 mSv/hr (2 mrem/hr) in driver's seat, 2 mSv/hr (200 mrem/hr) on surface and 0.1 mSv/hr (10 mrem/hr) at 2 meters from vehicle	Every movement of a package labeled Yellow III	<i>s. DHS 157.94(1)(j)</i>

**Response from Applicant:**

**Item 10.9.2 Methods and Occasions For Conducting Radiation Surveys** (Check box)

- We have included in the operating and emergency procedures all surveys as described in the section titled "Methods And Occasions For Conducting Radiation Surveys" in WISREG 'Guidance for Industrial Radiography Use'.

**Item 10.9.3: Methods for Controlling Access to Radiographic Areas**

**Rule:** *s. DHS 157.28(1); s. DHS 157.29(2); s. DHS 157.42; s. DHS 157.44*

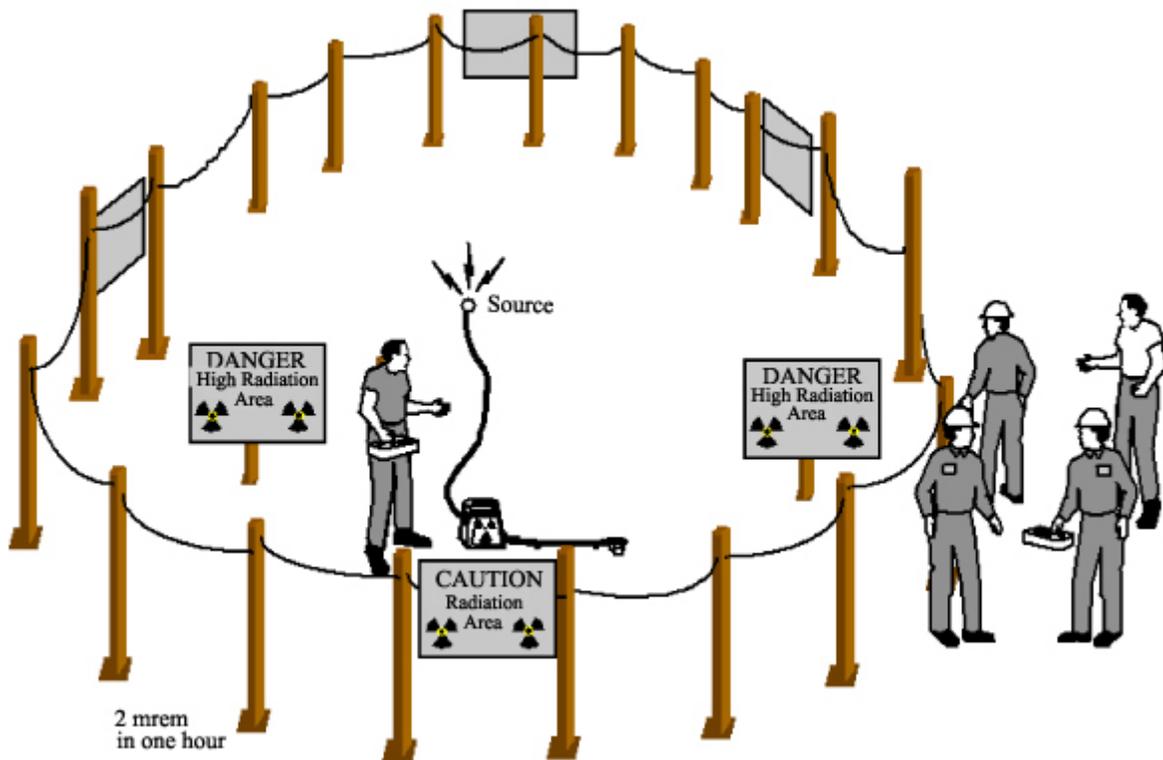
**Criteria:** Each licensee must control access to areas where licensed material is either used or stored to prevent the unnecessary exposure of members of the public. This can be achieved through the use of posting, by locking devices and areas where licensed materials are stored, and by maintaining constant control and continuous surveillance of areas where radiographic operations are conducted. Operating and emergency procedures should include steps for radiographic personnel to ensure that access to licensed materials is controlled for the types of operations that will be performed.

**Discussion:**

**1. Field/Temporary Jobsites**

When radiographic operations are performed outside a permanent radiographic installation, at least two qualified radiographic personnel must be present. At least one of the individuals must be a radiographer; the other may be another radiographer or a radiographer's assistant. Both individuals must maintain constant surveillance of the operations to prevent unauthorized entry to the restricted area. Operating procedures must comply with the two-man rule for radiographic operations at any locations other than permanent radiographic facilities.

Radiographic personnel are required to maintain continuous direct visual surveillance of operations to protect against unauthorized entry to the high radiation area during radiographic operations. Radiographic personnel should be instructed to keep the perimeter of the restricted area under continuous surveillance to prevent unnecessary exposure of individuals. Operating procedures should specify steps for responding to unauthorized entry to the restricted area. For example, personnel should be instructed to terminate the radiographic exposure immediately, before confronting the person who entered the restricted area.

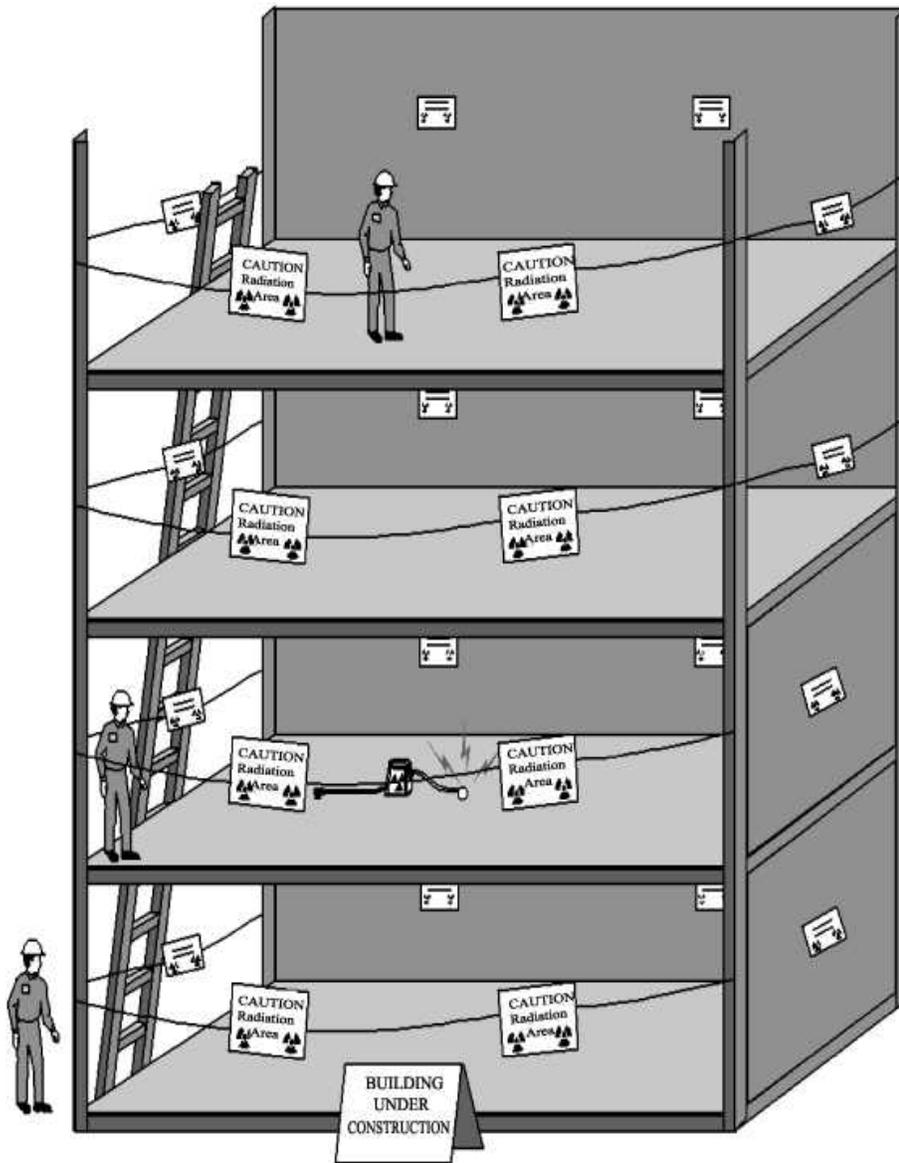


**Figure 8: Posting:** A radiographer is likely to use only a single rope barrier. The radiation area and restricted area would be combined into one and located at the 2 mrem in any 1-hour boundary.

All areas where radiographic operations are conducted require posting of the radiation areas and the high radiation areas as shown in **Figure 8**. It is acceptable to post the perimeter of the restricted area rather than the perimeter of the radiation area. Personnel should be instructed to post "Caution Radiation Area" signs at the point where radiation levels have been calculated to reach 0.02 mSv (2 mrem) in any one hour. A confirming survey during to the first exposure of the source should be conducted to confirm the location of the boundary and any necessary adjustments should be made.

The perimeter of the high radiation area must be posted with a "Caution (or Danger) High Radiation Area" sign(s) at the point where radiation levels have been calculated to reach 1 mSv (100 mrem) in any one hour. A confirming survey of the high radiation area perimeter should not be conducted, since such a survey could lead to unnecessary exposure of personnel.

Surveillance of the restricted area at facilities with multiple levels and multiple access points, or where members of the public are close to the radiographic operations (e.g., boilers, commercial manufacturing plants, or power plants during outages) can usually be performed only when more than two radiographic personnel are assigned to the job. **Figure 9** below provides one example of such a temporary jobsite. Operating procedures and instruction to personnel should include specific steps for these circumstances to ensure that access into the restricted area is properly controlled. These special instructions may include the use of additional personnel to assist radiographic personnel in controlling access into the restricted area, providing instruction to other workers in the area, or making announcements over the public address system before and during radiographic operations.



**Figure 9: Surveillance and Posting at a Temporary Job Site with Multiple Floors and Access Points.** Adequate control of the restricted area at this type of job site requires several personnel and many postings.

## 2. Permanent Radiographic Installations

For permanent radiographic installations, instruct personnel about posting each entrance to the facility with a "Caution (or Danger) High Radiation Area" sign(s), and provide procedures to ensure that the visible-audible signal system is operable. The operability of the visible-audible system must be checked daily. The following procedures may be used:

- Expose a radiation source in the permanent installation with all entrances closed;
- Determine that each visible signal in and outside the installation is functional;

- Open the door to each entrance into the installation to activate the audible alarm;
- Close the entrance and confirm that the alarm stops;
- If the installation has more than one entrance, only one entrance should be tested at a time; and
- Document the results of test.

In the event that an entrance control device or an alarm fails to operate properly at the permanent radiographic installation, the installation may continue to operate for up to 7 days while the defective equipment is fixed, provided that:

- The entrance control device is labeled as defective;
- Radiography personnel maintain continuous, direct, visual surveillance of access installation points; and
- Radiography personnel use an alarming rate meter.

### **3. Storage Areas**

Radiographic equipment containing licensed material stored in controlled or unrestricted areas must be secured from unauthorized removal or access. Operating procedures should specify how stored licensed material should be secured and identify who is authorized access to licensed material.

A vehicle used to transport licensed material can also be used for storage at locations such as temporary jobsites or overnight lodging. If the applicant plans to use vehicles for storage, there should be procedures and instructions to personnel about proper posting of the vehicle. A physical survey should be performed to confirm that the area around the storage facility is an unrestricted area. Radiation levels may not exceed 0.02 mSv/hr (2 mrem/hr) at 11.8 inches (30 cm) from any external surface of the vehicle and the vehicle shall be locked when it is used for storage.

Radiographic equipment stored at temporary jobsites must be secured at a location that prevents access by unauthorized personnel. It is not acceptable for a device to be chained to a post and left unattended at the place of use during lunch, breaks, or after hours. Storage of exposure devices at a private residence is unacceptable unless it has been identified and approved in a license. See **Appendix D** for increased controls storage requirements.

## Response from Applicant:

### Item 10.9.3 Methods For Controlling Access to Radiographic Areas (Check box)

- We have included procedures to control access to radiographic operations and storage areas in the operating and emergency procedures

**Note:** All regulatory criteria applying to your normal place of business for conducting industrial radiography operations also apply to the location in which you store at your private residence. You must specify this storage location in your license application.

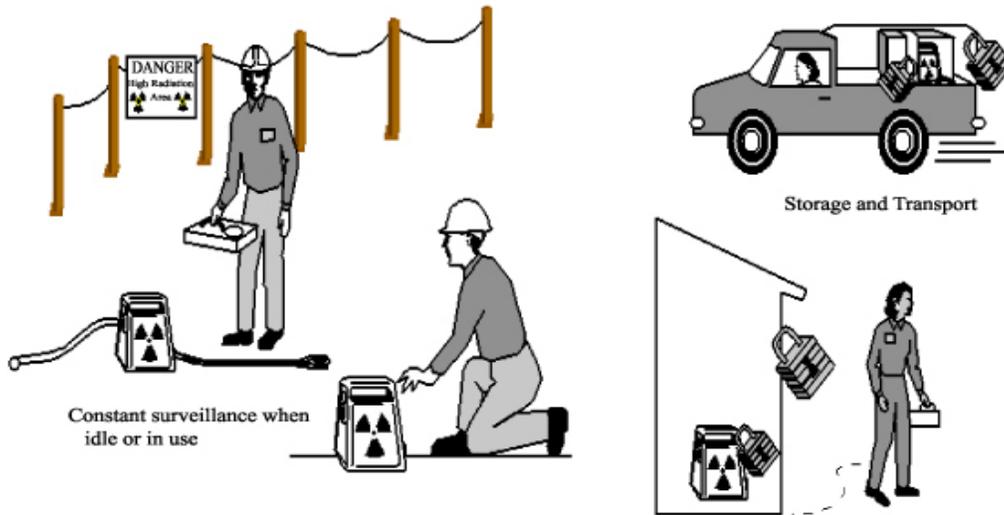
### Item 10.9.4: Methods and Occasions For Locking and Securing Radiographic Exposure Devices, Storage Containers, and Sealed Sources

**Rule:** *s. DHS 157.36; s. DHS 157.37(2)*

**Criteria:** Chapter DHS 157 ‘Radiation Protection’ requires locking and securing radiographic equipment to protect the public and radiographers from an inadvertent exposure to radiation.

**Discussion:** All radiographic devices (i.e. gamma cameras), sealed source storage containers, and source changers are required to have a lock or outer-locked container to maintain the sealed source in its shielded position. During radiographic operations the source must automatically be secured in the shielded position each time the source is returned. Radiographers must not attempt to circumvent the automatic securing features or tamper with the safety features of radiographic devices. As shown in **Figure 10** below radiographers must never leave the exposure device at the temporary jobsite without securing it properly from unauthorized removal or tampering. Radiographers and radiographer’s assistants must ensure that the exposure device and/or storage or source containers are maintained locked (and if key locked, with the key removed at all times) when they are not under the direct supervision of the radiographer or the radiographer's assistant, except at permanent radiographic installations that meet the increased controls requirements (see **Appendix D**).

## Security



**Figure 10: Security.** To avoid lost or stolen devices, licensees must keep the devices under constant surveillance, or secured against unauthorized use or removal.

### Response from Applicant:

**Item 10.9.4 Methods and Occasions For Locking and Securing Radiographic Exposure Devices, Storage Containers, and Sealed Sources (Check box)**

We have included procedures for locking and securing radiographic equipment in the operating and emergency procedures

### 10.9.5: Personnel Monitoring and the Use of Personnel Monitoring Equipment

**Rule:** *s. DHS 157.25(1); s. DHS 157.25(2); s. DHS 157.44(6)*

**Criteria:** Provide procedures for appropriate use of personnel monitoring equipment.

**Discussion:** As shown in **Figure 11** below, all radiographers or radiographer's assistants are required to wear:

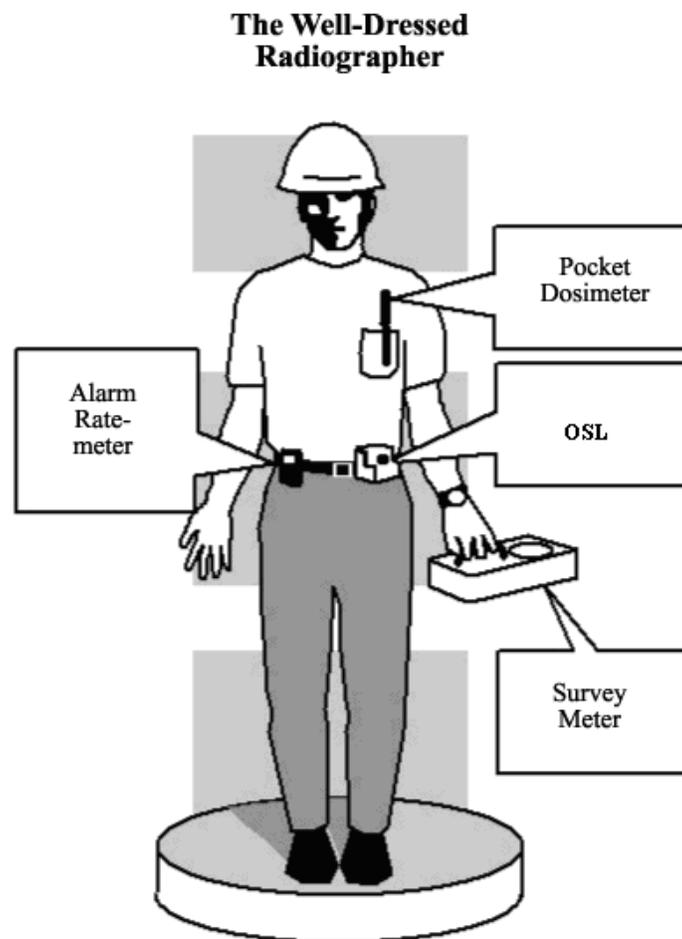
- Direct-reading dosimeters or electronic personnel dosimeters;
- OSLs, TLDS or similar devices; and
- Alarm ratemeters when they are engaged in radiographic field operations.

OSLs, TLDS or similar devices must be assigned to and worn by only one individual. To ensure full-scale reading capability, direct reading dosimeters such as pencil (pocket) dosimeters or electronic personal

dosimeters must be recharged or reset at the start of each shift so that the dosimeters will be capable of reading the full scale. It is good practice to check the dosimeter during the work shift. Personnel should be instructed that direct reading dosimeters must be read and recorded at the beginning and end of each shift. Proper operation of alarm ratemeters must be checked each day before use to ensure that the alarm functions properly. The manufacturer's recommended procedures should be followed.

All radiographers or radiographer's assistants are required to wear alarm ratemeters except at permanent radiographic facilities where other appropriate alarm or warning devices (e.g., visible and audible alarms) are in routine use and are operable.

Include instructions about how and where dosimetry devices are to be stored when not in use. The storage place should be dry, radiation free, and cool so that the devices will not be affected by adverse environmental conditions.



