

		BAGGAGE/PARCEL CABINET X-RAY SYSTEM RADIATION LEAKAGE REPORT		FIELD SERVICE ENGINEERS		Form R-0588-3 9/9/09	
1. Name of Facility PORT COLUMBUS INT'L AIRPORT		2. Region CENTRAL		3. Street Address 4600 INT'L GATEWAY		45. RSI W.O.# Deferred W.O.# 3757346	
4. City COLUMBUS		5. State or Province Code OH		6. Zip Code 43219			
7. Room No. or Other Physical Location of System CHECKPOINT B / LANE 1		8. Person Interviewed [Redacted]		9. Telephone Number [Redacted]		10. Fax Number	
11. Manufacture Information & Certification Label Present <input checked="" type="checkbox"/> Yes - Pass <input type="checkbox"/> No - Fail		12. Radiation Measuring Instrument: FSE Shall Attach Copy of Calibration Certificate to This Form Model THERMO Serial No. 295 Calibration Due Date: 9/27/2011					
Manufacturer Rapiscan Systems Inc.		13. System Model No. 620DV		14. Single Source <input type="checkbox"/> Dual Source <input checked="" type="checkbox"/>		15. System Serial No. 7091207	
16. Date of Manufacture Mo. 03 Yr. 2009		18. Facility Owner Has been notified of responsibility for "Application for Registration" with their State Radiation Control Agency <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		19. Customer has been notified of their responsibility for posting their State "Notice to Employees" Document and Posted in Several Conspicuous Locations so Employees Can View <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
17. X-ray Tube Serial Number(s) H-P6852 V-P7198		20. Operator Instructions Available <input checked="" type="checkbox"/> Yes - Pass <input type="checkbox"/> No - Fail		21. Maintenance Schedule Available <input checked="" type="checkbox"/> Yes - Pass <input type="checkbox"/> No - Fail			
22. Warning Label Present at Controls Stating: "Caution: X-Rays Produced When Energized" <input checked="" type="checkbox"/> Yes - Pass <input type="checkbox"/> No - Fail		23. Warning Labels Present at Ports Stating: "Caution: Do Not Insert Any Part of the Body When System is Energized, X-Ray Hazard" <input checked="" type="checkbox"/> Yes - Pass <input type="checkbox"/> No - Fail		24. Two Indicators Labeled "X-Ray On" Present at Controls (including software user interface) <input checked="" type="checkbox"/> Yes - Pass <input type="checkbox"/> No - Fail			
25. At Least One Indicator, Marked "X-Ray On" is Visible from Each Port <input checked="" type="checkbox"/> Yes - Pass <input type="checkbox"/> No - Fail		26. Captured Key: The Key for the Key Actuated Control Cannot be Removed in Any Mode that Allows X-Ray Generation <input checked="" type="checkbox"/> Yes - Pass <input type="checkbox"/> No - Fail					
27. All Doors and Access Panels To the X-Ray Beam Prevent Generation of X-Radiation <input checked="" type="checkbox"/> Yes - Pass <input type="checkbox"/> No - Fail		28. Some Part of the Body Can Be Inserted Through a Port Into The Primary Beam <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
29. Use of X-Ray Control Necessary to Resume Operation Following Interruption <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		30. Means Provided to Ensure Operator Presence at the Control Area X-ray located in a public access area <input checked="" type="checkbox"/> Yes - Pass <input type="checkbox"/> No - Fail Or X-ray located in a non-public access area <input type="checkbox"/> Not Required					
Rapiscan Systems Test Procedure Used: Rapiscan Systems WI-0023-4		31. Scatter Block Description: <input type="checkbox"/> Two (2) Reams Copy Paper <input checked="" type="checkbox"/> Other, Describe: 6 TSA BINS		32. Means Provided to Operator for Terminating Exposures of Greater than One-Half Second and Preventing X-rays (E-Stop Test) <input checked="" type="checkbox"/> Yes - Pass <input type="checkbox"/> No - Fail			
33. X-Ray Generator Settings 160.8 kVp 1.007 mA		Note: All Survey Measurements Shall be Obtained at 5 cm from All External Surfaces and at 5 cm from the Plane of All Access Port Openings or Shroud Extension Openings. Scatter Block shall be Stacked and Positioned Centerline of Primary Beam.					
34.1. Background Radiation: 3 uR/hr		Maximum External Surface Dose Rate Not to Exceed 500 uR/hr at 5 cm from all external surfaces.					
34.3 Record All Readings in uR/hr Unless Otherwise Noted Please see model specific diagram (attached)							
36. Overall Condition of Lead Drapes: <input checked="" type="checkbox"/> SAT - Pass <input type="checkbox"/> UNSAT - Fail Description		37. Overall Condition of Machine: <input checked="" type="checkbox"/> SAT - Pass <input type="checkbox"/> UNSAT - Fail		38. Comments, Corrective Active Actions and/or Recommendations:			
39. Surveyor Name (Print: L, F, MI) [Redacted]		41. Date of Survey 3/4/2011		42. Time of Survey: 1800			
The Surveyor has inspected, tested and certified this x-ray machine is in compliance with U.S. FDA 21 CFR 1020.40 and equivalent international radiation emission leakage standards.		43. [Redacted] have received a copy of this Radiation Survey Report and understand this report for State inspection. Signature: [Redacted] Date: 8 Mar 11					

