D Gen Change
3254493

Smiths Detection

# Field Radiation Survey Sheet

| SECTION | PART I – GENERAL PROCEDURE INFORMATION | | | | |
|---|---|---|---|---|---|
| A "PRE-TEST INFORMATION" | NAME AND ADDRESS OF FACILITY OR AIRPORT AND SPECIFIC LOCATION OF X-RAY SYSTEM | | | | |
| | NAME OF FACILITY | PVD T.F. Green State Airport | | | |
| | | Is this Facility Operated Exclusively by the Federal Government? | | | ☐ YES ☒ NO |
| | ADDRESS (Street No., Rural Rt., or Airline and Airport) | 2000 Post Road | | | |
| | CITY | WARWICK | STATE | RI | ZIP CODE 02886 |
| | ROOM NO. or OTHER LOCATION | CK Pt. Lane 3 | CONTACT PERSON | [redacted] | |
| | PHONE NO. | [redacted] | FAX NO. | | |
| | MANUFACTURER | Smiths Detection | MODEL NO. | 6040 STX | |
| | DATE OF MFR. | Sept 2008 | SERIAL NO. | 28523 | |
| | MFR. CERTIFICATION LABEL ATTACHED | ☒ YES ☐ NO | | | |
| B "CABINET X-RAY CLASSIFICATION" | CLASSIFICATION OF CABINET X-RAY SYSTEM | | | | |
| | ☒ Baggage Inspection | ☐ Special Purpose | ☐ General Purpose | ☐ Other | Describe Other: |
| C "POSTINGS & INSTRUCTIONS" | POSTING & INSTRUCTION VERIFICATION (Not Applicable for Systems Operated Exclusively by the Federal Government) | | | | |
| | ☒ State "Notice to Employees" Document Posted | ☒ Operators Instruction Manual on Location | ☐ N/A | | |
| | ☒ Certificate of X-ray Machine Registration on Location | ☒ Cabinet X-Ray Machine Maintenance Schedule Available | | | |
| D "WARNING LIGHTS & INDICATORS" | WARNING LIGHTS & INDICATOR VERIFICATION | | | | |
| | Warning Label Present at Controls Stating: "Caution: X-Rays Produced When Energized" | | | | ☒ YES ☐ NO |
| | Warning Labels Present at Ports Stating "Caution: Do Not Insert Any Part of the Body When System is Energized, X-Ray Hazard" | | | | ☒ YES ☐ NO |
| | Two Indicators Labeled "X-Ray ON" Present at Controls | | | | ☒ YES ☐ NO |
| | At Least One Indicator, Marked "X-Ray ON", is Visible from Each Port, Door, and Access Panel | | | | ☒ YES ☐ NO |
| E "INTERLOCKS" | INTERLOCK VERIFICATION TEST | | | | |
| | The Key for the Key Actuated Control Cannot be removed in Any Mode that Allows X-Ray Generation | | | | ☐ YES ☒ NO |
| | All Doors and Access Panels that were Tested Prevent Generation of X-Rays | | | | ☒ YES ☐ NO |
| | The Use of the ON Control is Necessary to Resume Operation of X-Rays Following Interruption of X-Ray Generation | | | | ☒ YES ☐ NO |
| F "PORTS AND APERTURES" | ACCESS TO PORTS AND APERTURES | | | | |
| | Some Part of the Body Can Be Inserted Through A "Port" into the Primary Beam | | | | ☐ YES ☒ NO |
| | Some Part of the Body Can Be Inserted Through An "Aperture" | | | | ☐ YES ☒ NO ☐ N/A |
| G "BAGGAGE INSPECTION UNITS" | BAGGAGE INSPECTION UNIT CHECKS ONLY | | | | |
| | Means Provided to Ensure Operator Presence at the Control Area which Permits Surveillance of All Ports and Doors During X-Ray Generation | | | | ☒ YES ☐ NO |
| | Means Provided to the Operator for Terminating Exposures of Greater Than One-Half Second and Preventing Additional Exposures of Less Than One-Half Second | | | | ☒ YES ☐ NO |

JJ
non-sched 5X459
BRED 3254493 — NEW Generator

Form # 002.Gen-RUSH-F
Revision Date 03/11/2008

ENTER

smiths

Smiths Detection

**Field Radiation Survey Sheet**

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| SECTION | PART II - SPECIFIC PROCEDURE INFORMATION |
|---|---|
| H "LEAKAGE RADIATION" | LEAKAGE RADIATION - SPECIFIC TEST PROCEDURE # 01 |

Scattering Body Description: ☐ Lucite ☒ Paper ☐ Other — Describe Other:

X-Ray Machine Settings: kV / mA: See Comments

Background: 4 uR/hr

Radiation Survey Instrument Used: Make/Model Number: RAD EYE PRO-ER; Serial Number: 0329; Calibration Date Due: JAN-28-2011

| Survey Location Description | Survey Point | External Surface Exposure Rates (uR/hr) | | Internal Exposure (mR) "Optional" | | Comments |
|---|---|---|---|---|---|---|
| | 1 | 5 | uR/hr | | mR | |
| | 2 | 5 | uR/hr | | mR | |
| | 3 | 5 | uR/hr | | mR | |
| | 4 | 62 | uR/hr | | mR | |
| | 5 | 5 | uR/hr | | mR | |
| | 6 | 4 | uR/hr | | mR | |
| | 7 | 5 | uR/hr | | mR | |
| | 8 | 4 | uR/hr | | mR | |
| | 9 | 4 | uR/hr | | mR | |
| | 10 | 5 | uR/hr | | mR | |
| | 11 | 5 | uR/hr | | mR | |
| | 12 | 4 | uR/hr | | mR | |
| | 13 | 5 | uR/hr | | mR | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

Highest External Surface Exposure Rate Reading: 62 uR/hr — Location Description: Ext Curtains

All External Surface Exposure Rate Readings Are Less Than 500 uR/hr (0.5 mR/hr) IAW 21 CFR 1020.40: ☒ YES ☐ NO

**I "ADDITIONAL INFORMATION"**

ADDITIONAL INFORMATION

| | | | | |
|---|---|---|---|---|
| Overall Condition of Cabinet X-Ray Unit | ☒ SAT | ☐ UNSAT * | * Describe UNSAT Condition | |
| Condition of Lead Curtains | ☒ SAT | ☐ UNSAT * | * Describe UNSAT Condition | |

Other Comments, Recommendations, Corrections, or Problems Encountered

| | High Voltage | Heater Current | Anode |
|---|---|---|---|
| Gen A | +85 kV -83 kV | 508 mA | 737 uA |
| Gen B | +79 kV -77 kV | 476 mA | 686 uA |
| Gen C | +81 kV -78 kV | 462 mA | 695 uA |
| Gen D | +75 kV -76 kV | 453 mA | 663 uA |

Average Commulative Dose / Inspection, 162 mR

SURVEYOR'S NAME (Print: Last, First, Middle Int.: [redacted]

SURVEYOR'S SIGNATURE: [redacted]

DATE OF SURVEY AND INSPECTION: 7-2-10

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