**Figure 11: The Well Dressed Radiographer**

## Response from Applicant:

### Item 10.9.5 Personnel Monitoring and the Use of Personnel Monitoring Equipment (Check box)

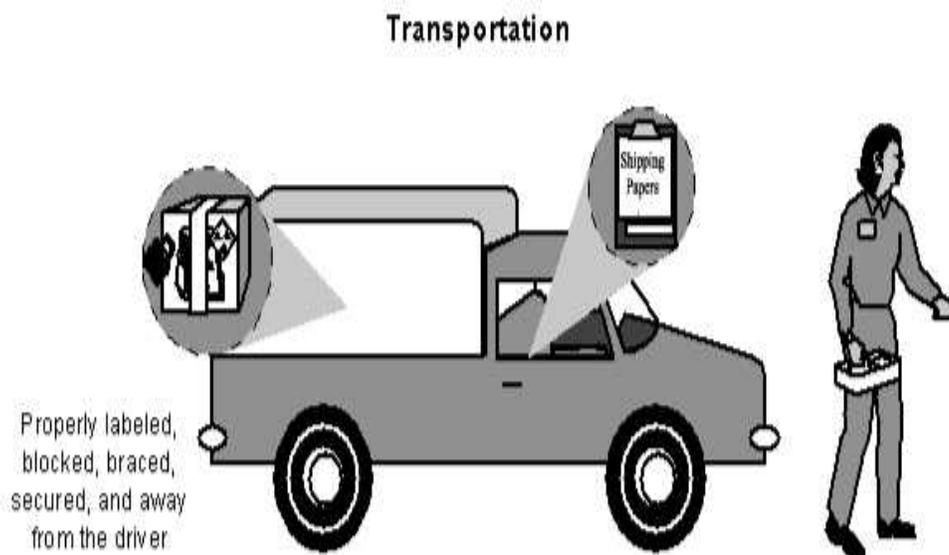
We have included instructions for proper use of personnel monitoring equipment in the operating and emergency procedures

## Item 10.9.6: Transporting Sealed Sources to Field Locations, Securing Exposure Devices and Storage Containers in Vehicles, Posting Vehicles, and Controlling Sealed Sources During Transportation

**Rule:** *s. DHS 157.92(3)*

**Criteria:** Licensees must develop, implement, and maintain procedures for transporting radioactive material to ensure compliance with DOT regulations.

**Discussion:** **Figure 12** below illustrates some often-overlooked DOT requirements. During an inspection, DHS uses the provisions of *s. DHS 157.92(3)* which incorporates the requirements of 49 CFR, to examine and enforce transportation requirements applicable to radiography licensees. **Appendix N** contains: 1) a list of major DOT regulations applicable to transporting radiographic devices; and 2) a condensed summary of DHS/DOT requirements.



**Figure 12: Transportation.** Licensees often transport their radiographic devices to and from sites and must ensure compliance with Department of Transportation regulations.

Instructions to personnel should not reference DHS/DOT requirements. Information should be extracted, paraphrased, and placed into the instructions so that personnel know exactly what they are expected to do. The following items should be covered in instructions to personnel:

- Labeling containers appropriately (i.e., when to use labels Radioactive White I, Radioactive Yellow II, or Radioactive Yellow III);
- Securing the exposure device or storage container within the transporting vehicle. The instructions should specify how to prevent the package from moving during transport;
- Preparation of shipping papers. The instructions should specify that the papers must be completed before transporting the licensed material and must be accessible in the driver's compartment at all times;
- Placarding both sides, the front, and the back of the vehicle with "RADIOACTIVE" placards if the package being transported requires a Radioactive Yellow III label. If the vehicle requires placarding and the package radiation levels exceed 2 mSv/hr (200 mrem/hr) or the transport index exceeds 10, exterior surfaces and passenger compartment of the vehicle must be surveyed to ensure that the radiation levels do not exceed 0.02 mSv/hr (2 mrem/hr) from any exterior surface and 0.02 mSv/hr (2 mrem/hr) in the passenger compartment. Include instructions to personnel on the measures to take if the radiation level exceeds 0.02 mSv/hr (2 mrem/hr) in the passenger compartment (e.g., adding more shielding or repositioning the device within the vehicle);
- Ensure that the licensee's name and city/town is prominently displayed as a label on both sides of the vehicle; and
- If an exposure device is transported in an overpack, the procedures should include instructions that the overpack must be properly marked with the shipping name and identification number, labeled (Radioactive White I or Radioactive Yellow II), and marked when required with a statement that indicates the inner package complies with prescribed specifications.

Because the licensee may have authorization to possess and use several sealed source/device combinations that are registered by the NRC or an Agreement State and meet the safety performance requirements of *s. DHS 157.36*, the applicant must, before using a new sealed source/device combination, develop written inspection and maintenance procedures for it and for the corresponding Type B transport package. In addition, the applicant must provide adequate training for radiographic personnel before using a new sealed source/device combination.

## Response from Applicant

**Item 10.9.6 Transporting Sealed Sources to Field Locations, Securing Exposure Devices and Storage Containers in Vehicles, Posting Vehicles, and Controlling Sealed Sources During Transportation** (Check one box)

We have included procedures for transporting sealed sources containing radioactive material, exposure devices, and source changers in the operating and emergency procedures.

OR

Not Applicable (Devices are not transported)

**Note:** To review the 2008 Radioactive Material Regulations Review completed by DOT, can be reviewed at the following link:

[http://www.phmsa.dot.gov/staticfiles/PHMSA/DownloadableFiles/Files/RAM\\_Regulations\\_Review\\_12-2008.pdf](http://www.phmsa.dot.gov/staticfiles/PHMSA/DownloadableFiles/Files/RAM_Regulations_Review_12-2008.pdf)

Before the 1997 revision of **10 CFR Part 34**, a licensee who intended to transport a radiographic Type B package was required to submit a quality assurance program to NRC for approval, separate from the license approval. The 1997 revision to **10 CFR Part 34** requires written procedures for inspection and maintenance of radiographic Type B packages (**10 CFR 34.31(b)**). In conjunction with the revision to **10 CFR Part 34**, the NRC also amended **10 CFR 71.101(g)** to specifically state that if the applicant's written procedures for inspection and maintenance of radiographic Type B packages are approved, then the applicant also meets NRC quality assurance requirements in **10 CFR Part 71** and does not have to submit or maintain a separate quality assurance program to transport a Type B package. The application's inspection and maintenance procedures for radiographic equipment, which are also used for Type B packages, should ensure that these packages are shipped and maintained in accordance with their COC.

### **Item 10.9.7: Daily Inspection and Maintenance of Radiographic Equipment**

**Rule:** *s. DHS 157.41; s. DHS 157.42; s. DHS 157.44(4), (6) & (7); s. DHS 157.45(7); s. DHS 157.45(11)*

**Criteria:** The licensee shall perform visual and operability checks before using radiography equipment on each day it is used.

**Discussion:** Visual and operability checks must be performed on radiographic exposure devices, survey meters, associated equipment, and transport and storage containers before use each day the equipment is used. These checks are intended to ensure that the equipment is in good working condition that the sources are adequately shielded, and that required labeling is present. Licensees shall verify survey instrument operability using check

sources or other appropriate means.

Inspection records shall contain information about equipment problems found in daily checks and quarterly (not to exceed 3 months) maintenance inspections. Records shall include the date of check or inspection, name of inspector, equipment involved, any problems found, and what repair and/or maintenance, if any, was done.

Instructions to personnel using radiographic equipment must clearly state that inspections are to be made before the equipment is used each day. While not a requirement, good practice would be that if the equipment is used on more than one shift in the day, the equipment should be inspected before the start of each shift.

The procedures should specify the items that are to be checked and the steps that are to be taken if any defects are found. If problems are found, the equipment must be removed from service until it is repaired.

A list of items that should be checked in the daily inspection of radiography equipment can be obtained by contacting the equipment manufacturers.

Permanent radiographic installation visible and audible alarms must be checked for operability daily before use, and faulty radiographic equipment must be labeled and repaired within 7 days, with compensatory measures taken in the interim. Compensatory measures taken include:

- Immediately label faulty equipment as defective;
- The radiographer must be accompanied by at least one other radiographer or radiographer's assistant;
- Continuous surveillance requirements are implemented until repairs are completed;
- Alarming ratemeters shall be worn and checked for alarm function at the beginning of each shift; and
- Records must be maintained of faulty equipment.

**Appendix O** provides example instructions for daily inspection of radiographic devices and equipment.

## Response from Applicant:

### Item 10.9.7 Daily Inspection And Maintenance Of Radiography Equipment (Check box)

- We have included procedures for daily inspection and maintenance of radiography equipment in our operating and emergency procedures.

**Note:** Direct reading dosimetry devices must be read and the exposures recorded at the beginning and end of each shift. Alarm ratemeters shall be checked for alarm function at the beginning of each shift. Records shall be maintained for 3 years.

### Item 10.9.8: Ratemeter Alarms or Off-Scale Dosimeter Readings

**Rule:** *s. DHS 157.44(3), (4) & (6)*

**Criteria:** Licensees must instruct personnel in:

- Appropriate handling and use of sealed radioisotope sources and radiography devices;
- Methods and occasions for conducting radiation surveys, controlling access to radiation areas and locking, securing, and transporting storage containers, radiographic exposure devices, and sealed radioisotope sources;
- The operating and emergency procedures;
- Actions to be taken if a dosimeter shows an off-scale reading or an alarm ratemeter alarms (sounds, etc.) unexpectedly;
- Procedures to be followed if an OSL, TLD or similar device is lost or damaged; and
- Procedures for notifying the proper persons in the event of an accident.

**Discussion:** If an individual's direct-reading pocket dosimeter is found to be off scale, an individual's electronic personal dosimeter reads above 2 mSv (200 mrem), or a ratemeter alarms (sounds, etc) unexpectedly, the RSO or designee must be notified immediately. If radiation exposure cannot be ruled out by the RSO or designee as the root cause, the individual's OSL, TLD or similar approved device must be sent for processing within 24 hours. The affected individual may not resume work with radioactive material until the RSO or designee has determined the individual's radiation exposure. **There are no exemptions to this requirement.**

If any of the events described above should occur, personnel should be instructed to do the following at a minimum:

- Stop work immediately, ensure that the source is in the safe storage position in the exposure device, and vacate the radiation area;
- If the ratemeter alarms (sounds, etc.), evaluate pocket dosimeter reading;
- Notify the individual specified in the emergency procedures;
- Notify the RSO or designee of the problem;
- If pocket dosimeter is off scale, do not resume operations until authorized by the RSO or designee; and
- If the exposure cannot be ruled out by the RSO or designee, then the OSL or TLD must be processed within 24 hours.

**Response from Applicant:**

**Item 10.9.8 Ratemeter Alarms or Off-Scale Dosimeter Readings** (Check box)

We have addressed ratemeter alarms or off-scale dosimeters in the operating and emergency procedures

**Item 10.9.9: Procedure for Identifying and Reporting Defects and Non-compliance**

**Rule:** *s. DHS 157.13(17); s. DHS 157.46*

**Criteria:** Licensees must notify management if defects are found in radiography equipment.

**Discussion:** Equipment defects that cause a substantial safety hazard, or equipment failures involving DHS-regulated activities, must be reported to DHS. For example, a failure of the coupling between the source assembly and the control cable must be reported to DHS. Radiography personnel should be instructed to report any malfunction or defect in radiography equipment to management, so that management can take appropriate action.

**Response from the Applicant:**

**Item 10.9.9 Procedure for Identifying and Reporting Defects and Non-Compliance** (Check box)

We have included procedures for notifying management of equipment malfunction or defect in the operating and emergency procedures

**Note:** See NRC RIS 05-10 ‘*Performance-Based Approach for Associated Equipment in 10 CFR 34.20*’. This is available from the NRC website at [www.nrc.gov](http://www.nrc.gov).

## **Item 10.9.10: Required Notifications**

**Rule:** *s. DHS 157.13(17); s. DHS 157.32(1), (2) & (3); s. DHS 157.44(4); s. DHS 157.46*

**Criteria:** Operating and emergency procedures must ensure that appropriate notifications are made during and after an emergency.

**Discussion:** The emergency procedures should clearly identify the names and telephone numbers of the RSO or other persons who can provide assistance in an emergency or accident. Such persons may also include the exposure device manufacturer, DHS, and local agencies. The emergency procedures shall always be available to radiography personnel during radiography and up-to-date.

DHS rules also require immediate notification upon the discovery of certain events. Notify DHS when radiographic devices are lost or stolen or if there is indication of overexposure. Refer to the rule stated above or to **Appendix P** for additional guidance in the preparation of emergency procedures. **Table 16** below provides a description of events that require notification and/or reports.

**Table 16: Required Notifications**

<b>EVENT</b>	<b>TEL. NOTIFICATION</b>	<b>WRITTEN REPORT</b>	<b>RULE</b>
Fire, explosion or toxic gas release	Immediate	30 days	<i>s. DHS 157.13(17)(a)</i>
Unplanned contamination event	24 hours	30 days	<i>s. DHS 157.13(17)(b)</i>
Equipment is disabled or fails to function as designed	24 hours	30 days	<i>s. DHS 157.13(17)(b)</i>
Theft or loss of material	Immediate	30 days	<i>s. DHS 157.32(1)</i>
Whole body dose greater than 0.25 Sv (25 rems)	Immediate	30 days	<i>s. DHS 157.32(2)(a)</i>
Extremity dose greater than 2.5 Sv (250 rems)	Immediate	30 days	<i>s. DHS 157.32(2)(a)</i>
Whole body dose greater than 0.05 Sv (5 rems) in 24 hours	24 hours	30 days	<i>s. DHS 157.32(2)(b)</i>
Extremity dose greater than 0.5 Sv (50 rems) in 24 hours	24 hours	30 days	<i>s. DHS 157.32(2)(b)</i>
Whole body dose greater than 0.05 Sv (5 rems)	None	30 days	<i>s. DHS 157.32(3)(a)</i>
Dose to minor greater than 5mSv (500 mrem)	None	30 days	<i>s. DHS 157.32(3)(a)</i>
Dose to embryo or fetus of a declared pregnant woman greater than 5 mSv (500 mrem)	None	30 days	<i>s. DHS 157.32(3)(a)</i>
Dose to individual member of public greater than 1 mSv (100 mrem)	None	30 days	<i>s. DHS 157.32(3)(a)</i>
Any applicable limit in the license	None	30 days	<i>s. DHS 157.32(3)(a)</i>
Leak test of sealed source or guide tube greater than 185 Bq (0.005 $\mu$ Ci)	None	5 days	<i>s. DHS 157.32(7)</i>
Unintentional disconnection of the source assembly from the control cable	None	30 days	<i>s. DHS 157.46(1)</i>
Inability to retract the source assembly to its fully shielded position and secure it in its retracted position	None	30 days	<i>s. DHS 157.46(1)</i>
Failure of any component which is critical to safe operation of the device to properly perform its intended function	None	30 days	<i>s. DHS 157.46(1)</i>
An indicator on radiation machine fails to show that radiation is being produced, and exposure switch fails to terminate production of radiation when turned to the off position or a safety interlock fails to terminate x-ray production	None	30 days	<i>s. DHS 157.46(1)</i>
Use of licensed material at any location not on license for more than 180 days in a calendar year	Notify DHS prior to exceeding 180 days	None	<i>s. DHS 157.46(3)</i>
Submit report of annual radiation exposure	None	By April 30 of each year	<i>s. DHS 157.32(5)</i>

**Response from Applicant:**

**Item 10.9.10 Required Notifications** (Check box)

- We have included appropriate instructions for notifying the RSO and/or other personnel in the operating and emergency procedures.

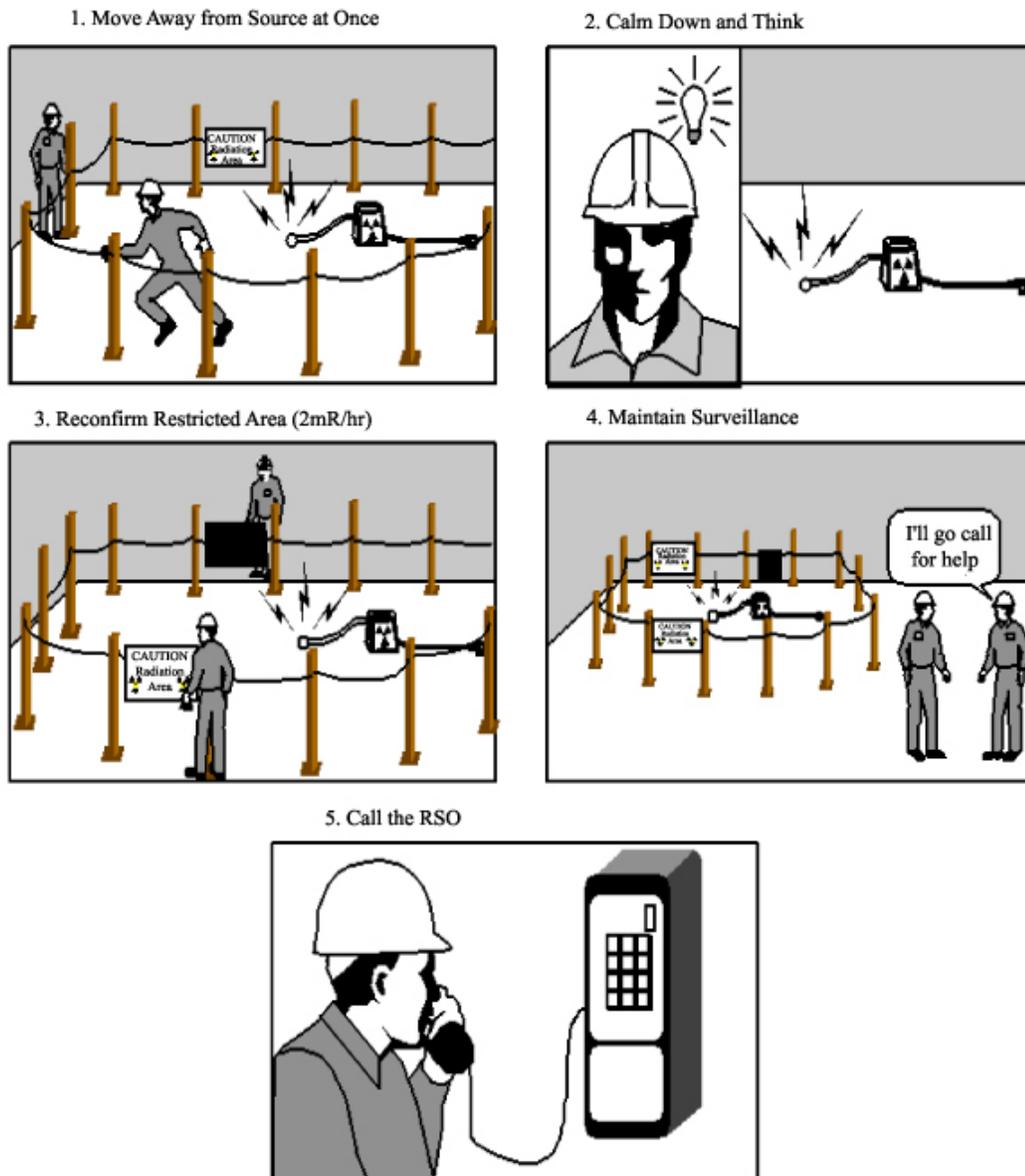
**Note:** Telephone notifications shall be made to DHS at (608) 267-4797 during normal business hours (8 a.m. – 4:30 p.m.) For immediate notifications after normal business hours, DHS's 24 hour emergency telephone number is (608) 258-0099. Identify the emergency as radiological.

**Item 10.9.11: Minimizing Exposure of Persons In The Event of an Accident**

**Rule:** *s. DHS 157.44(4)*

**Criteria:** To maintain exposures as low as possible in the event of an emergency.

**Discussion:** Since it is not possible to specify all possible situations that would constitute an emergency, a general instruction is acceptable as shown in **Figure 13** below. This general instruction should describe licensee actions to maintain the dose at a minimal level after an abnormal event is identified. The instruction should include routine emergency actions such as posting the restricted area, maintaining surveillance of the restricted area, and notifying the RSO.