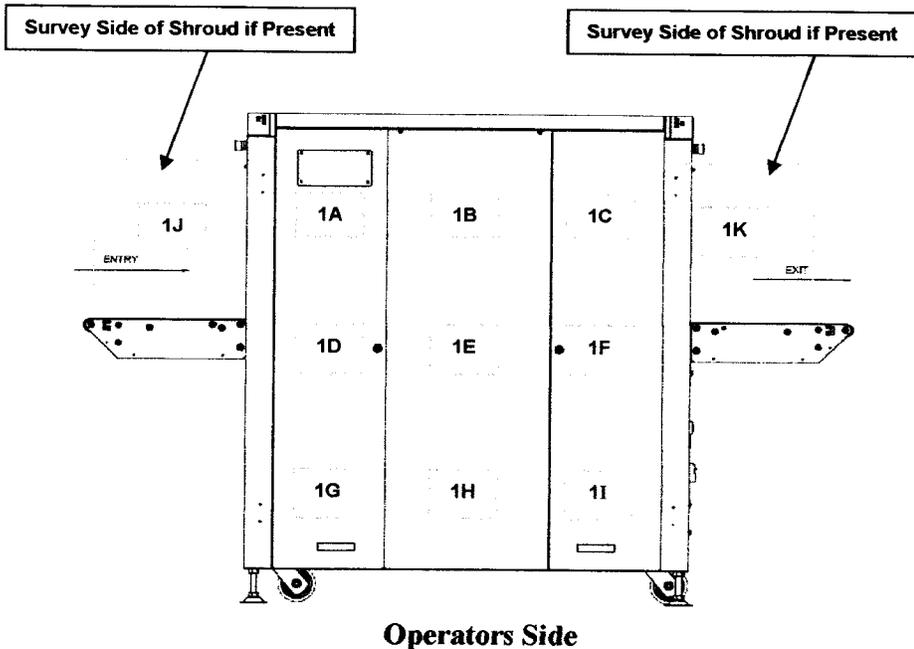
This report is to certify this x-ray unit has been surveyed for radiation leakage emissions and found to be within the regulatory radiation emission limit. The safety features, controls and indicators incorporated in the x-ray unit have been satisfactorily tested and/or inspected. The owner of this x-ray unit is responsible for State Radiation Control Agency compliance (not applicable for facilities exclusively operated by the Federal Government) and for the safe use and routine inspection, general maintenance and cleanliness of this x-ray unit. Only trained and qualified individuals should operate this equipment.