**Figure 13: Emergency Procedures.** These steps provide guidance in an emergency.

**Response from Applicant:**

<p><b>Item 10.9.11 Minimizing Exposure of Persons In The Event of An Accident</b> (Check box)</p> <p><input type="checkbox"/> We have included instructions for minimizing exposure of persons in the event of an accident in the operating and emergency procedures</p>
--

## Item 10.9.12: Source Retrieval

**Rule:** *s. DHS 157.44(4); s. DHS 157.46*

**Criteria:** Each licensee who intends to perform source retrieval operations must have appropriate equipment, training, and procedures.

**Discussion:** Applicants must develop source retrieval procedures if their own radiographic personnel with appropriate training and experience will conduct source retrievals. If procedures are submitted, DHS will review and approve applicants to perform source retrieval. If source retrieval procedures are not submitted for review, then source retrieval activities must be conducted by a licensee whose is specifically authorized for these activities by DHS, the NRC, or another Agreement State.

**Licensees approved to perform source retrievals will have a specific license condition authorizing these activities. In addition, these individuals are authorized to perform source retrievals for other licensees.**

DHS will review the applicant's procedures for source retrieval with respect to keeping exposures ALARA and controlling exposures to radiation. Since it is not possible to specify all potential exposure situations, a general procedure is acceptable.

A retrieval procedure should contain the following elements:

- Warnings that only specifically authorized individuals, or personnel supervised by such authorized individuals and working in their presence are allowed to perform retrievals;
- A clear statement that no source or suspected source containing items such as a stuck source in a guide tube will be handled directly;
- Expedient methods of reducing unintended exposure to staff and the public, such as using lead shot bags, sandbags, steel plates, remote handling devices, or culverts cut lengthwise;
- Additional dosimetry should be used during source retrievals, for example, pocket dosimeters with a range greater than 2 mSv (200 mrems) or extremity dosimetry;
- Methods of restricting access to the area, including establishing a restricted area and obtaining outside help in controlling access;
- Appropriate use of survey instruments;
- The procedure should prohibit using alarming dosimeters or electronic dosimeters as survey instrument substitutes;

- Criteria for requesting outside assistance;
- Instructions for reducing the exposure to other personnel and members of the public during recovery operations;
- Notification of the RSO/RSO-designee, and management;
- Specific training including practice with special tools, shielding, and additional dosimetry with a dummy source; and
- Notification to DHS.

**Response from Applicant:**

<p><b>Item 10.9.12 Source Retrieval</b> (Check one box)</p> <p><input type="checkbox"/> We will not perform source retrieval and will use the services of a person specifically licensed by DHS, the NRC or another Agreement State to perform the retrievals of our sources.</p> <p style="text-align: center;">OR</p> <p><input type="checkbox"/> We will perform source retrieval. We will include source retrieval procedures in the operating and emergency procedures and submit specific training for DHS review.</p>
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**Note:** Radiography personnel should not attempt to perform operations involving retrieval or recovery unless they have actual training in retrieval operations using a dummy source with the appropriate handling tools, survey instruments, and dosimetry. Source retrieval must be specifically authorized on the license.

**Item 10.9.13: Maintenance of Records**

**Rule:** *s. DHS 157.44(4); s. DHS 157.45*

**Criteria:** The licensee shall meet DHS record requirements.

**Discussion:** Personnel must generate and maintain certain records when performing radiography, including:

- Utilization logs showing the following:
  - Description, including the make, model, and serial number of the device used.
  - Identification and signature of the radiographer.
  - Where the device is used and dates of use; dates device is removed and returned to storage.
- Records of daily inspection of equipment;
- Pocket dosimeter readings. These readings must be made at the beginning and end of a work shift. Instructions to personnel must specify that the readings be recorded; and

- Results of the physical survey to ensure that the sealed source is in the shielded position, when a radiographic exposure device is placed in a storage area (as defined in *s. DHS 157.03*) and if that survey is the last one performed in the workday.

Operations requiring records include inspections and maintenance at intervals not to exceed 3 months, instrument calibration and shipment of packages. Radiography personnel should also be aware of the records that must be maintained at temporary jobsites listed in *s. DHS 157.45(14)(b)*. Radiographers performing radiographic duties should be given specific instructions for recordkeeping. These should not include instructions about records that are the responsibility of management and supervision.

### **Response from the Applicant:**

**Item 10.9.13 Maintenance of Records** (Check box)

We have included procedures which ensure proper maintenance of records in the operating and emergency procedures.

## **Item 10.10: Minimization of Contamination**

**Rule:** *s. DHS 157.13(2)(b)*

**Criteria:** Applicants for new licenses must describe how facility design and procedures for operation will minimize, to the extent practicable, contamination of the facility and the environment, facilitate eventual decommissioning, and minimize, to the extent practicable, the generation of radioactive waste.

**Discussion:** All applicants for new licenses need to consider the importance of designing and operating their facilities to minimize the amount of radioactive contamination generated at the site during its operating lifetime and to minimize the generation of radioactive waste during decontamination. Industrial radiography applicants usually do not need to address these issues as a separate item since they are included in responses to other items of the application.

Sealed sources and devices that are approved by the NRC or an Agreement State and used according to their respective SSD Registration Certificates usually pose little risk of contamination. Leak tests performed as specified in *s. DHS 157.39* should identify defective sources. Leaking sources must be withdrawn from use and decontaminated, repaired, or disposed of according to **Chapter DHS 157 ‘Radiation Protection’**. These steps minimize the spread of contamination and reduce radioactive waste associated with decontamination efforts.

Other efforts to minimize radioactive waste do not apply to programs using only sealed sources and devices that have not leaked.

**Note:** The applicant does not need to provide a response to this item under the following condition. DHS will consider that the above Criteria have been met if the applicant's responses meet the criteria for the following items: 'Sealed Sources and Devices', 'Facilities and Equipment', 'Leak Tests', 'Operating and Emergency Procedures', and 'Waste Management'.

## **Item 11: Waste Management**

**Rule:** *s. DHS 157.13(15) & (18); s. DHS 157.30(1)*

**Criteria:** Licensed materials must be disposed of in accordance with DHS requirements by transfer to an authorized recipient. Appropriate records must be maintained.

**Discussion:** Licensees who dispose of radiography sealed sources, or dispose of radiography devices containing depleted uranium, must transfer them to an authorized recipient. Recipients authorized to accept radioactive material are the original manufacturer of the device, or a commercial firm licensed by DHS, the NRC, or another Agreement State.

Before transferring radioactive material, a licensee must use one of the methods described in *s. DHS 157.13(15)* to verify that the recipient is properly authorized to receive it. In addition, all packages containing radioactive sources must be prepared and shipped in accordance with DHS/DOT requirements. Records of the transfer must be maintained as required by *s. DHS 157.13(18)*.

### **Response from Applicant:**

#### **Item 11 Waste Management** (Check box)

- We will return the radiography sealed source(s) to the manufacturer for disposal or transfer the radiography sealed source(s) to a specific licensee, authorized by DHS, the NRC or another Agreement State to receive radioactive material.

**Note:** Because of the difficulties and costs associated with disposal of sealed sources containing radioactive material and devices containing depleted uranium, applicants should preplan the disposal. Applicants may want to consider contractual arrangements with the sealed source and device supplier as part of a purchase agreement.

## Item 12 License Fees

**Rule:** *s. DHS 157.10*

**Criteria:** On DPH form F-45013 ‘*Application for a Radioactive Material License Authorizing the use of Industrial Radiography*’ (**Appendix A**), enter the fee category and the amount of the fee enclosed with the application.

**Response from Applicant:**

SPECIFIC LICENSE FEE	
Item 12 License Fees (Refer to Wisconsin Administrative Code DHS 157.10)	
Category:	Application Fee Enclosed (For new applications): <input type="checkbox"/> Yes <input type="checkbox"/> No   Amount Enclosed \$ _____

## Item 13: Certification

Individuals acting in a private capacity are required to sign and date DPH form F-45013, ‘*Application for a Radioactive Material License Authorizing the use of Industrial Radiography*’ (**Appendix A**). Otherwise, senior representatives of a corporation or legal entity must sign and date DPH form F-45013, ‘*Application for a Radioactive Material License Authorizing the use of Industrial Radiography*’ (**Appendix A**).

**Representatives signing an application must be authorized to make binding commitments and sign official documents on behalf of the applicant.** As discussed in the section titled ‘Management Responsibility’, signing the application acknowledges management's commitment and responsibilities for the radiation protection program. **DHS will return all unsigned applications for proper signature.**

DHS generally only accepts license correspondence from a senior representative of the applicant or licensee. If the representative would like to delegate authority to another individual (i.e., the Radiation Safety Officer) to submit routine amendment requests on behalf of the licensee or respond to DHS requests for information, the representative should complete and sign the optional box in Item 11, designating one or more individuals for this purpose. **A representative of the licensee’s senior management must sign all license renewal applications.**

**Note:**

- It is a violation of **Chapter DHS 157 ‘Radiation Protection’** to make a willful false statement or representation on applications or correspondence.
- When the application references commitments, those items become part of the licensing conditions and regulatory requirements.

**Response from Applicant:**

<b>CERTIFICATION</b> (To be signed by an individual authorized to make binding commitments on behalf of the applicant.)	
<b>Item 13</b>	
I hereby certify that this application was prepared in conformance with Chapter DHS 157 “Radiation Protection” and that all information contained herein, including any supplements attached hereto, is true and correct to the best of my knowledge and belief.	
<b>SIGNATURE</b> - Applicant Or Authorized Individual	Date signed
Print Name and Title of above signatory	
<b>OPTIONAL: CORRESPONDENCE AUTHORITY</b>	
I have delegated correspondence authority for matters pertaining to our Radioactive Materials License to _____ . The designee named here has approval to submit amendment requests concerning this Radioactive Materials License. I understand that license renewal applications must be signed by a member of upper management.	
<b>SIGNATURE</b> - Applicant Or Authorized Individual	Date signed

## **Appendix A:**

### **DPH form F-45013**

***‘Application for a Radioactive Material License  
Authorizing the use of Industrial Radiography’***

**To access this form please go to:**  
**<http://www.dhs.wisconsin.gov/forms/F4/F45013.pdf>**

**Appendix B:**

**DPH Form F-45007**

***‘Certificate of Disposition of Material’***

**To access this form please go to:**  
**<http://www.dhs.wisconsin.gov/forms/F4/F45007.pdf>**

**Appendix C:**  
**Sample Correspondence Delegation Letter**

## SAMPLE CORRESPONDENCE DELEGATION LETTER

[*date*]

Department of Health Services  
Radiation Protection Section  
P.O. Box 2659  
Madison, WI 53701-2659

To Radioactive Material Program Supervisor:

As [*job title*] of [*name of licensee*], I have delegated authority for all matters pertaining to our Radioactive Material License to [*name of designee*]. [*Name of designee*] has management approval to sign and submit amendment requests to the Department of Health Services on behalf of [*name of licensee*]. I understand that license renewals must still be signed by a representative of upper management.

[This document must be signed by a management representative who has independent authority to reassign job duties and/or provide finances, if necessary, to support an effective radiation safety program.]

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

**Appendix D:**  
**Increased Controls Requirements**

The U.S. Nuclear Regulatory Commission (NRC) and all Agreement States have determined that certain increased controls are required to be implemented to supplement existing regulatory requirements in 10 CFR 20.1801-1802 (similar to *s. DHS 157.28(1)*). The additional controls are a matter of compatibility with NRC and must be implemented in a time frame desired by the NRC Commissioners and consistent with that being used by NRC for its licensees.

The radioactive material you are requesting to be authorized to possess is in one of the affected categories. Therefore, in accordance with Wisconsin State Statute ss. 254.31-45 and Chapter DHS 157 'Radiation Protection', **your license requires you to comply with the Fingerprinting and Criminal History Records Check Requirements for Unescorted Access to Certain Radioactive Material detailed in Attachment 1.**

This fingerprinting requirement does not obviate the need for you to meet the requirements of the increased controls, and to maintain the effectiveness of security measures taken in response to the events of September 11, 2001. In addition, the enclosed amendment modifies sections 1.b., 1.c., and “Table 1: Radionuclides of Concern” of the increased controls to reflect recent NRC policies and regulations.

The Licensee shall complete implementation of the program by the first day that radionuclides in quantities of concern are possessed at or above the limits specified in “Table 1: Radionuclides of Concern.” Licensees must submit fingerprints and complete their review of the FBI criminal history records for all individuals authorized unescorted access under the IC amendment.

Licensees are required to submit fingerprints directly to the NRC in accordance with this amendment. The current processing fee is \$36.00 per submission and payment must be made electronically to the NRC through <http://www.pay.gov>. Details regarding fingerprint submittals and payment of fees are found in the enclosed Procedures for Processing Fingerprinting Checks. Also enclosed is the Guidance for evaluating FBI Identification and Criminal History Records

Checks for Allowing Unescorted Access to Certain Radioactive Material to aid Licensees in their review of criminal history records.

You are required to do the following: Within **twenty-five (25) days** after you have achieved full compliance with the requirements described in Attachment 3 you shall notify the department. In addition, you are required to provide, under oath or affirmation, a certification that the Trustworthiness and Reliability (T&R) Official (an individual with the responsibility to determine the trustworthiness and reliability of another individual requiring unescorted access to radioactive materials quantities of concern) is deemed trustworthy and reliable by the Licensee.

Submit response to the above (not fingerprint cards) to the Wisconsin Department of Health Services, Radioactive Materials Program, 1 West Wilson Street, P.O. Box 2659, Madison, WI 53701-2659. In addition, your response shall be marked as "Withhold From Public Disclosure Under s. 19.36 (1), WI Stats."

Licensee fingerprint cards are required to be submitted directly to the Nuclear Regulatory Commission in accordance with Attachment 3. Licensee fingerprint cards are required to be submitted to the Director, Division of Facilities and Security, and should be addressed to the attention of the Criminal History Program, Mail Stop T6E46. The following mailing address should be used:

Director, Division of Facilities and Security  
U.S. NRC  
Two White Flint North  
11545 Rockville Pike  
Rockville, MD 20852-2738  
ATTN: Criminal History Program, Mail Stop T-6E46

In addition, Licensee responses shall be marked as "Security-Related Information - Withhold Under 10 CFR 2.390."

If you have any questions or wish to discuss implementation of the requirements, please contact Radioactive Materials Program at (608) 267-4797.

#### Attachments

1. Fingerprinting and Criminal History Records Check Requirements for Unescorted Access to Certain Radioactive Material
2. Radionuclides of Concern
3. Specific Requirements Pertaining to Fingerprinting and Criminal History Records Checks

#### Enclosures:

1. Procedures for Processing Fingerprinting Checks
2. Guidance for evaluating FBI Identification and Criminal History Records Checks for Allowing Unescorted Access to Certain Radioactive Material

## **ATTACHMENT 1**

### **FINGERPRINTING AND CRIMINAL HISTORY RECORDS CHECK REQUIREMENTS FOR UNESCORTED ACCESS TO CERTAIN RADIOACTIVE MATERIAL**

- A. 1. The Licensee shall establish and maintain a fingerprinting program that meets the requirements of Attachment 3 of this letter for individuals that require unescorted access to certain radioactive materials.
2. The Licensee shall provide under oath or affirmation, a certification that the Trustworthiness and Reliability (T&R) Official (an individual with the responsibility to determine the trustworthiness and reliability of another individual requiring unescorted access to the radioactive materials identified in Attachment 2) is deemed trustworthy and reliable by the Licensee as required in paragraph B.2.
3. Licensees shall notify the department (608-267-4797) and the NRC's Headquarters Operations Office at 301-816-5100 within 24 hours if the results from a FBI identification and criminal history records check indicate that an individual is identified on the FBI's Terrorist Screening Data Base.
- B. 1. The Licensee shall grant access to radioactive material in Attachment 2 in accordance with the requirements of IC.1. of the INCREASED CONTROLS FOR LICENSEES THAT POSSESS SOURCES CONTAINING RADIOACTIVE MATERIALS QUANTITIES OF CONCERN and the requirements in this Attachment.
2. The T&R Official, if he/she does not require unescorted access, must be deemed trustworthy and reliable by the Licensee in accordance with the requirements of IC.1. of the INCREASED CONTROLS FOR LICENSEES THAT POSSESS SOURCES CONTAINING RADIOACTIVE MATERIALS QUANTITIES OF CONCERN before

making a determination regarding the trustworthiness and reliability of another individual. If the T&R Official requires unescorted access, the Licensee must consider the results of fingerprinting and the review of an FBI identification and criminal history records check as a component in approving a T&R Official.

- C. Prior to requesting fingerprints from any individual, the Licensee shall provide a copy of this document to that person.
- D. Upon receipt of the results of FBI identification and criminal history records checks, the Licensee shall control such information as specified in the “Protection of Information” section of Attachment 3 and in requirement IC.5 of the INCREASED CONTROLS FOR LICENSEES THAT POSSESS SOURCES CONTAINING RADIOACTIVE MATERIALS QUANTITIES OF CONCERN.
- E. No individual may have unescorted access to radioactive materials without a determination by the T&R Official (based upon fingerprinting, an FBI identification and criminal history records check and a previous trustworthiness and reliability determination) that the individual may have unescorted access to such materials.
- F. 1. The Licensee shall comply with; and to the extent the recipient is also the recipient of the INCREASED CONTROLS FOR LICENSEES THAT POSSESS SOURCES CONTAINING RADIOACTIVE MATERIALS QUANTITIES OF CONCERN, paragraph IC 1.b is superseded by the following:
  - “For individuals employed by the licensee for three years or less, and for non-licensee personnel, such as physicians, physicists, house-keeping personnel, and security personnel under contract, trustworthiness and reliability shall be determined, at a minimum, by verifying employment history, education, personal references, and fingerprinting and the review of an FBI identification and criminal history records check. The licensee shall also, to the extent possible, obtain independent information to corroborate that provided by the employee (i.e. seeking references not supplied by the individual). For individuals employed by the licensee for longer than three years,*

*trustworthiness and reliability shall be determined, at a minimum, by a review of the employee's employment history with the licensee and fingerprinting and an FBI identification and criminal history records check."*

2. The Licensee shall comply with; and to the extent the recipient is also the recipient of the INCREASED CONTROLS FOR LICENSEES THAT POSSESS SOURCES CONTAINING RADIOACTIVE MATERIALS QUANTITIES OF CONCERN, Paragraph IC 1.c is superseded by, the following:

*"Service provider licensee employees shall be escorted unless determined to be trustworthy and reliable by an NRC-required background investigation. Written verification attesting to or certifying the person's trustworthiness and reliability shall be obtained from the licensee providing the service."*

3. For Licensees who have previously received the INCREASED CONTROLS FOR LICENSEES THAT POSSESS SOURCES CONTAINING RADIOACTIVE MATERIALS QUANTITIES OF CONCERN, "Table 1: Radionuclides of Concern" is superseded by Attachment 2 to include Ra-226. The previous INCREASED CONTROLS FOR LICENSEES THAT POSSESS SOURCES CONTAINING RADIOACTIVE MATERIALS QUANTITIES OF CONCERN will, therefore, also apply to Ra-226 as noted in Attachment 2.

## ATTACHMENT 2

**Table 1: Radionuclide Quantity of Concern**

Radionuclide	Quantity of Concern <sup>1</sup> (TBq)	Quantity of Concern <sup>2</sup> (Ci )
Am-241	0.6	16
Am-241/Be	0.6	16
Cf-252	0.2	5.4
Cm-244	0.5	14
Co-60	0.3	8.1
Cs-137	1	27
Gd-153	10	270
Ir-192	0.8	22
Pm-147	400	11,000
Pu-238	0.6	16
Pu-239/Be	0.6	16
Ra-226 <sup>5</sup>	0.4	11
Se-75	2	54
Sr-90 (Y-90)	10	270
Tm-170	200	5,400
Yb-169	3	81
Combinations of radioactive materials listed above <sup>3</sup>	See Footnote Below <sup>4</sup>	

<sup>1</sup> The aggregate activity of multiple, collocated sources of the same radionuclide should be included when the total activity equals or exceeds the quantity of concern.

<sup>2</sup> The primary values used for compliance are Tera Becquerel (TBq). The curie (Ci) values are rounded to two significant figures for informational purposes only.

<sup>3</sup> Radioactive materials are to be considered aggregated or collocated if breaching a common physical security barrier (e.g., a locked door at the entrance to a storage room) would allow access to the radioactive material or devices containing the radioactive material.

<sup>4</sup> If several radionuclides are aggregated, the sum of the ratios of the activity of each source, *i* of

radionuclide,  $n$ ,  $A_{(i,n)}$ , to the quantity of concern for radionuclide  $n$ ,  $Q_{(n)}$ , listed for that radionuclide equals or exceeds one.  $[(\text{aggregated source activity for radionuclide A}) \div (\text{quantity of concern for radionuclide A})] + [(\text{aggregated source activity for radionuclide B}) \div (\text{quantity of concern for radionuclide B})] + \text{etc.....} \geq 1$

<sup>5</sup> On August 31, 2005, the NRC issued a waiver, in accordance to Section 651(e) of the Energy Policy Act of 2005, for the continued use and/or regulatory authority of Naturally Occurring and Accelerator-Produced Material (NARM), which includes Ra-226. The NRC plans to terminate the waiver in phases, beginning November 30, 2007, and ending on August 7, 2009. The NRC has authority to regulate discrete sources of Ra-226, but has refrained from exercising that authority until the date of an entity's waiver termination. For entities that possess Ra-226 in quantities of concern, this Order becomes effective upon waiver termination. For information on the schedule for an entity's waiver termination, please refer to the NARM Toolbox website at [www.nrc.gov](http://www.nrc.gov).

## ATTACHMENT 3

### Specific Requirements Pertaining to Fingerprinting and Criminal History Records Checks

The new fingerprinting requirements supplement previous requirements issued by the INCREASED CONTROLS FOR LICENSEES THAT POSSESS SOURCES CONTAINING RADIOACTIVE MATERIALS QUANTITIES OF CONCERN.

Licensees currently have a program to grant unescorted access to individuals. As required by condition A.1, Licensees shall modify its current trustworthiness and reliability program to include the following:

1. Each Licensee subject to the provisions of this attachment shall fingerprint each individual who is seeking or permitted unescorted access to risk significant radioactive materials equal to or greater than the quantities listed in attachment 2. The Licensee shall review and use the information received from the Federal Bureau of Investigation (FBI) identification and criminal history records check and ensure that the provisions contained in Attachment 1 and this attachment are satisfied.
2. The Licensee shall notify each affected individual that the fingerprints will be used to secure a review of his/her criminal history record and inform the individual of the procedures for revising the record or including an explanation in the record, as specified in the "Right to Correct and Complete Information" section of this attachment.
3. Fingerprints for unescorted access need not be taken if an employed individual (e.g., a Licensee employee, contractor, manufacturer, or supplier) is relieved from the fingerprinting requirement by 10 CFR 73.61, or any person who has been favorably-decided by a U.S. Government program involving fingerprinting and an FBI identification and criminal history records check (e.g. National Agency Check, Transportation Worker Identification Credentials in accordance with 49 CFR Part 1572, Bureau of Alcohol Tobacco Firearms and Explosives background checks and clearances in accordance with 27 CFR Part 555, Health and Human Services security risk assessments for possession and use of select agents and toxins in accordance with 42 CFR Part 73, Hazardous Material security threat assessment for hazardous material endorsement to commercial drivers license in accordance with 49 CFR Part 1572, Customs and Border Patrol's Free and Secure Trade Program <sup>1</sup>) within the last five (5) calendar years, or

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<sup>1</sup> The FAST program is a cooperative effort between the Bureau of Customs and Border Patrol and the governments of Canada and Mexico to coordinate processes for the clearance of commercial shipments at the U.S. - Canada and U.S. - Mexico borders. Participants in the FAST program, which requires successful completion of a background records check, may receive expedited entrance privileges at the northern and southern borders.

any person who has an active federal security clearance (provided in the latter two cases that they make available the appropriate documentation <sup>2</sup>). Written confirmation from the Agency/employer which granted the federal security clearance or reviewed the FBI criminal history records results based upon a fingerprint identification check must be provided. The Licensee must retain this documentation for a period of three (3) years from the date the individual no longer requires unescorted access to certain radioactive material associated with the Licensee's activities.

4. All fingerprints obtained by the Licensee must be submitted to the Commission for transmission to the FBI. Additionally, the Licensee shall submit a certification of the trustworthiness and reliability of the T&R Official as determined in accordance with paragraph B.2.
5. The Licensee shall review the information received from the FBI and consider it, in conjunction with the trustworthiness and reliability requirements of the INCREASED CONTROLS FOR LICENSEES THAT POSSESS SOURCES CONTAINING RADIOACTIVE MATERIALS QUANTITIES OF CONCERN, in making a determination whether to grant unescorted access to certain radioactive materials.
6. The Licensee shall use any information obtained as part of a criminal history records check solely for the purpose of determining an individual's suitability for unescorted access to risk significant radioactive materials equal to or greater than the quantities listed in attachment 2.
7. The Licensee shall document the basis for its determination whether to grant, or continue to allow unescorted access to risk significant radioactive materials equal to or greater than the quantities listed in attachment 2.

## **Prohibitions**

A Licensee shall not base a final determination to deny an individual unescorted access to certain radioactive material solely on the basis of information received from the FBI involving: an arrest more than one (1) year old for which there is no information of the disposition of the case, or an arrest that resulted in dismissal of the charge or an acquittal.

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<sup>2</sup>This documentation must allow the T&R Official to verify that the individual has fulfilled the unescorted access requirements of Section 149 of the AEA by submitting to fingerprinting and an FBI identification and criminal history records check.

A Licensee shall not use information received from a criminal history check obtained in a manner that would infringe upon the rights of any individual under the First Amendment to the Constitution of the United States, nor shall the Licensee use the information in any way which would discriminate among individuals on the basis of race, religion, national origin, sex, or age.

### **Right to Correct and Complete Information**

Prior to any final adverse determination, the Licensee shall make available to the individual the contents of any criminal records obtained from the FBI for the purpose of assuring correct and complete information. Written confirmation by the individual of receipt of this notification must be maintained by the Licensee for a period of one (1) year from the date of the notification.

If, after reviewing the record, an individual believes that it is incorrect or incomplete in any respect and wishes to change, correct, or update the alleged deficiency, or to explain any matter in the record, the individual may initiate challenge procedures. These procedures include either direct application by the individual challenging the record to the agency (i.e., law enforcement agency) that contributed the questioned information, or direct challenge as to the accuracy or completeness of any entry on the criminal history record to the Assistant Director, Federal Bureau of Investigation Identification Division, Washington, DC 20537-9700 (as set forth in 28 CFR Part 16.30 through 16.34). In the latter case, the FBI forwards the challenge to the agency that submitted the data and requests that agency to verify or correct the challenged entry. Upon receipt of an Official communication directly from the agency that contributed the original information, the FBI Identification Division makes any changes necessary in accordance with the information supplied by that agency. The Licensee must provide at least ten (10) days for an individual to initiate an action challenging the results of an FBI identification and criminal history records check after the record is made available for his/her review. The Licensee may make a final unescorted access to certain radioactive material determination based upon the criminal history record only upon receipt of the FBI's ultimate confirmation or correction of the record. Upon a final adverse determination on unescorted access to certain radioactive material, the Licensee shall provide the individual its documented basis for denial. Unescorted access to certain radioactive material shall not be granted to an individual during the review process.

### **Protection of Information**

1. Each Licensee who obtains a criminal history record on an individual shall establish and maintain a system of files and procedures for protecting the record and the personal information from unauthorized disclosure.

2. The Licensee may not disclose the record or personal information collected and maintained to persons other than the subject individual, his/her representative, or to those who have a need to access the information in performing assigned duties in the process of determining unescorted access to certain radioactive material. No individual authorized to have access to the information may re-disseminate the information to any other individual who does not have a need-to-know.
3. The personal information obtained on an individual from a criminal history record check may be transferred to another Licensee if the Licensee holding the criminal history record check receives the individual's written request to re-disseminate the information contained in his/her file, and the gaining Licensee verifies information such as the individual's name, date of birth, social security number, sex, and other applicable physical characteristics for identification purposes.
4. The Licensee shall make criminal history records, obtained under this section, available for examination by an authorized representative of the department to determine compliance with the regulations and laws.
5. The Licensee shall retain all fingerprint and criminal history records from the FBI, or a copy if the individual's file has been transferred, for three (3) years after termination of employment or determination of unescorted access to certain radioactive material (whether unescorted access was approved or denied). After the required three (3) year period, these documents shall be destroyed by a method that will prevent reconstruction of the information in whole or in part.

For implementing guidance for increased controls requirements with questions and answers go to:

<http://www.nrc.gov/security/byproduct/orders.html> - [increasedcontrols](#)

## **Appendix E:**

# **Information Needed for Transfer of Control**

## Definitions

**Control:** Control of a license is in the hands of the person or persons who are empowered to decide when and how that license will be used. That control is to be found in the person or persons who, because of ownership or authority explicitly delegated by the owners, possess the power to determine corporate policy and thus the direction of the activities under the license.

**Transferee:** A transferee is an entity that proposes to purchase or otherwise gain control of a DHS-licensed operation.

**Transferor:** A transferor is a DHS licensee selling or otherwise giving up control of a licensed operation.

## Discussion

Licensees must provide full information and obtain DHS's *prior written consent* before transferring control of the license. Provide the following information concerning changes of control by the applicant (transferor and/or transferee, as appropriate). State if any items are not applicable.

1. Provide a complete description of the transaction (transfer of stocks or assets, or merger). Indicate whether the name has changed and include the new name. Include the name and telephone number of a licensee contact whom DHS may contact if more information is needed.
2. Describe any changes in personnel or duties that relate to the licensed program. Include training and experience for new personnel.
3. Describe any changes in the organization, location, facilities, equipment or procedures that relate to the licensed program.
4. Describe the status of the surveillance program (surveys, wipe tests, quality control) at the present time and the expected status at the time that control is to be transferred.
5. Confirm that all records concerning the safe and effective decommissioning of the facility will be transferred to the transferee or to DHS, as appropriate. These records include documentation of surveys of ambient radiation levels and fixed and/or removable contamination, including methods and sensitivity.
6. Confirm that the transferee will abide by all constraints, conditions, requirements and commitments of the transferor or that the transferee will submit a complete description of the proposed licensed program.

Licensees should refer to NRC Information Notice 89-25, Revision 1, "Unauthorized Transfer of Ownership or Control of Licensed Activities," available on the NRC's webpage at <http://www.nrc.gov>.

## **Appendix F:**

**NRC Regulatory Issue Summary 2005-10**  
***‘Performance-Based Approach for Associated  
Equipment in 10 CFR 34.20’***

## **ADDRESSEES**

All industrial radiography licensees and manufacturers and distributors of industrial radiography equipment.

## **INTENT**

The U.S. Nuclear Regulatory Commission (NRC) is issuing this regulatory issue summary (RIS) to explain the performance-based approach NRC has decided to take regarding the requirements in 10 CFR 34.20, "Performance requirements for industrial radiography equipment", which addresses the regulation of associated equipment used in an industrial radiography system. This RIS supersedes and replaces Information Notice 96-20, "Demonstration of Associated Equipment Compliance with 10 CFR 34.20". No specific action or written response is required.

## **BACKGROUND**

In the *Federal Register* notice (68 FR 41757, July 15, 2003), NRC announced its denial of the petitioner's request for rulemaking to remove from 10 CFR 34.20 the term "associated equipment." The notice also explained that NRC's practice of registering associated equipment under 10 CFR 32.210, "Registration of product information," which was previously described in Information Notice 96-20, had been discontinued. This RIS supersedes and replaces Information Notice 96-20.

## **SUMMARY OF ISSUE**

To maintain safety, each licensee must take special care to ensure that all associated equipment (including modified or customized associated equipment) meets the minimum performance criteria required in 10 CFR 34.20. A licensee that modifies associated equipment is required to demonstrate by actual testing or an alternative analysis that the performance of the radiographic system and individual items of associated equipment meet the criteria in 10 CFR 34.20. The results of actual testing or analysis must demonstrate that the replacement component will not compromise the design safety features of the industrial radiography system. Compliance with the performance criteria prevents a licensee from using substandard associated equipment.

## **PERFORMANCE REQUIREMENTS FOR ASSOCIATED EQUIPMENT**

The performance requirements for associated equipment are set forth in the paragraphs of 10 CFR 34.20, described below:

- paragraph (a)(1), incorporates by reference the American National Standards Institute (ANSI) N432–1980, “Radiological Safety for the Design and Construction of Apparatus for Gamma Radiography,” (ANSI N432) which specifies the design and method of qualifying (testing) industrial radiography equipment, including equipment that NRC has defined as “associated equipment;”
- paragraph (a)(2), provides for an engineering analysis as an alternative to actual testing, to demonstrate the performance of individual radiography equipment components;
- paragraph (b)(3), allows associated equipment to be modified unless the replacement component would compromise the design safety features of the industrial radiography system;
- paragraph (c)(5) and (8), respectively address crushing and kinking tests for a guide tube and the standard test for tensile strength of an exposure head;
- paragraph (e), allows a licensee or vendor to apply a realistic torque to the drive mechanism during the life cycle test.

The regulations require a licensee to use industrial radiography equipment that has been manufactured and tested to meet radiation safety performance criteria under 10 CFR 34.20. The life cycle test in ANSI N432 is an evaluation of the endurance of a source or device. To test the life cycle of an industrial radiography source or exposure device, all components of the industrial radiography system (including the associated equipment) must be assembled and operated for the duration of the test. This requirement, NRC determined, is sufficient to maintain safety and a separate regulatory approval for associated equipment is not needed as long as the associated equipment meets the minimum criteria in 10 CFR 34.20.

Attachment 1 to this RIS contains additional information about definitions and applicable requirements, certificates of registration for a sealed source or device, custom-built items of associated equipment, acceptable methods to demonstrate compliance, inspection and licensing guidance, and inspection and maintenance

procedures. Attachment 2 indicates the availability of reference documents that are cited in this RIS and Attachment 1.

### **ENFORCEMENT POLICY**

The NRC Enforcement Policy, Supplement VI, provides examples of violations in each of the four severity levels as guidance in determining the appropriate severity level for violations in the area of fuel cycle and materials operations, including industrial radiographic operations. An example of an activity that would normally result in the NRC issuing a Severity Level III Notice of Violation is possession or use of unauthorized equipment or materials in the conduct of licensee activities that degrades safety. Based on this example, enforcement action would be considered for a licensee that used associated equipment that had not been tested or analyzed to meet the performance requirements or that used modified associated equipment that compromised the design safety features of an industrial radiography system and threatened or did not protect the health and safety of workers or members of the public.

### **AGREEMENT STATE COMPATIBILITY**

NRC has determined that the information provided in this RIS does not change the level of compatibility of the Agreement State regulations to the existing NRC requirements. Use of the information in this RIS continues to provide Agreement States with the flexibility to revise their policy and guidance to meet unique situations and local conditions and to ensure an orderly, uniform implementation of the performance-based approach for associated equipment.

### **FEDERAL REGISTER NOTIFICATION**

A notice of opportunity for public comment on this RIS was not published in the *Federal Register* because it is informational, and does not represent a departure from current regulatory requirements.

## **SMALL BUSINESS REGULATORY ENFORCEMENT FAIRNESS ACT**

NRC has determined that this action is not subject to the Small Business Regulatory Enforcement Fairness Act of 1996.

## **PAPERWORK REDUCTION ACT STATEMENT**

This RIS requires no specific action or written response. If you have any questions about this summary, please contact one of the individuals listed below or the appropriate regional office.

**/RA/ Thomas Essig for**

Patricia K. Holahan, Acting Director  
Division of Industrial and  
Medical Nuclear Safety  
Office of Nuclear Material Safety  
and Safeguards

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Note: NRC generic communications may be found on the NRC public Web site, <http://www.nrc.gov>, under Electronic Reading Room/Document Collections.

Attachments: 1. Additional Information and Applicable Requirements Regarding Associated Equipment  
2. Availability of Reference Documents  
3. List of Recently Issued NMSS Generic Communications

Attachment 1

## **ADDITIONAL INFORMATION AND APPLICABLE REQUIREMENTS REGARDING ASSOCIATED EQUIPMENT**

## Definitions

10 CFR 34.3, "Definitions," defines associated equipment as equipment that is used in conjunction with a radiographic exposure device to make radiographic exposures that drives, guides, or comes in contact with the source [e.g., guide tube, control tube, control (drive) cable, removable source stop, "J" tube, and collimator when it is used as an exposure head]. 10 CFR 34.3 defines the following items of associated equipment: collimator, control (drive) cable, control (drive) mechanism, control tube, exposure head (source stop), and guide tube. 10 CFR 34.3 defines the following radiographic equipment and related terms: radiographic exposure device, s-tube, sealed source, source assembly, source changer, and storage container.

Licensees should be aware of the specific meaning of the terms indicated above. The requirements applicable to items of equipment depend on how the equipment is defined in 10 CFR 34.3. It is important to distinguish between items of equipment that are considered to be associated equipment and items of equipment that are not. In some cases, there may be no regulatory requirements that apply to an item of equipment; in other cases, an item of equipment may be a component of a source or device that is required to be specifically authorized for use. Following are two examples that illustrate important distinctions which determine regulatory requirements for an item of equipment.

The first example distinguishes certain types of collimators that are not associated equipment and are not required to meet the performance criteria in ANSI N432. Various types of collimators are used as radiation safety devices for industrial radiographic operations. In many cases, the exposure head at the end of the guide tube is inserted into a collimator. This type of collimator is not an item of associated equipment because the source does not come in contact with the collimator. This type of collimator is not subject to the performance requirements in 10 CFR 34.20 or the evaluation process in 10 CFR 32.210. However, if a collimator does come in contact with the source because it also acts as a source stop (exposure head), then it falls within the scope of the definition of associated equipment that is subject to the performance requirements in 10 CFR 34.20.

The second example distinguishes the connector that is located between the sealed source and the control (drive) cable. 10 CFR 34.3 defines the source assembly to include the connector, stating, “Source assembly means an assembly that consists of the sealed source and a connector that attaches the source to the control cable.” The connector is a component of the source assembly and is, therefore, not an item of associated equipment. The source assembly is subject to the requirements in 10 CFR 30.32, “Application for a specific license”. 10 CFR 30.32(g) indicates that an application for a specific license to use byproduct material in the form of a sealed source or in a device that contains a sealed source must either identify the sealed source or the device as registered under 10 CFR 32.210 or with an Agreement State or must include the information identified in 10 CFR 32.210(c). The manufacturing processes used to attach the connector to the source cable and to the control (drive) cable are also subject to evaluation by NRC or an Agreement State under these requirements.