FIELD SERVICE ENGINEERS RADIATION EMISSION SURVEY

United States and Canada External Surface Radiation Leakage Limit is 5.0 uSv/hr at 5 cm (500 uR/hr)

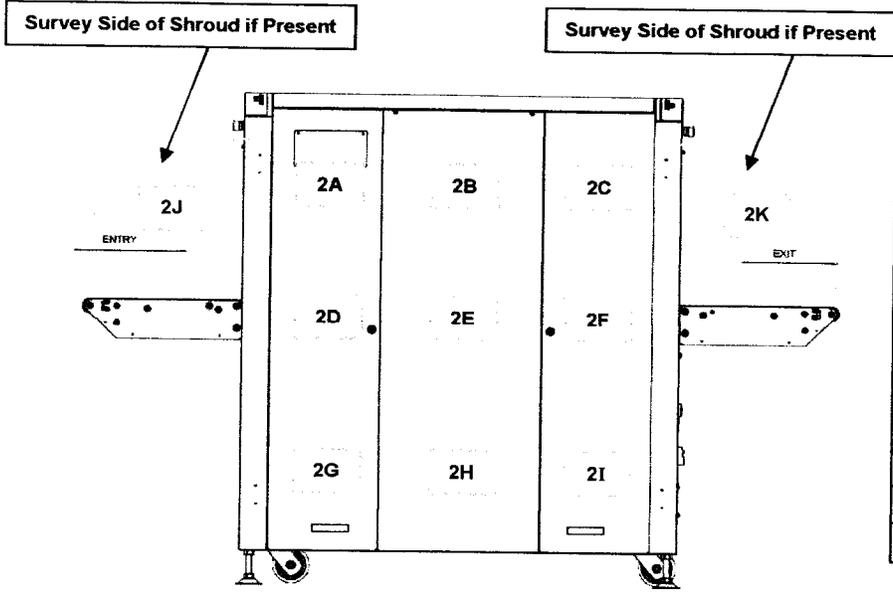
Global External Surface Radiation Leakage Limit is 1.0 uSv/hr at 5 cm (100 uR/hr at 5 cm)

Date: <u>3/4/2011</u>	Location Manufactured: (Check One) Malaysia <input type="checkbox"/> UK <input type="checkbox"/> <input checked="" type="checkbox"/> US	Instrument Model No: <u>THERMO RADEYE</u>
Time: <u>1800</u>	Date of Mfg: <u>MAR 2009</u>	Instrument Serial No: <u>295</u>
Background: uSv/hr (<u>3</u> uR/hr)	Serial No: <u>709 1207</u>	Instrument Calibration Due: <u>9/27/2010 2011</u>
All Measurements Recorded In: uSv/hr <input checked="" type="checkbox"/> uR/hr (Check One)	Settings: <u>1.007</u> kVp <u>160.8</u> mA Settings: <u>1.007</u> kVp <u>160.8</u> mA	Description of Scatter Body: (Check One) <input type="checkbox"/> Paper (2 Reams, 500 sheets each) <input type="checkbox"/> Wood Block (4" x 4" x 12" L) <input checked="" type="checkbox"/> Other <u>6 TSA BINS</u>



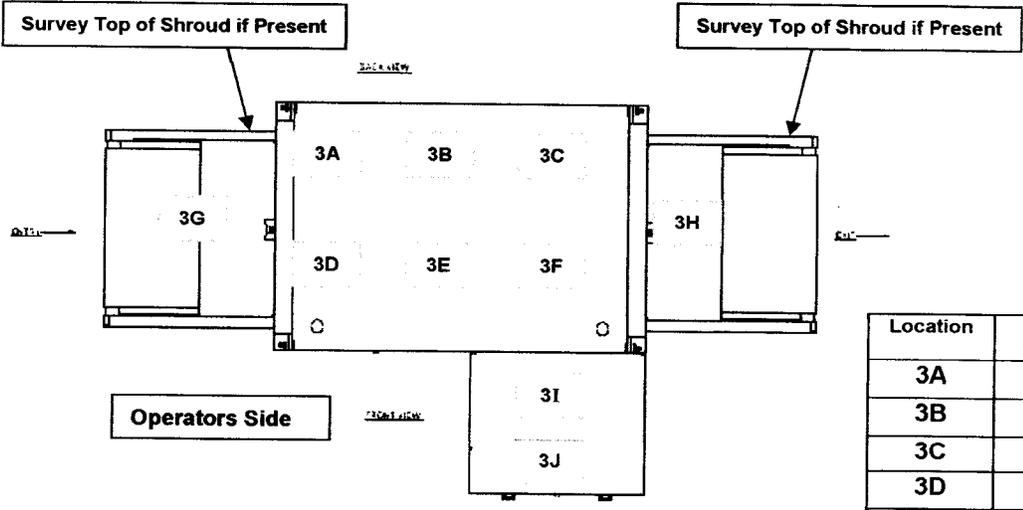
Location	Results NO Scatter Body	Results WITH Scatter Body
1A	19	22
1B	26	40
1C	12	12
1D	20	17
1E	27	33
1F	6	10
1G	8	7
1H	22	29
1I	8	6
1J	8	25
1K	17	26