Portable industrial radiographic systems typically include a two-piece connector (swivel coupling design) to attach the source assembly to the control (drive) cable in order to operate the system. The performance-based requirement in 10 CFR 34.20(c)(1) indicates that the coupling must be designed such that it cannot be unintentionally disconnected under normal and reasonably foreseeable abnormal conditions. The Statements of Consideration at 55 FR 843 (January 10, 1990) include a response to comments received for 10 CFR 34.20(c)(1). The response indicates, “NRC’s source and device registration process will ensure compliance with this performance requirement by requiring NRC approval before the newly designed connectors could be used.” The sealed source or device evaluation process ensures compliance with the performance criteria in the rule. Both pieces of the two-piece connector are subject to evaluation under 10 CFR 30.32(g) or 32.210(c).

### **Sealed Source and Device (SS&D) Certificate of Registration**

NRC determined that the previous practice of registering associated equipment under 10 CFR 32.210 was not only not required, but was a regulatory practice that imposed an unnecessary burden on licensees and for NRC and the Agreement States which are authorized to evaluate SS&Ds. Therefore, this practice has been discontinued. NRC does not intend to independently revise current SS&D certificates of

registration only to remove references to associated equipment. If it becomes necessary to amend a current SS&D certificate of registration, the applicant may remove or update the information about associated equipment in the application.

As a matter of convenience, an SS&D applicant under 10 CFR 32.210 may describe the associated equipment that was used in the life cycle test for the radiographic source or device that is being registered; however, there is no requirement to do so. If an applicant wants the associated equipment to be included on the certificate of registration, the application which describes associated equipment must include sufficient information to demonstrate that the performance criteria were met for associated equipment under 10 CFR 34.20. If a certificate of registration does not identify the associated equipment that was used in the system along with the source or device, then each end-user (licensee) must demonstrate that the items of associated equipment which the licensee uses in the system meet the performance criteria under 10 CFR 34.20 and do not compromise the design safety features of the system.

NUREG-1556, Volume 3, Revision 1, “Consolidated Guidance About Materials Licenses–Applications for Sealed Source and Device Evaluation and Registration,” (Final Report, April 2004), Section 4.6, “Radiography Equipment,” indicates that there is no requirement to identify associated equipment for an SS&D certificate of registration. Note–In Section 15, “Glossary”, the definition of "associated equipment" was intended to be removed and should be disregarded because it has been superseded by Section 4.6.

### **Custom-Built or Unique Items of Associated Equipment**

Associated equipment specifically designed and constructed to the order of a single licensee must comply with the performance criteria in 10 CFR 34.20. There is no requirement to register custom-built or unique items of associated equipment. However, when modified or custom-built associated equipment introduces components or fabrication methods that differ from those that were used in the endurance test for a source assembly or exposure device that was previously registered, the licensee must demonstrate compliance with the requirements in 10 CFR 34.20 before the equipment can be used for industrial radiographic operations. For

example, licensees must obtain information demonstrating that modified guide tubes and exposure heads will withstand tests that demonstrate the equipment will maintain its integrity in normal use and likely accident conditions.

### **Acceptable Methods to Demonstrate that Associated Equipment Complies with 10 CFR 34.20**

The performance-based approach that NRC has decided to take for associated equipment recognizes that a licensee has latitude to use modified components, unless the design of any replacement component would compromise the design safety features of the system. Further guidance about testing or an alternative analysis to testing is described in NUREG-1556, Volume 3, Revision 1, Section 10.5, “Prototype Testing”. The NUREG addresses appropriate methods a licensee may use to demonstrate the ability of a modified industrial radiography system to maintain its integrity when subjected to conditions of normal use and likely accident conditions.

For example, information about an equivalent system that was previously registered may be used to demonstrate safety and integrity of the modified system, if the design of the modified system and its intended normal and likely accident conditions of use are identical or similar to the previously registered system. In some cases, an engineering analysis or operational history with supporting documentation may be sufficient for a licensee to justify the use of a modified system without repeating, e.g., an endurance test. However, when an appropriate comparison to the previously registered system is not possible because a licensee is unable to obtain appropriate information about previous prototype testing, engineering analysis, or operational history for the previously registered system or item of associated equipment, then the licensee must complete actual testing of the modified system and the individual items of associated equipment to demonstrate compliance with 10 CFR 34.20.

NRC contracted a testing laboratory to complete actual testing of three industrial radiography systems from three manufacturers. The contractor developed procedures to test the systems and individual items of associated equipment to meet the performance criteria in 10 CFR 34.20. In a similar manner, a licensee could contract a

testing laboratory or manufacturer of industrial radiography equipment to test or analyze a modified system or component that will be used in a system that was previously licensed or registered.

If a licensee needs to modify associated equipment, the licensee should adopt and implement a suitable engineering procedure or plan to ensure that a modified component will not compromise the design safety features of the industrial radiographic system. Implementation of such a procedure or plan should demonstrate that modifications to the equipment: (1) will not create material incompatibility that may degrade a sealed source or device over the expected useful life time; (2) will not diminish the performance of the system in expected use environments and in likely accident conditions over the expected life time of the various system components; (3) will not allow a source to inadvertently exit the system; and (4) will not initiate or propagate equipment failures resulting in a “source disconnect.” An endurance test for a modified system should indicate that the modified component does not interfere with the performance of the components of the system that were previously registered.

Examples of the performance-based approach that NRC has decided to use for 10 CFR 34.20 are included in the following paragraphs to illustrate situations when a licensee must complete testing or analysis of associated equipment to demonstrate that the associated equipment meets the performance criteria in 10 CFR 34.20 and does not compromise the design safety features of the system.

It is acceptable for a licensee to assume that no further testing is needed for associated equipment which is listed along with the source or device as an entire system on the certificate of registration because the associated equipment has already been verified to meet the performance criteria in 10 CFR 34.20 when the associated equipment is used with the source or device. However, a licensee that substitutes associated equipment into an industrial radiography system that was registered as an entire system which specified the associated equipment must demonstrate that the reconfigured system meets the performance criteria under 10 CFR 34.20.

It is acceptable for a licensee to assume that associated equipment that is used as the manufacturer intended as described in the SS&D certificate of registration meets the performance criteria under 10 CFR 34.20. The SS&D certificate of registration indicates the principal use, normal conditions of use, and the limitations on use for the source or device. However, a licensee that uses associated equipment in a manner that was not intended by the manufacturer as described in the SS&D certificate of registration for the source or device must describe the conditions of use for the equipment and obtain information about performance of the equipment under these conditions of use to demonstrate compliance with 10 CFR 34.20. Conditions of use include, for example, extremely hot or cold operating temperature, excessive vibration or shock, high concentrations of corrosive materials, and underwater usage.

### **Inspection and Licensing Guidance**

NRC is revising inspection and licensing guidance to incorporate the explanation provided by this RIS.

Inspection Procedure 87121, "Industrial Radiography Programs," directs an inspector to follow a performance-based approach to examine available associated equipment, observe work in progress that involves use of associated equipment, and interview workers about the inspection and maintenance procedures and the worker's awareness that associated equipment must comply with the performance criteria in 10 CFR 34.20.

If the associated equipment appears to be modified or defective, the inspector should verify whether or not the licensee had developed and implemented a testing program to demonstrate that modified components meet the performance criteria in 10 CFR 34.20. The inspector should alert the inspection supervisor who may extend the inspection and request an SS&D reviewer to evaluate the licensee's modification of the equipment. The expectation is that the design safety features of the industrial radiography system were not compromised by a replacement component of associated equipment that was modified by the licensee. Before using the modified system, the licensee is required to demonstrate that the replacement component meets the performance criteria in 10 CFR 34.20.

NUREG-1556, Volume 2, “Consolidated Guidance about Materials Licensees–Program-Specific Guidance about Industrial Radiography Licenses” (Final Report, August 1998) is being amended to remove statements that indicate associated equipment must be specifically approved or registered by NRC or an Agreement State. Instead, the guidance will state that vendors or distributors of industrial radiography equipment may voluntarily include the items of associated equipment that were used in the system with their SS&Ds that are registered under 10 CFR 32.210. To include associated equipment in the certificate of registration, the vendor’s application must include information that demonstrates the associated equipment meets the minimum criteria in 10 CFR 34.20. Also, copies of this RIS will be inserted into Appendix F to replace Information Notice 96-20.

### **Inspection and Maintenance Procedures**

NRC completed a generic assessment and special team inspection which was published in NUREG-1631, “Source Disconnects Resulting from Radiography Drive Cable Failures” (June 1998). The inspection team observed that, in general, radiography exposure devices appeared to be in good working order, showing no evidence of damage, abuse, or lack of maintenance. By contrast, the associated equipment (i.e., control mechanisms, including drive cables) often appeared to be damaged, in disrepair, and lacking maintenance.

NUREG-1631 emphasized the importance of a licensee's understanding and commitment to the operating and use conditions specified by a vendor (manufacturer or distributor) of an industrial radiography system which, if exceeded, could compromise the safety and reliability of the system. This is particularly true of items of associated equipment, including drive cables. A licensee should be vigilant to inspect and maintain associated equipment in order to avoid component failures that could result in unnecessary radiation exposures to workers and members of the public.

A licensee’s equipment inspection and maintenance program should prevent particular equipment problems that may develop from excessive uses where harsh or abusive conditions exist that may cause a component to fail.

10 CFR 34.31, "Inspection and maintenance of radiographic exposure devices, transport and storage containers, associated equipment, source changers, and survey instruments," requires a licensee to perform visual and operability checks on associated equipment before use on each day the equipment is to be used to ensure that the equipment is in good working condition. If equipment problems are found, the equipment must be removed from service until repaired. In addition, the licensee is required to have written procedures for inspection and routine maintenance of associated equipment at intervals not to exceed three months or before the first use thereafter to ensure the proper functioning of components important to safety. Replacement components shall meet design specifications. If problems are found, the equipment must be removed from service until repaired. Records are required for equipment problems and any maintenance performed.

Attachment 2

## **AVAILABILITY OF REFERENCE DOCUMENTS**

Below are the titles of the reference documents along with the URLs and the ADAMS accession numbers (e.g., MLxxxxxxx), if available. The URLs link directly to the documents that are posted on the NRC's public web site. For documents without an URL, NRC maintains an Agencywide Document Access and Management System (ADAMS), which provides text and image files of NRC's public documents. These documents may be accessed through the NRC's Public Electronic Reading Room on the Internet at <http://www.nrc.gov/reading-rm/adams.html>. If you do not have access to ADAMS or if there are problems in accessing the documents located in ADAMS, contact the NRC Public Document Room (PDR) Reference staff at 1-800- 397-4209, 301-415- 4737, or by e-mail to [pdr@nrc.gov](mailto:pdr@nrc.gov). If no URL or ADAMS accession number is indicated for the document then send a written request for a single, paper copy of the document to the Office of Administration, Distribution and Mail Services Section, U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001; or contact the PDR noted above.

1. Federal Register notice (68 FR 41757, July 15, 2003), Denial of a petition for rulemaking [Docket No. PRM-34-5, Amersham Corporation] ML050620568
2. 10 CFR Part 32, Specific domestic licenses to manufacture or transfer certain items containing byproduct material <http://www.nrc.gov/reading-rm/doc-collections/cfr/part032/>
3. 10 CFR Part 34, Licenses for Industrial Radiography and Radiation Safety Requirements for Industrial Radiographic Operations <http://www.nrc.gov/reading-rm/doc-collections/cfr/part034/>
4. American National Standards Institute (ANSI) N432–1980, Radiological Safety for the Design and Construction of Apparatus for Gamma Radiography, (ANSI N432) ML050840139
5. NRC Enforcement Policy <http://www.nrc.gov/what-we-do/regulatory/enforcement/enforc-pol.pdf>
6. NUREG-1556, Volume 3, Revision 1, Consolidated Guidance About Materials Licenses–Applications for Sealed Source and Device Evaluation and Registration, (Final Report, April 2004) ML041340618 <http://www.nrc.gov/reading-rm/doc-collections/nuregs/staff/sr1556/v3/r1/>
7. Inspection Procedure 87121, Industrial Radiography Programs, <http://www.nrc.gov/reading-rm/doc-collections/insp-manual/inspection-procedure/ip87121.pdf>
8. NUREG-1556, Volume 2, Consolidated Guidance about Materials Licensees–Program-Specific Guidance about Industrial Radiography Licenses (Final Report, August 1998) <http://www.nrc.gov/reading-rm/doc-collections/nuregs/staff/sr1556/v2/>
9. NUREG-1631, Source Disconnects Resulting from Radiography Drive Cable Failures (June 1998)

## **Appendix G:**

# **Radiographer and Radiographer's Assistant Training**

## Radiographer's Training

REFERENCE	REQUIREMENT	TRAINING CRITERIA
<i>157.44(3)(a)</i>	<p>Training</p> <p>Classroom Training – 40 hours in Length</p>	<p>Topics in <i>157.44(3)(g)</i></p> <p>Fundamentals of Radiation Safety</p> <ul style="list-style-type: none"> <li>• Characteristics of gamma radiation</li> <li>• Units of radiation dose and quantity of radioactivity</li> <li>• Hazards of exposure to radiation</li> <li>• Levels of radiation from licensed material</li> <li>• Methods of controlling radiation dose (time, distance, and shielding)</li> </ul> <p>Radiation Detection Instruments</p> <ul style="list-style-type: none"> <li>• Use, operation, calibration and limitations</li> <li>• Survey techniques</li> <li>• Personnel monitoring equipment</li> </ul> <p>Equipment to be Used</p> <ul style="list-style-type: none"> <li>• Operation and control of radiographic exposure equipment, remote handling equipment, storage containers and pictures or models of source assemblies (pigtailed)</li> <li>• Storage, control and disposal of licensed material</li> <li>• Inspection and maintenance of equipment</li> </ul> <p>Requirements of <b>Chapter DHS 157 ‘Radiation Protection’</b>.</p> <p>Case Histories of Accidents in Radiography</p>
	On-the-Job Training- 2 months or 320 hours	Under the supervision of a qualified radiographer
	Certification by a Certifying Entity	Certified through a radiographer certification program meeting the requirements of <i>10 CFR 34 Appendix A</i>
<i>157.44(3)(b)</i>	Must Receive Copies of and Instruction in:	<p>DHS 157 Subchapters:</p> <ul style="list-style-type: none"> <li>• III</li> <li>• IV</li> <li>• X</li> <li>• XIII</li> </ul> <p>The License</p> <p>The Licensee's Operating &amp; Emergency Procedures</p>
	Written or Oral Examination of items listed above	Successful completion
	Receive Equipment Training	<p>Training includes:</p> <ul style="list-style-type: none"> <li>• Exposure devices</li> <li>• Sealed sources</li> <li>• Associated equipment</li> <li>• Survey meters</li> <li>• Daily inspection</li> </ul>

	Demonstrate Understanding in Use of Equipment by Practical Exam	Successful completion
<i>157.44(3)(d)</i>	Annual Refresher Training	Review the following: <ul style="list-style-type: none"> <li>• Radiation Safety review</li> <li>• New procedures or equipment</li> <li>• New rule requirements</li> <li>• Observations and deficiencies during audits and discussion of any significant incidents or accidents involving radiography</li> <li>• Employee questions</li> </ul>
<i>157.45(9)</i>	Records	Maintained in accordance with rule

### Radiographer's Assistant Training

REFERENCE	REQUIREMENT	TRAINING CRITERIA
<i>157.44(3)(c)</i>	Must Receive Copies of and Instruction in:	<b>DHS 157</b> Subchapters: <ul style="list-style-type: none"> <li>• III</li> <li>• IV</li> <li>• X</li> <li>• XIII</li> </ul> The License The Licensee's Operating & Emergency Procedures
	Written or Oral Examination of items listed above	Successful completion
	Receive Equipment Training	Training under the supervision of a qualified radiographer that includes: <ul style="list-style-type: none"> <li>• Exposure devices</li> <li>• Sealed sources</li> <li>• Associated equipment</li> <li>• Survey meters</li> <li>• Daily inspection</li> </ul>
	Demonstrate Understanding in Use of Equipment by Practical Exam	Successful completion
<i>157.44(3)(d)</i>	Annual Refresher Training	Review the following: <ul style="list-style-type: none"> <li>• Radiation Safety review</li> <li>• New procedures or equipment</li> <li>• New rule requirements</li> <li>• Observations and deficiencies during audits and discussion of any significant incidents or accidents involving radiography</li> <li>• Employee questions</li> </ul>
<i>157.45(9)</i>	Records	Maintained in accordance with rule

## **Appendix H:**

# **Radiographer/Radiographer's Assistant Inspection Checklist**

## Radiographer/Radiographer's Assistant Inspection Checklist

Name of Individual: \_\_\_\_\_

Radiographic Location: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

Radioisotope Used (i.e. Ir-192, Co-60, etc.): \_\_\_\_\_

Curies: \_\_\_\_\_ Source Serial No.: \_\_\_\_\_

Exposure Device Model No.: \_\_\_\_\_

Exposure Device Serial No.: \_\_\_\_\_

Survey Meter Model No.: \_\_\_\_\_ Serial No.: \_\_\_\_\_ Calibration Date: \_\_\_\_\_

RSO or RSO/designee performing the audit: \_\_\_\_\_  
(Print Name)

1. Was the radiographer/radiographer's assistant wearing an OSL, TLD, or similar device, a pocket or electronic dosimeter, and an alarming ratemeter?  Yes  No
2. Were the pocket or electronic dosimeter, and the alarming ratemeter calibrated?  Yes  No
3. Was the daily check performed for the survey meter and alarming ratemeters?  Yes  No
4. Were other individuals working within the restricted area wearing OSLs, TLDs or similar devices, pocket or electronic dosimeters and alarming ratemeters?  Yes  No
5. Was the restricted area properly controlled to prevent unauthorized access?  Yes  No
6. Was the restricted area posted with a "CAUTION (or DANGER) RADIATION AREA" sign(s)?  Yes  No
7. Was the high-radiation area posted with a "CAUTION (OR DANGER) HIGH RADIATION AREA" sign(s)?  Yes  No
8. Was the utilization log properly filled out?  Yes  No
9. Did the radiographer/radiographer's assistant have sufficient knowledge of safety rules?  Yes  No
10. Was the radiographer working with properly inspected and operable equipment?  Yes  No
11. Did the radiographer/radiographer's assistant properly survey the camera?  Yes  No
12. Did the radiographer properly supervise the radiographer's assistant?  Yes  No
13. Was the camera properly locked and secured to prevent unauthorized removal?  Yes  No
14. Was the high radiation area under continuous direct observation except where entry had been prevented?  Yes  No
15. Were radioactive isotopes stored properly and kept locked to prevent removal?  Yes  No
16. Was the storage area posted with a "CAUTION (or DANGER) RADIOACTIVE MATERIAL" sign(s)?  Yes  No

18. Did the radiographer/radiographer's assistant possess and use a copy of the operating and emergency procedures and **DHS** rules for protection against radiation?

Yes  No

19. Were there any other safety items found to be lacking? If yes, explain in Remarks.

Yes  No

The candidate's performance was:

Satisfactory

Unsatisfactory, needs additional training

Unsatisfactory, further activities prohibited

If applicable, instruction provided \_\_\_\_\_

RSO or RSO/Designee Initials & Date

If applicable, describe corrective actions resulting from failure of the radiographer/radiographer's assistant to properly perform during this field/performance audit.

Remarks:

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**Appendix I:**  
**Radiation Protection Program Audit**

## Radiation Protection Program Audit

Date of this Audit: \_\_\_\_\_

Date of Last Audit: \_\_\_\_\_

Next Audit Date: \_\_\_\_\_

Auditor \_\_\_\_\_

Date \_\_\_\_\_

(Signature)

Management Review \_\_\_\_\_

Date \_\_\_\_\_

(Signature)

### Organization and Scope of Program

A. Organizational structure. (specify any changes)

1. Matches license requirements. [*L/C*]
2. Multiple authorized locations of use and/or field sites authorized.
3. List of location(s) inspected - attached or reference.
4. Brief description of scope of activities, including types of equipment, types and quantities of use involving radioactive material, frequency of use, staff size, etc.

B. Radiation Safety Officer.

1. Named on license. [*L/C*]
2. Fulfills duties as RSO. [*s. DHS 157.44(2)(d)*]
3. Meets requirements. [*s. DHS 157.44(2)(b)*]

C. Radiographers and radiographer's assistants named in documents. [*L/C*]

### Training, Retraining, and Instructions to Workers

A. Instructions to workers. [*s. DHS 157.88(2)*]

B. Sections: III, IV, X, and XIII; the license; and Operating and Emergency Procedures are furnished to all radiographers and radiographer's assistants. [*s. DHS 157.44(3)(b) & (c)*]

C. Training program description the same as that submitted with license application or as amended?

[*s. DHS 157.13(6); s. DHS 157.44(3)*]

1. Written tests completed by all radiographers and radiographer's assistants.
2. Oral tests.
3. All radiographers completed on-the-job training.
4. Periodic training program implemented.

5. Records maintained [*s. DHS 157.45(9)*].

D. Workers cognizant of requirements for:

1. Radiation safety program. [*s. DHS 157.21*]

a. Occupational exposure annual limits. [*s. DHS 157.22(1)&(2)*]

b. Public annual dose limits. [*s. DHS 157.23(1)&(2)*]

2. Dose limits to embryo/fetus and declared pregnant worker. [*s. DHS 157.22(8)*]

3. Procedures for opening packages. [*s. DHS 157.29(6)*]

### **Operating and Emergency Procedures**

A. Procedures current? [*s. DHS 157.44(4)(b)*]

B. Procedures contain information specified. [*s. DHS 157.44(4)(a)*]

C. Procedures submitted to DHS. [*L/C*]

### **Internal Audits or Inspections**

A. Audits/inspections of each radiographer and radiographer's assistants conducted at 6-month intervals or after as appropriate. [*s. DHS 157.44(3)(e)*]

B. Equipment check before use each day. [*s. DHS 157.41(1)*]

C. Equipment inspection and maintenance performed at 3-month intervals. [*s. DHS 157.41(2)*]

D. Records maintained. [*s. DHS 157.41(2)(c)*]

### **Facilities**

A. Permanent radiographic installation. [*s. DHS 157.42*]

1. High Radiation Area posted. [*s. DHS 157.29(2)*]

2. Entrance controls are as described. [*s. DHS 157.26*]

a. Visible and audible radiation signals.

b. Visible signal actuates if entry is attempted when source is exposed.

c. Audible signal actuates if entry is attempted when source is exposed.

d. System tested daily with radiation source.

e. Records maintained for 3 years. [*s. DHS 157.42(2)*]

B. Temporary High Radiation Area Entry Controlled. [*s. DHS 157.26*]

C. Storage Area

1. Storage facilities as described in license. [*L/C*]

2. Sources locked in devices. [*s. DHS 157.37(2)*]

3. Devices secured to prevent tampering or unauthorized removal. [*s. DHS 157.37(2)*]

## Equipment

- A. Radiography devices, source assemblies and source changers in use meet requirements. [*s. DHS 157.36*]
- B. Associated equipment in use complies with requirements. [*s. DHS 157.36*]
- C. Source changers and storage containers meet radiation level limits. [*s. DHS 157.37*]
- D. Equipment exempted by specific license condition is used in accordance with license commitments and authorization.

## Materials

- A. Isotope, chemical/physical form, quantity and use as authorized on the license. [*L/C*]
- B. All sealed sources not fastened to or contained in an exposure device are tagged. [*s. DHS 157.36(b)(4)*]
- C. Leakage and contamination tests.
  - 1. Sealed sources.
    - a. Leak test method approved. [*s. DHS 157.39(1)*]
    - b. Leak tests performed at 6 month intervals. [*s. DHS 157.39(2)*]
    - c. Leakage is less than 185 becquerels (Bq) (0.005 microcuries).
  - 2. Depleted uranium (DU) shielding with S-tubes.
    - a. Test every 12 months. [*s. DHS 157.3992)(e)*]
    - b. DU is less than 185 Bq (0.005 microcuries).
  - 3. Records maintained for 3 years. [*s. DHS 157.36(2)(b)&(e) 2*]
- D. Inventories
  - 1. Conducted quarterly (not to exceed 3 months). [*s. DHS 157.40(1)*]
  - 2. Contain all required information. [*s. DHS 157.40(2)*]
  - 3. Most recent inventory conducted on \_\_\_\_\_
- E. Utilization Logs
  - 1. Utilization logs maintained. [*s. DHS 157.45(6)*]
  - 2. Contain all required information. [*s. DHS 157.45(6)*]

## Instrumentation

- A. Describe the survey instruments possessed:
  - Model No. \_\_\_\_\_ Quantity \_\_\_\_\_
- B. Capable of measuring 0.02 mSv (2 mrem)/hr through 0.01 Sv (1 rem)/hr. [*s. DHS 157.38(1)*]
- C. Operable and calibrated survey instruments available and used on each job. [*s. DHS 157.38(1)*]
- D. Calibration performed at intervals not to exceed six months or after servicing. [*s. DHS 157.38(2)*]
- E. Records maintained for 3 years. [*s. DHS 157.45(3)*]

## Radiation Surveys

- A. Area or facility surveys conducted to show compliance with [s. *DHS 157.23(1)&(2)*; s. *DHS 157.44(9)*]
- B. Records maintained. [s. *DHS 157.45(12)*]
- C. Survey after each exposure, including device, guide tube, ensuring source has returned to the shielded position. [s. *DHS 157.44(7)*]
- D. Survey of device when place in storage to ensure source is in shielded position. [*DHS 157.44(7)*]
- E. Protection of members of the public [s. *DHS 157.23(1)*]
  - 1. Adequate surveys made to demonstrate.
    - a. The TEDE to the individual likely to receive the highest dose does not exceed 0.1 mSv (100 mrem) in a year;
  - Or**
  - b. That if an individual were continuously present in an unrestricted area, the external dose would not exceed 1 mSv (100 mrem) in a year. [s. *DHS 157.23(2)*]
- 2. Unrestricted area radiation levels do not exceed 0.02 mSv (2 mrem) in any 1 hour. [s. *DHS 157.23(1)*]
- 3. Records maintained. [s. *DHS 157.23(1)*; s. *DHS157.32(8)*]

## Personnel Radiation Protection

- A. Dosimetry
  - 1. Workers monitored as required. [s. *DHS 157.44(6)*]
  - 2. Exchange Frequency \_\_\_\_\_ Supplier \_\_\_\_\_
  - 3. Supplier is NVLAP-approved. [s. *DHS 157.25(1)(c)*]
  - 4. Dosimetry exchanged at least monthly. [s. *DHS 157.44(6)*]
  - 5. Dosimetry records maintained. [s. *DHS 157.45(11)*]
- B. Pocket Dosimeters and/or Electronic Personal Dosimeters [s. *DHS 157.44(6)*]
  - 1. Model No. \_\_\_\_\_ Range \_\_\_\_\_  
Model No. \_\_\_\_\_ Range \_\_\_\_\_
  - 2. Read and recorded at start of each shift.
  - 3. Daily readings recorded.
  - 4. Dosimeters checked for response ( $\pm 20\%$ ) at intervals not to exceed 12 months.
  - 5. Off-scale dosimeter procedure and records.
- C. Alarm Ratemeters [s. *DHS 157.44(6)(g)*]
  - 1. Model No. \_\_\_\_\_ Range \_\_\_\_\_
  - 2. Checked that alarm functions properly at start of each shift.
  - 3. Preset at 5 mSv (500 mrem)/hr.
  - 4. Calibrated to  $\pm 20\%$  at intervals not to exceed 12 months.

5. Records maintained.

D. Dosimetry Reports

1. Reviewed by \_\_\_\_\_ Frequency \_\_\_\_\_.
2. Reviewed personnel monitoring records for interval (from \_\_\_\_\_ to \_\_\_\_\_).
3. Maximum exposures: TEDE \_\_\_\_\_ extremity, other \_\_\_\_\_.
4. DPH Forms (or equivalent). [*s. DHS 157.31(7)*]
5. Maximum exposures in compliance with annual limits. [*s. DHS 157.22(1)*]
6. Fetal and Pregnant worker exposure. [*s. DHS 157.22(8); s. DHS 157.25(2)*]
  - a. Worker declared pregnancy in writing during the audit interval.
  - b. If yes, licensee in compliance? Records maintained?
7. Dosimetry records maintained. [*s. DHS 157.31(7)*]

E. Radiation Protection Program [*s. DHS 157.21*]

1. Program includes provisions for keeping dose ALARA.
2. Procedures and engineering controls used to achieve ALARA.
3. Content and implementation reviewed annually by licensee.
4. Records of program reviews maintained.

**Receipt and Transfer of Radioactive Material [*s. DHS 157.29(6)*]**

- A. Procedures established and followed for picking up, receiving, and opening packages.
- B. Incoming packages surveyed.
- C. Shipment of sources since last inspection.
  1. Used container authorized by license or Certificate of Compliance (COC).
  2. Transfers.
  3. All sources surveyed before shipment and transfer.
- D. Records of surveys and receipt/transfer maintained. [*s. DHS 157.31(3)*]
- E. NSTS updated after each receipt and/or transfer. [*s. DHS 157.32(9)*]

**Transportation (*157.92 and 49 CFR 170-189*)**

A. Shipments are:

- Delivered to common carriers.
- Transported in company's private vehicle.
- Both.
- No shipments since last audit.

B. HAZMAT training within last three years [*49 CFR 172.700- 172.704*]

C. Packages:

1. Authorized packages used. [**49 CFR 173.415; 173.416**]
2. Performance test records on file.
  - a. Special form sources. [**49 CFR 173.476(a)**]
  - b. DOT-7A packages. [**49 CFR 173.415(a)**]
3. COC's on file with NRC for Type B. [**10 CFR 71.12(c)(1)**]
4. Two labels with Transport Index, Nuclide, Hazard Class. [**49 CFR 172.403; 172.441**]
5. Properly marked (Shipping name, UN number, Package type, RQ, Name and address of consignee. [**49 CFR 172.301; 172.310; 172.324; 172.101**]
6. Closed and sealed during transport. [**49 CFR 173.475(f)**]

**D. Shipping papers**

1. Prepared and used. [**49 CFR 172.200(a)**]
2. Proper (Shipping name, Hazard class, UN number, Quantity, Package type, Nuclide, RQ, Radioactive material, Physical and chemical form, Category of label, TI, Shipper's name, Certification and signature, Emergency response phone number, "Limited Quantity" "Cargo Aircraft Only" if applicable). [**49 CFR 172.200 - 172.204; 175.700**]
3. Readily accessible during transport.

**E. Vehicles**

1. Placarded. [**49 CFR 172.504**]
2. Cargo blocked and braced. [**49 CFR 177.842(d)**]
3. Proper overpacks (shipping name, UN number label, statement of inner packaging complies with specification packaging). [**49 CFR 171.15; 171.16**]

**F. Any transportation incidents reported to DOT National Response Center [**49 CFR 171.15; 171.16**]**

**Auditor's Independent Measurements**

A. Survey Instrument: \_\_\_\_\_

Serial No.: \_\_\_\_\_

Last Calibration: \_\_\_\_\_

B. Auditor's measurements were compared with audited person's measurement

C. Describe the type, location, and results of measurements, attach a diagram/survey sheet and refer to this section

**Notifications and Reports**

A. Occupational annual exposure reports to monitored individuals [*s. DHS 157.88*]

B. Theft or loss [*s. DHS 157.32(1)*]

C. Incidents [*s. DHS 157.32(2)*]

- D. Overexposures and high radiation levels [*s. DHS 157.32(3)*]
- E. Annual reports furnished to DHS [*s. DHS 157.32(5)*]
- F. Reporting of equipment defects [*s. DHS 157.13(17)(b)*]

### **Posting and Labeling**

- A. Radiation areas [*s. DHS 157.29(2)*]
- B. High radiation areas [*s. DHS 157.29(2)*]
- C. Use or storage areas [*s. DHS 157.29(2)*]
- D. Containers or devices labeled [*s. DHS 157.36*]
- E. Notice to employee form [*s. DHS 157.88*]

### **Recordkeeping for Decommissioning [*s. DHS 157.15(7)*]**

- A. Records in independent and identifiable location
- B. Records include leak tests; locations of use and storage; and transfers of radioactive material.

### **Bulletins and Information Notices**

- A. Communications received and reviewed
- B. Appropriate response to Information Notices

### **Special License Conditions or Issues**

Evaluate special license conditions for data, actions, including Increased Controls requirements.

### **Performance Evaluation Factors**

These indicators may provide an indication of the status of the Radiation Safety Program as perceived by management.

- A. Lack of senior management involvement with the radiation safety program and/or RSO oversight
- B. RSO too busy with assignments other than radiation safety
- C. Insufficient staffing
- D. Inadequate audits

## **Appendix J:**

# **Procedure for Calibrating Survey Instruments**

A. Sealed source(s) used for calibrating survey instruments should:

1. Approximate a point source
2. Have its exposure rate at a given distance traceable by documented measurements to a standard certified to be within +/- 5% accuracy by NIST
3. Approximate the same photon energy (Ir-192, Co-60) as the source to be used in the radiography device.
4. Be of sufficient strength to give an exposure rate of about 0.3 mSv/hr (30 mrem/hr) at 100 cm. (85 mCi of Cs-137 or 21 mCi of Co-60).

B. Use the inverse square and radioactive decay law to correct changes in exposure rate due to source decay or different distances from the source.

C. Record survey meter calibration data and maintain written records for each instrument being used to satisfy regulatory requirements. Survey meter calibration reports should indicate the procedure used and the data obtained. Calibration records should contain the following information and must be maintained 3 years from date of calibration of each instrument:

1. Owner or user identification, including name, address, and person to be contacted;
2. Instrument description that includes manufacturer, model number, serial number, and type of detector;
3. Calibration source description that includes exposure rate, indicated exposure rate at a specified distance on a specified date, and the calibration procedure;
4. Each calibration point identifying the calculated exposure rate, the indicated exposure rate, the deduced correction factor, and the scale selected on the instrument;
5. Exposure reading indicated with the instrument in the "battery check" mode, if available;
6. Angle between the radiation flux field and the detector (parallel, perpendicular);

**Note:** Internal detectors should specify angle between radiation flux field and a specified surface of the instrument

7. For detectors with removable shielding, note whether the shielding was in place or removed during the calibration procedure;
8. Include person's name who performed the calibration and the date on which the calibration was performed;

D. A single point on a survey meter scale can be considered satisfactorily calibrated if the indicated exposure rate differs from the calculated exposure rate by less than 10%.

**Note:** Three kinds of scales are frequently used on radiation survey meters:

1. Linear Scale: Meters on which the user selects a linear scale must be calibrated at no less than two points on each scale. The points should be at approximately  $1/3$  and  $2/3$  of the decade.
2. Multidecade Logarithmic Scale: Meters that have a multidecade logarithmic scale must be calibrated at no less than one point on each decade and no less than two points on one of the decades. Those points should be approximately  $1/3$  and  $2/3$  of the decade.
3. Automatically Ranging Digital Display: Meters that have a device for indicating rates must be calibrated at no less than one point on each decade and at no less than two points on one of the decades. Those points should be at approximately  $1/3$  and  $2/3$  of the decade.

E. Scales in excess of 10 mSv/hr (1,000 mrem/hr) need not be calibrated. However, such scales should be checked for operation and approximately correct response.

F. The following information should be attached to the instrument as a calibration sticker or tag:

1. Source that was used to calibrate the instrument
2. A calibration chart or graph for each scale or decade of a survey meter that is greater than  $\pm 20\%$  of the actual values identifying the average correction factor, or a note indicating that scale was checked only for function or is inoperative.
3. Date of calibration
4. Date survey instrument is due calibration
5. Name or initials of individual calibrating instrument.

**Note:** Detailed information about survey instrument calibration may be obtained by referring to ANSI N323-1978, "Radiation Protection Instrumentation Test and Calibration." Copies may be obtained from the American National Standards Institute, 25 W 43rd Street, 4th Floor, New York, NY, 10036.

NUREG 1556, Volume 18 'Program-Specific Guidance About Service Provider Licenses' is available from the NRC website at [www.nrc.gov](http://www.nrc.gov).

## **Appendix K:**

# **Requests to Perform Leak Testing and Sample Analysis**

## **A. Requests to Perform Leak Testing and Sample Analysis**

1. Identify the individual who will make the analysis and provide his or her qualifications to make quantitative measurements of radioactivity.
2. Specify how and where test samples will be taken on the radiography device. Describe materials used and methods of handling samples to prevent or minimize exposure to personnel.
3. Specify the type of instrument(s) that will be used for measurement, the counting efficiency, and minimum levels of detection for each radionuclide to be measured.

**Note:** An instrument capable of making quantitative measurements should be used; hand-held survey meters will not normally be considered adequate for measurements.

4. Specify the standard sources used to calibrate the instrument; for each, specify the radionuclide, quantity, accuracy, and traceability to primary radiation standards.

**Note:** Accuracy of standards should be within  $\pm 5\%$  of the stated value and traceable to a primary radiation standard such as those maintained by the National Institutes of Standards and Technology (NIST).

NUREG 1556, Volume 18 'Program-Specific Guidance About Service Provider Licenses' is available at the NRC website: [www.nrc.gov](http://www.nrc.gov).

5. Include a sample calculation for conversion of the measurement data to Bq (or microcuries).
6. Provide instructions on actions to take and persons to be notified if sources are found to be leaking.

## **B. Procedure for Performing Leak Testing and Analysis**

1. For each source to be tested, list identifying information such as radiography device serial number, radionuclide and activity.
2. If available, use a survey meter to monitor exposure.
3. Prepare a separate wipe sample (e.g., cotton swab or filter paper) for each source.
4. Number each wipe to correlate with identifying information for each source.
5. Wipe the most accessible area where contamination would accumulate if the sealed source were leaking.
6. Using the instrument identified to, and approved by, DHS, count and record background count rate.
7. Check the instrument's counting efficiency using standard source of the same radionuclide as the source being tested or one with similar energy characteristics.
8. Calculate efficiency.
9. Count each wipe sample; determine net count rate.

10. For each sample, calculate and record estimated activity in Bq (or microcuries).
11. Sign and date the list of sources, data and calculations.
12. If the wipe test activity is 185 Bq (0.005 microcurie) or greater, notify the RSO, so that the source can be withdrawn from use and disposed of properly. Also notify DHS.

### **C. Sampling and Analysis for Depleted Uranium as a Result of S-tube Breakthrough**

**Note:** As an ALARA and safety measure, the source should be transferred to a source changer before the S-tube is tested for breakthrough.