FIELD SERVICE ENGINEERS RADIATION EMISSION SURVEY



Location	Results NO Scatter Body	Results WITH Scatter Body
2A	15	20
2B	23	26
2C	10	14
2D	13	24
2E	16	27
2F	21	26
2G	10	23
2H	11	13
2I	7	12
2J	17	75
2K	20	43

Non-Operators Side

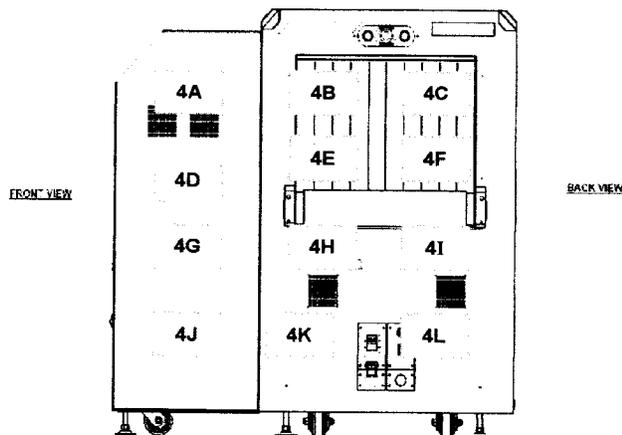


Location	Results NO Scatter Body	Results WITH Scatter Body
3A	29	25
3B	26	31
3C	12	14
3D	14	19
3E	31	28
3F	18	18
3G	7	10
3H	8	10
3I	18	22
3J	10	9

Top View

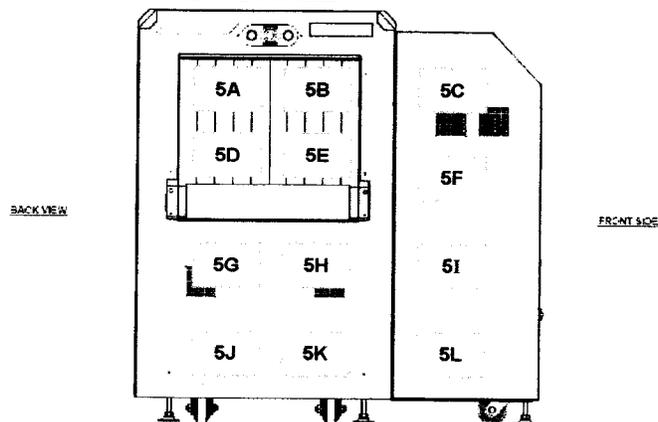
FIELD SERVICE ENGINEERS RADIATION EMISSION SURVEY

EXIT TUNNEL



Location	Results NO Scatter Body	Results WITH Scatter Body
4A	27	22
4B	60	114
4C	73	122
4D	19	23
4E	69	112
4F	72	125
4G	11	19
4H	62	67
4I	59	100
4J	11	14
4K	14	24
4L	17	31

ENTRANCE TUNNEL



Location	Results NO Scatter Body	Results WITH Scatter Body
5A	61	81
5B	57	90
5C	34	37
5D	63	80
5E	61	75
5F	39	51
5G	11	12
5H	17	19
5I	21	32
5J	8	11
5K	6	7
5L	10	12

Instructions:

- If shrouds are NOT installed, radiation measurements shall be taken 5 cm from the lead drapes.
- If shrouds are installed, radiation measurements shall be taken at the imaginary plane of the shroud opening.
- Lead Drapes should touch the conveyor. If they do not, check to verify x-ray radiation is not traveling down the conveyor where the gap exists between the lead drapes and the conveyor surface.
- Survey below the conveyor up against the cabinet near any gaps, mating surfaces, and photo sensor cut-outs.

SURVEY PERFORMED BY



DATE:

3/4/2011