1. The wipe test sample should be obtained from the areas of the tube where wear is likely to be most severe, at the first curve nearest the ends of the radiography device. The sample should be analyzed for alpha contamination. Alpha contamination present indicates that wear has broken through the S-tube to expose the depleted uranium.
2. Alpha counting sensitivity should be able to detect 185 Bq (0.005 microcuries) of contamination.
3. A worn S-tube could create equipment operating difficulties. Upon verification of the presence of alpha-particle emitting uranium, the radiographic exposure device should be removed from use until an evaluation of the wear of the S-tube has been made. Should the evaluation reveal that the S-tube is worn through, the device may not be used again. No user repairs are permitted.

## **Appendix L:**

# **Guidance for Demonstrating that Public Dose Limits are Not Exceeded**

## **A. Licensees must ensure that:**

1. The radiation dose received by individual members of the public resulting from the licensee's possession and/or use of licensed materials does not exceed 1 mSv (100 mrem) in one calendar year.

Members of the public include persons who live, work, or may be near locations where industrial radiography devices are used or stored and employees whose assigned duties do not include the use of licensed materials and who work in the vicinity where devices are used or stored.
--

2. The radiation dose in unrestricted areas does not exceed 0.02 mSv (2 mrem) in any one hour.
3. Typical unrestricted areas may include offices, shops, laboratories, areas outside buildings, property, and nonradioactive equipment storage areas. The licensee does not control access to these areas for purposes of controlling exposure to radiation or radioactive materials. However, the licensee may control access to these areas for other reasons such as security.
4. Licensees must show compliance with both portions of the rule. Radiographic operations at temporary jobsites must be demonstrated to have doses to the public in unrestricted areas that do not exceed 0.02 mSv (2 mrem) in any one hour. For storage areas and permanent radiographic facilities, calculations or a combination of calculations and measurements (e.g., using an environmental TLD) are often used to prove compliance with levels of 0.02 mSv (2 mrem) in any one hour and 1mSv (100 mrem) in a calendar year.

## **B. Calculated Method**

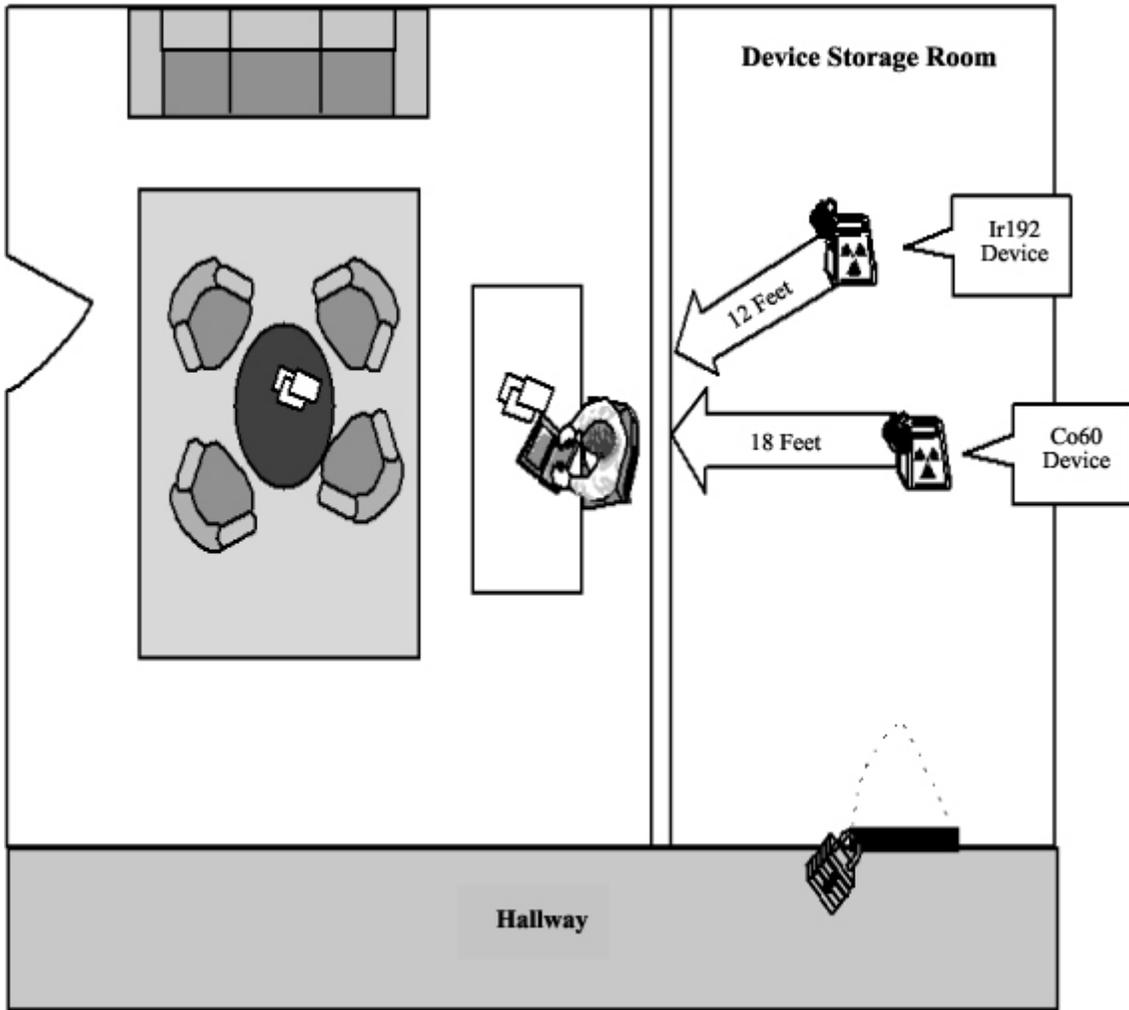
1. For ease of use by most industrial radiography licensees, the examples in this appendix use conventional units. The conversions to SI units are as follows: 1 foot (ft) = 0.305 meter (m); 1 mrem = 0.01 mSv.
2. The calculated method takes a tiered approach, going through a three-part process starting with a worst case situation and moving toward more realistic situations. It makes the following simplifications: (1) each device is a point source, (2) typical radiation levels encountered when the source is in the shielded position are taken from either the Sealed Source & Device (SSD) Registration Sheet, the maximum dose levels allowed for a transport package (exposure device) labeled YELLOW III, or the manufacturer's literature, and (3) no credit is taken for any shielding found between the devices and the unrestricted areas.

3. Part 1 of the calculated method is simple but conservative. It assumes that a member of the public is present 24 hours a day, and it uses only the inverse square law to determine if the distance between the device and the affected member of the public is sufficient to show compliance with the public dose limits. Part 2 considers not only distance, but also the time that a member of the public is actually in the area under consideration. Part 3 considers distance and the portion of time that both the device and the affected member of the public are present. Part 4 considers the distance, the portion of time that both the device and the affected member of the public are present and the shielding provided by the structural materials or shielding materials specifically added by the licensee. Using this approach, licensees make only those calculations that are needed to demonstrate compliance. In many cases, licensees will need to use the calculated method through Part 1 or Part 2. These calculations typically result in higher radiation levels than would exist at typical facilities, but provide a method for estimating conservative doses which could be received.

### C. Example 1

1. Mo-Rad, Inc. (a hypothetical radiography licensee) is used to demonstrate the calculated method listed below. Yesterday, the company's president noted that the new device storage area is close to his secretary's desk and he asked Joe, the Radiation Safety Officer (RSO), to determine if the company is complying with DHS regulations.
2. The secretary's desk is near the wall separating the reception area from the designated, locked device storage area, where the company is storing its two devices. Joe measures the distances from each device to the wall and assumes that each device would have the maximum dose rate allowed under DHS rule or DOT regulations: 2 mSv/hr (200 mrem/hr) on the surface and 0.1 mSv/hr (10 mrem/hr) at one meter. **Figure 14** is Joe's sketch of the areas in question, and **Table 17** summarizes the information Joe has on each device.

### A Bird's Eye View of Office and Device Storage Area



**D. Figure 14:** Diagram of Office and Device Storage Area. This sketch shows the areas described in examples 1 and 2.

**E. Table 17:** Information Known about Each Device

Description of Known Information	Device 1	Device 2
How device is stored	Ir-192 exposure device (Type B container)	Co-60 exposure device (Type B container)
Dose rate in mrem/hr encountered at specified distance from the device	10 mrem/hr at 1 meter (3.3 ft)	10 mrem/hr at 1 meter (3.3 ft)
Distance in ft to secretary's chair	12 ft	18 ft

## F. Example 1: Part 1

Joe's first thought is that the distance between the devices and the secretary's chair may be sufficient to show compliance with the regulation in *s. DHS 157.23(1)*. So, taking a worst case approach, he assumes: 1) the devices are constantly present (i.e., 24 hr/d), 2) both devices remain in storage with no other use, and 3) the secretary is constantly sitting in the desk chair (i.e., 24 hr/d). Joe proceeds to calculate the dose she might receive hourly and yearly from each device, as shown in **Tables 18** and **19** below.

**G. Table 18:** Calculated Method, Part 1: Hourly and Annual Dose Received from Device 1

Step No.	Description	Device 1 Input Data	Results
1	Dose received in an hour at known distance from device (e.g., from manufacturers data), in mrem/hr	10	10
2	Square of the distance (ft) at which the Step 1 rate was measured, in ft <sup>2</sup>	(3.3) <sup>2</sup>	10.9
3	Square of the distance (ft) from the device the secretary's desk in an unrestricted area, in ft <sup>2</sup>	(12) <sup>2</sup>	144
4	Multiply the results of Step 1 by the results of Step 2 (this is an intermediate result)	10 x 10.9	109
5	Divide the result of Step 4 by the result of Step 3 to calculate the dose received by an individual at the secretary's desk, HOURLY DOSE RECEIVED FROM DEVICE 1, in mrem in an hour.	109/144	0.76
6	Multiply the result of Step 5 by 24 hr/d x 365 d/yr = MAXIMUM ANNUAL DOSE RECEIVED FROM DEVICE 1, in mrem in a year.	0.76 x 24 x 365	6,630

**H. Table 19:** Calculated Method, Part 1: Hourly and Annual Dose Received from Device 2

Step No.	Description	Device 2 Input Data	Results
1	Dose received in an hour at known distance from device (e.g., from manufacturer's data), in mrem/hr	10	10
2	Square of the distance (ft) at which the Step 1 rate was measured, in ft <sup>2</sup>	(3.3) <sup>2</sup>	10.9
3	Square of the distance (ft) from the device the secretary's desk in an unrestricted area, in ft <sup>2</sup>	(18) <sup>2</sup>	324
4	Multiply the results of Step 1 by the results of Step 2 (this is an intermediate result)	10 x 10.9	109
5	Divide the result of Step 4 by the result of Step 3 to calculate the dose received by an individual at the secretary's desk, HOURLY DOSE RECEIVED FROM DEVICE 2, in mrem in an hour.	109/324	0.34
6	Multiply the result of Step 5 by 24 hr/d x 365 d/yr = MAXIMUM ANNUAL DOSE RECEIVED FROM DEVICE 2, in mrem in a year.	0.34 x 24 x 365	2,950

**I. To determine the total hourly and total annual dose received, Joe adds the pertinent data from the preceding tables.**

**J. Table 20:** Calculated Method, Part 1: Total Hourly and Annual Dose Received from Devices 1 and 2

Step No.	Description	Device 1	Device 2	Sum
7	TOTAL HOURLY DOSE RECEIVED from Step 5 of <b>Tables 9</b> and <b>10</b> , in mrem in an hour	0.76	0.34	$0.76 + 0.34 = 1.1$
8	TOTAL ANNUAL DOSE RECEIVED from Step 6 of <b>Tables 9</b> and <b>10</b> , in mrem in a year	6,630	2,950	9,580

**Note:** The Sum in Step 7 demonstrates compliance with the limit of 2 mrem in any one hour. Reevaluate if assumptions change. If the Sum in Step 8 exceeds 100 mrem/yr, proceed to Part 2 of the calculated method. At this point, Joe is pleased to see that the total dose that an individual could receive in any one hour is only 1.1 mrem in an hour, but notes that an individual could receive a dose of 9,580 mrem in a year, much higher than the 100 mrem limit.

**K. Example 1: Part 2**

1. Joe reviews his assumptions and recognizes that the secretary is not at the desk 24 hr/d. He decides to make a realistic estimate of the number of hours the secretary sits in the chair at the desk, keeping his other assumptions constant (i.e., the devices are constantly present (i.e., 24 hr/d), both devices remain in storage with no other use). He then recalculates the annual dose received.

**2. Table 21:** Calculated Method, Part 2: Annual Dose Received from Devices 1 and 2

Step No.	Description	Results
9	A. Average number of hours per day that individual spends in area of concern (e.g., secretary sits at desk 5 hr/day; the remainder of the day the secretary is away from the desk area copying, filing, etc.) B. Average number of days per week in area (e.g., secretary is part time and works 3 days/week) C. Average number of weeks per year in area (e.g., secretary works all year )	5 3 52
10	Multiply the results of Step 9.A. by the results of Step 9.B. by the results of Step 9.C. = AVERAGE NUMBER OF HOURS IN AREA OF CONCERN PER YEAR	$5 \times 3 \times 52 = \mathbf{780}$
11	Multiply the sum in Step 7 by the results of Step 10 = ANNUAL DOSE RECEIVED FROM DEVICES CONSIDERING REALISTIC ESTIMATE OF TIME SPENT IN AREA OF CONCERN, in mrem in a year	$1.1 \times 780 = \mathbf{860}$

**Note:** If Step 11 exceeds 100 mrem in a year, proceed to Part 3 of the calculated method.

3. Although Joe is pleased to note that the calculated annual dose received is significantly lower, he realizes it still exceeds the 100 mrem in a year limit.

### L. Example 1, Part 3

1. Again Joe reviews his assumptions and recognizes that the devices are not always in storage when the secretary is seated at the desk. As he examines the situation, he realizes he must consider each device individually.

#### 2. Table 22: Calculated Method, Part 3: Summary of Information

<b>Summary</b>
Information on When Devices Are Present in the Storage Area:
<ul style="list-style-type: none"><li>• <b>Device 1:</b> an Ir-192 exposure device located in the storage area overnight; it is used every day at temporary jobsites all year and returned to the storage location at the end of each day. The device is usually present during the secretary's first and last hours of work each day.</li><li>• <b>Device 2:</b> a Co-60 exposure device located in the storage area continuously (24 hr/d) for 8 months of the year; for the remaining 4 months of the year, it is at temporary jobsites</li></ul>
Information from Example 1, Part 2 on when the secretary is sitting at the desk:
<ul style="list-style-type: none"><li>• 5 Hours per Day</li><li>• 3 Days per Week</li><li>• 52 Weeks per Year</li></ul>

**3. Table 23:** Calculated Method, Part 3: Annual Dose Received from Devices 1 and 2

Step No.	Description	Device 1	Device 2
12	Average number of hours per day device is in storage while secretary is present	2	5
13	Average number of days per week device is in storage while secretary is present	3	3
14	Average number of weeks per year device is in storage while secretary is present	52	32
15	Multiply the results of Step 12 by the results of Step 13 by the results of Step 14 = TOTAL HOURS EACH DEVICE IS STORED PER YEAR WHILE SECRETARY IS PRESENT	$2 \times 3 \times 52 = 312$	$5 \times 3 \times 32 = 480$
16	Multiply the results of Step 15 by the results of Step 7 = ANNUAL DOSE RECEIVED FROM EACH DEVICE, in mrem in a year	$312 \times 0.76 = 237$	$480 \times 0.34 = 163$
17	Sum the results of Step 16 for each device = TOTAL ANNUAL DOSE RECEIVED CONSIDERING REALISTIC ESTIMATE OF TIME SPENT IN AREA OF CONCERN AND TIME DEVICE IS IN STORAGE, in mrem in a year	$237 + 163 = 400$	

**Note:** If the result in Step 17 is greater than 100 mrem/yr, the licensee must take corrective actions.

**4.** Joe notes that the result in Step 17 does not show compliance with the 100 mrem/yr limit. Since the result in Step 17 is higher than 100 mrem/yr, then Joe has to consider one or more of the following:

- Consider whether the assumptions used to determine occupancy and the time each device is in storage are accurate, revise the assumptions as needed, and recalculate using the new assumptions.
- Calculate the effect of any shielding located between the device storage area and the secretarial workstation. Listed below are typical half-value layers (HVL) for Ir-192 and Co-60.

**5. Table 24:** Half Value Layers (HVL) for Typical Shielding Materials

	Steel	HVL (inches) Lead	Concrete
Ir-192	0.5	0.25	1.7
Co-60	0.8	0.5	2.1

- Take corrective action (e.g., move devices within storage area, move the storage area, move the secretarial workstation) and perform new calculations to demonstrate compliance.
- Designate the area outside the storage area as a restricted area and the secretary as an occupationally exposed individual. This would require controlling access to the area for purposes of radiation protection and training the secretary as required by *s. DHS 157.88(2)*.

**M. Example 1, Part 4**

1. Joe decides to take into account the amount of shielding provided by the wall between the secretary's desk and the storage area where the two devices are located. The wall between the secretary's office and the storage area is a 4 inch thick concrete wall.

2. **Table 25:** Calculated Method, Part 4: Annual Dose Received from Devices 1 and 2

Step No.	Description	Device 1	Device 2
18	Annual dose received from each device from Step 15	237	163
19	Number of HVLs (Thickness of shielding material/Thickness for one HVL); If more than one shielding material, need to evaluate each shielding material separately by type of radionuclide	$4.0/1.7 = 2.35$	$4.0/2.1 = 1.9$
20	Fraction of radiation dose transmitted through shield: 0.5 (Total Number of HVLs); If more than one shielding material, then sum the number results from Step 19 by radionuclide	$0.5(2.35) = 0.2$	$0.5(1.9) = 0.27$
21	Multiply the results of Step 20 by the results of Step 18 = ANNUAL DOSE RECEIVED FROM EACH DEVICE, in mrem in a year	$0.2 \times 237 = 47$	$0.27 \times 163 = 44$
22	Sum the results of Step 21 for each device = TOTAL ANNUAL DOSE RECEIVED CONSIDERING REALISTIC ESTIMATE OF TIME SPENT IN AREA OF CONCERN, TIME DEVICE IS IN STORAGE AND SHIELDING OF STRUCTURAL MATERIALS, in mrem in a Year	$47 + 44 = \mathbf{91}$	

**Note:** If the result in Step 22 is greater than 100 mrem/yr, the licensee must take corrective actions.

3. Joe is glad to see that the results in Step 22 show compliance with the 100 mrem in a calendar year limit.
4. Note that in the example, Joe evaluated the unrestricted area outside only one wall of the device storage area. Licensees also need to make similar evaluations for other unrestricted areas and to keep in mind the ALARA principal, taking reasonable steps to keep radiation dose received below regulatory requirements. In addition, licensees need to be alert to changes in situations (e.g., moving any of the devices closer to the secretarial workstation, adding a device to the storage area, changing the secretary to a full-time worker, or changing the estimate of the portion of time spent at the desk) and to perform additional evaluations, as needed.

RECORD KEEPING: *s. DHS 157.31(8)* requires licensees to maintain records demonstrating compliance with the dose limits for individual members of the public.

## N. Combination Measurement - Calculated Method

1. This method, which allows the licensee to take credit for shielding between the device and the area in question, begins by measuring radiation levels in the areas, as opposed to using manufacturer-supplied rates at a specified distance from each device. These measurements must be made with calibrated survey meters sufficiently sensitive to measure background levels of radiation. However, licensees must exercise caution when making measurements with currently calibrated radiation survey instruments. A maximum dose of 1 mSv (100 mrem) received by an individual over an interval of 2080 hours (i.e., a work year of 40 hr/wk for 52 wk/yr) is equal to less than 0.5 microsievert (0.05 mrem) per hour.

This rate is well below the minimum sensitivity of most commonly available G-M survey instruments.

2. Instruments used to make measurements for calculations must be sufficiently sensitive. An instrument equipped with a scintillation-type detector (e.g., NaI(Tl)) or a micro-R meter used in making very low gamma radiation measurements should be adequate.
3. Licensees may also choose to use environmental TLDs. TLDs used for personnel monitoring (e.g., LiF) may not have sufficient sensitivity for this purpose. Generally, the minimum reportable dose received is 0.1 mSv (10 mrem). Suppose a TLD monitors dose received and is changed once a month. If the measurements are at the minimum reportable level, the annual dose received could have been about 1.2 mSv (120 mrem), a value in excess of the 1 mSv/yr (100 mrem/yr) limit. If licensees use TLDs to evaluate compliance with the public dose limits, they should consult with their TLD supplier and choose more sensitive TLDs, such as those containing CaF<sub>2</sub> that are used for environmental monitoring. This direct measurement method would provide a definitive measurement of actual radiation levels in unrestricted areas without any restrictive assumptions. Records of these measurements can then be evaluated to ensure that rates in unrestricted areas do not exceed the 1 mSv/yr (100 mrem/yr) limit.

## O. Example 2

1. As in Example 1, Joe is the RSO for Mo-Rad, Inc., a radiography licensee. The company has two devices stored in a designated, locked storage area that adjoins an unrestricted area where a secretarial workstation is located. See **Figure 14** and **Table 26** for information. Joe wants to see if the company complies with the public dose limits at the secretarial station.
2. During the winter while all the devices were in storage, Joe placed an environmental TLD badge in the

secretarial workspace for 30 days. Joe chose a winter month so he did not have to keep track of the number of hours that each device was in the storage area. The TLD processor sent Joe a report indicating the TLD received 100 mrem.

3. Parts 2 and 3 are the calculated the same as Example 1.

4. **Table 26:** Combination Measurement - Calculated Method

Step No.	Description	Input Data and Results
<b>Part 1</b>		
1	Dose received by TLD, in mrem	100
2	Total hours TLD exposed	24 hr/d x 30 days = 720 hr
3	Divide the results of Step 1 by the results of Step 2 to determine HOURLY DOSE RECEIVED, in mrem in an hour	0.14
4	Multiply the results of Step 3 by 365 d/yr x 24 hr/d = 8760 hours in one year = MAXIMUM ANNUAL DOSE RECEIVED FROM DEVICES, in mrem in a year	365 x 24 x 0.14 = 8760 x 0.14 = 1226
<b>Part 2</b>		
<b>Part 3</b>		

**Note:** For the conditions described above, Step 3 indicates that the dose received in any one hour is less than the 2 mrem in any one hour limit. However, if there are any changes, then the licensee would need to reevaluate the potential doses which could be received in any one hour. Step 4 indicates that the annual dose received would be much greater than the 100 mrem in a year allowed by the rule.

5. In Step 2, Joe can adjust for a realistic estimate of the time the secretary spends in the area as he did in Part 2 of Example 1.
6. If the results of Joe's evaluation in Part 2 show that the annual dose received in a year exceeds 100 mrem, then he can make adjustments for realistic estimates of the time spent in the area of concern while the devices are actually in storage as in Part 3 of Example 1. (Recall that the TLD measurement was made while all the devices were in storage -- i.e., 24 hr/d for the 30 days that the TLD was in place.)

## **Appendix M:**

# **Information to Consider When Developing Procedures for Operating Radiography Equipment**

## **A. Crank-out Device**

1. Locate the source shield at the desired distance from the object to be radiographed.
2. Mount the source's tip firmly, using jigs or other attachments, with the tip in the exact exposure position.
3. Locate the control unit at the maximum distance (25 feet or 7.6 meters) from the source shield with the control tubes laid out as straight as possible.
4. Join the control cable to the unit following the manufacturer's instructions.
5. Establish and post the restricted area and high radiation area.
6. Unlock the device.
7. Turn the hand crank steadily to move the source out of the source shield to the exposure position.
8. Survey the perimeter of the restricted area to be sure that radiation levels do not exceed 0.02 mSv (2 mrem) in any one hour.
9. Maintain continuous surveillance over the restricted area during an exposure, keeping all persons from entering.
10. After completing the exposure, retract the source by turning the crank until the "safe" position is indicated.
11. Survey the entire circumference of the device and the guide tube to determine that the source is in a shielded position.
12. Lock the device and remove the key.

## **B. Pipeliner Device**

1. Establish and post the restricted area and high radiation area.
2. Unlock the device.
3. Stand as far away as possible and out of the direction of the beam and expose the source (e.g., use the "stretch technique").
4. Survey the perimeter of the restricted area to be sure that the radiation levels do not exceed 0.02 mSv (2 mrem) in any one hour.
5. Maintain continuous surveillance over the restricted area during an exposure, keeping all persons from entering.
6. After completing the exposure, return the source to the shielded position.
7. Survey the device to determine that the source is in a shielded position.
8. Lock the device.

**Note:** DHS considers the following very important: surveys of the restricted area, continuous surveillance of the restricted area during an exposure, the survey of the device and guide tube, and locking the device.

## C. Source Exchange

### 1. Removing the Old Source

**Caution: Always use a calibrated, operable survey meter while performing a source exchange!**

- a. Survey the shipping container upon receipt with a survey meter.

**Note:** The surface reading should not exceed 2 mSv/hr (200 mem/hr).

- b. Attach the end of the source guide tube to the exposure device.
- c. Connect the other end of the source guide tube to the empty side of the source changer.
- d. Unlock the empty side of the source changer.
- e. Unlock the camera and crank out the source from the camera into the source changer.
- f. Survey the source changer and guide tube to verify that the source is in the safe position.
- g. Lock the source changer.
- h. Disconnect the source guide tube and drive cable to the source pigtail. Replace the dust cap on the source changer.
- i. Remove the source identification plate from the exposure device and affix the plate to the side of the source changer loaded with the old source.

### 2. Installing the New Source

- a. Remove the dust cap on the source changer lock body identified with the new source tag.
- b. Align the camera and source guide tube with the source changer.
- c. Connect the new source to the drive cable.
- d. Connect the source guide tube to the source changer.
- e. Unlock the source changer and retract the new source into the exposure device.
- f. Survey the exposure device and guide tube to assure that the source is in the safe position.
- g. Lock the exposure device.
- h. Disconnect the source guide tube and drive accessories.
- i. Affix the new source identification plate on the exposure device.

**Appendix N:**  
**Transportation**

The following are the major areas in DOT regulations most relevant for transporting radiographic exposure devices and source exchangers that are shipped as Type B quantities:

A. Table of Hazardous Materials and Special Provisions [**49 CFR 172.101**]

1. **49 CFR 172.101** - Hazardous Materials Table [proper shipping name, hazard class, identification number]
2. **Table 2, Appendix A, 49 CFR 172.101** - List of Hazardous Substances and Reportable Quantities [for radionuclides]

B. Shipping Papers - **49 CFR 172.200**

1. **49 CFR 172.201** - General entries [on shipping papers]
2. **49 CFR 172.202** - Description of hazardous material on shipping papers
3. **49 CFR 172.203** - Additional description requirements
4. **49 CFR 172.204** - Shipper's certification (except if shipping hazardous waste or transporting radioactive material by air).

C. Package Markings - **49 CFR 172.300**

1. **49 CFR 172.301** - General marking requirements for non-bulk packaging
2. **49 CFR 172.304** - Marking requirements
3. **49 CFR 172.310** - Radioactive material [Type B]
4. **49 CFR 172.324** - Hazardous substances in non-bulk packaging [designation of "reportable quantities" with the letters "RQ"]

D. Package Labeling - **49 CFR 172.400**

1. **49 CFR 172.400(a)** - General labeling requirements
2. **49 CFR 172.403** - Radioactive materials [types and contents of labels]
3. **49 CFR 172.406** - Placement of labels

E. Placarding of Vehicles - **49 CFR 172.500**

1. **49 CFR 172.504** - General placarding requirements
2. **49 CFR 172.516** - Visibility and display of placards
3. **49 CFR 172.556** - RADIOACTIVE placard

F. Emergency Response Information - **Subpart G**

1. **49 CFR 172.600** - Applicability and general requirements
2. **49 CFR 172.602** - Emergency response information

3. **49 CFR 172.604** - Emergency response telephone number

G. Training - **Subpart H**

1. **49 CFR 172.702** - Applicability and responsibility for training and testing [for HAZMAT employees]
2. **49 CFR 172.702** - Training requirements (includes types of training, when it must be conducted, need for refresher training every 3 years, recordkeeping)

H. Security Plans **49 CFR 172.800, 49 CFR 172.802**: Purpose and applicability, components of a security plan;

I. Shippers - General Requirements for Shipments and Packaging - **49 CFR 173**

1. **49 CFR 173.25** - Requirements for use and labeling of overpacks
2. **49 CFR 173.403** - Definitions
3. **49 CFR 173.411** - General design requirements
4. **49 CFR 173.413** - Additional design requirements for Type B packages
5. **49 CFR 173.416** - Authorized Type B packages [includes packaging certification requirements]
6. **49 CFR 173.441** - Radiation levels
7. **49 CFR 173.471** - Additional requirements for Type B packages approved by NRC
8. **49 CFR 173.476** - Approval of special form radioactive materials [includes requirement for documentation of special form status]

J. Carriage by Public Highway - **49 CFR 177**

1. **49 CFR 177.817** - Shipping paper [location of shipping papers during transport]
2. **49 CFR 177.842** - Class 7 (radioactive) material [includes requirement for blocking and bracing during transport]

### Labeling Packages (49 CFR 172.400-450)

NOTE: IAEA, ICAO, and IMO may require additional hazard communication information for international shipments. This table must not be used as a substitute for the DOT and NRC regulations on the transportation of radioactive materials.

- Labeling is required to be: (1) placed near the required marking of the proper shipping name, (2) printed or affixed to the package surface, (3) in contrast with its background, (4) unobscured by markings or attachments, (5) within color, design, and size tolerance, and (6) representative of the HAZMAT contents of the package.
- Two labels are required on opposite sides of the package, excluding the bottom.

#### Determination of Required Label

Size: Sides: ≥ 100 mm  Border: 5-6.3 mm	 49 CFR 172.436	 49 CFR 172.438	 49 CFR 172.440
	WHITE-I	YELLOW-II	YELLOW-III
Required when:	Surface radiation level ≤ 0.005 mSv/hour (0.5 mrem/hour)	0.005 mSv/hour (0.5 mrem/hour) < surface radiation level ≤ 0.5 mSv/hour (50 mrem/hour)	0.5 mSv/hour (50 mrem/hour) < surface radiation level ≤ 2 mSv/hour (200 mrem/hour)
Or:	TI = 0 [1 meter dose rate < 0.5 mrem/hour]	TI ≤ 1 [1 meter dose rate ≤ 1 mrem/hour]	1 < TI ≤ 10 [1 meter dose rate ≤ 10 mrem/hour]

#### Content on Radioactive Labels

RADIOACTIVE label must contain (entered using a durable, weather-resistant means):

- (1) The radionuclides in the package. Symbols (e.g., Ir-192) are acceptable.
- (2) The activity in SI units (e.g., Bq, TBq) or both SI units with customary units (e.g., Ci, mCi) in parenthesis.
- (3) The Transport Index (TI) in the supplied box. The TI is entered only on YELLOW-II and YELLOW-III labels.

#### Some Special Considerations for Labeling Requirements

- Radioactive material, excepted packages (e.g., Limited Quantity, Radioactive Instrument and Article) are excepted from labeling.
- The “Cargo Aircraft Only” label is typically required for radioactive materials packages shipped by air [§172.402(c)]

### Marking Packages (49 CFR 172.300-308)

NOTE: IAEA, ICAO, and IMO may require additional hazard communication information for international shipments. This table must not be used as a substitute for the DOT and NRC regulations on the transportation of radioactive materials.

Always Required, Unless Excepted	Sometimes Required	Optional
<ul style="list-style-type: none"> <li>• Proper shipping name</li> <li>• U.N. Identification Number</li> <li>• Name and address of consignor or consignee, unless:                             <ul style="list-style-type: none"> <li>-Highway only and no motor carrier transfers, or</li> <li>-Part of truckload lot and entire contents of freight container are shipped from one consignor to one consignee (§172.301(d))</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• If in excess of 50 kg, Gross Weight</li> <li>• If hazardous substance, “RQ” in association with the proper shipping name</li> <li>• The package type if Type A or Type B (1/2” or greater letters)</li> <li>• The specification-required markings (see §178.350-353)</li> <li>• For approved packages, the certificate ID number</li> </ul>	<ul style="list-style-type: none"> <li>• Both the name and address of consignor and consignee are recommended.</li> <li>• Other markings (e.g., advertising) are permitted, but must be sufficiently away from markings and labeling</li> </ul>

#### Some Special Considerations for Marking Requirements

- Marking is required to be (1) durable, (2) printed on a package, label, tag, or sign, (3) unobscured by labels or attachments, (4) isolated from other marks, and (5) be representative of the hazmat contents of the package.
- Limited quantity packages (§173.421) must bear the marking “radioactive” on the outside of the inner package, or the outer package itself, and are excepted from other marking.
- Empty (§173.428) and Radioactive Instrument and Article (§173.424) packages are excepted from marking.

### DOT Shipping Papers (49 CFR 172.200-205)

NOTE: IAEA, ICAO, and IMO may require additional hazard communication information for international shipments. This table must not be used as a substitute for the DOT and NRC regulations on the transportation of radioactive materials.

Always Required, Unless Excepted	Sometimes Required
<ul style="list-style-type: none"> <li>• The basic description, in sequence                             <ul style="list-style-type: none"> <li>Proper shipping name</li> <li>Hazard Class (7)</li> <li>U.N. Identification Number</li> </ul> </li> <li>• 24 hour emergency response telephone number</li> <li>• Name of shipper</li> <li>• Proper page numbering (Page 1 of 4)</li> <li>• The total quantity (mass), in appropriate units</li> <li>• The name of each radionuclide and total package activity. The activity must be in SI units (e.g., Bq, TBq) or both SI units and customary units (e.g., Ci, mCi).</li> <li>• For each labeled package:                             <ul style="list-style-type: none"> <li>- The category of label used</li> <li>- The transport index of each package with a Yellow-II or Yellow-III label</li> <li>- Shipper’s certification (not required of private carriers)</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• If hazardous substance, “RQ” as part of the basic description</li> </ul>
	Optional
	<ul style="list-style-type: none"> <li>• The type of packaging (e.g., Type B)</li> <li>• Other information is permitted (e.g., functional description of product), provided it does not confuse or detract from the proper shipping name or other required information</li> <li>• Emergency response hazards and guidance information (§§172.600-604) may be entered on the shipping papers, or may be carried with the shipping papers</li> </ul>

#### Some Special Considerations/Exceptions for Shipping Paper Requirements

- Shipments of Radioactive Material, excepted packages, under UN2908-UN2911 (e.g., Limited Quantity, Empty, or Instrument and Article), are excepted from shipping papers. For limited quantities (§173.421), this is only true if the limited quantity is not a hazardous substance (RQ) or hazardous waste.
- Shipping papers must be in the pocket on the left door, or readily visible to a person entering the driver’s compartment and within arm’s reach of the driver.
- For shipments of multiple cargo types, any HAZMAT entries must appear as the first entries on the shipping papers, be designated by an “X” (or “RQ”) in the hazardous material column, or be highlighted in a contrasting color.

## **Appendix O:**

# **Daily Maintenance Checks of Radiographic Equipment**

## Daily Maintenance Check of Radiographic Equipment

A. The radiographer or radiographer's assistant shall perform a daily maintenance check of the exposure device and related radiographic equipment. This inspection will be performed at the beginning of each day of use. Report defective equipment to the RSO immediately. Do not attempt to use defective equipment. After the inspection, document the results of the inspection.

1. Inspect the survey meter for battery check, zero and operation. If batteries are low, replace, and then check for operability. If not able to correct a problem with the survey meter, obtain another meter and start over.
2. Check survey meter with a check source (which should give a reading of \_\_\_\_\_ millirem) (or check with camera \_\_\_\_\_ which should give a reading of \_\_\_\_\_ millirem) as indicated on the survey meter. If reading is not acceptable, obtain another meter and start again.

**Note:** RSO or calibration vendor should determine the acceptable meter reading for each survey meter and post the expected reading on each instrument. This reading shall be obtained and noted at the time of calibration.

3. Inspect the remote-control radiographic equipment as follows:
  - Inspect the cables for cuts, breaks, and broken fittings.
  - Carefully inspect approximately one foot of the drive cable immediately next to the male connector. Take care not to introduce any dirt or dust on the drive cable during this inspection. In addition to the previously mentioned items, the examination of the cable should look for any of the following:
    - Excessive or uneven wearing;
    - Fraying;
    - Unraveling;
    - Nicks;
    - Kinks or bends;
    - Loss of flexibility (abnormal stiffness);
    - Excessive grit or dirt;
    - Stretching;
    - Inspect the crank unit for damage and loose hardware;
    - Check operation of the control for freedom of drive cable movement;

- Inspect the guide tube for cuts, crimps, and broken fittings;
- Survey for radiation levels and record readings. The radiation levels should be about the same as those in the previous day's inspection, unless there has been a source change;
- Check that all safety plugs are in place;
- Inspect the exposure device for damage to fittings, lock, fasteners, and labels; and
- Check for any impairment of the locking mechanism.

4. Record the results of the daily inspection.

**Appendix P:**  
**Model Emergency Procedure**

## Model Emergency Procedure

If the source fails to return to the shielded position or if any other emergency or unusual situation arises (e.g., vehicle accident, off-scale dosimeter, etc.) perform the following:

- Immediately secure the area and post the restricted area at the 0.02 mSv/hr (2 mrem/hr) radiation level; maintain continuous surveillance and restrict access to the restricted area.
- Notify the RSO and/or Management Personnel.
- Take no further actions until instructions are received from the RSO.
- Do not attempt source retrieval until the situation has been discussed with the RSO or other knowledgeable personnel.
- Don't panic. Source retrieval can be performed with very little exposure when properly planned by trained personnel.
- Notify the persons listed below of the situation, in the order shown.

Name*	Work Phone Number*	Home Phone Number*

\* Fill in with (and update, as needed) the names and telephone numbers of appropriate personnel (e.g., the Radiation Safety Officer (RSO), or other knowledgeable licensee staff, licensee's consultant, device manufacturer) to be contacted in case of emergency.

- Follow the directions provided by the person contacted above.

## **RSO and Licensee Management**

Discuss emergency operating procedures, and ensure no operations are conducted until the situation has been discussed with and approved by the RSO or other knowledgeable staff, consultants, or device manufacture. Management should have access to emergency equipment to keep doses to radiographers as low as is reasonably achievable. Emergency equipment may include high range dosimeters, extra lead shielding, remote tongs, etc.

Notify local authorities and DHS as required. DHS notification is required when sources or devices containing licensed material are lost or stolen and when radiographic sources or equipment are involved in incidents that may have caused or threatens to cause an exposure in excess of *s. DHS 157.32(2)* limits. Reports to DHS must be made within the reporting time frames specified by *s. DHS 157.32*.

**Telephone notifications shall be made to DHS at (608) 267-4797 during normal business hours (8 a.m. – 4:30 p.m.). For immediate notifications after normal business hours, DHS’s 24 hour emergency telephone number is (608) 258-0099. Identify the emergency as radiological.**