smiths

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	Ronald Reagan Airport			
	Is this Facility Operated Exclusively by the Federal Government?				☒ YES ☐ NO
	ADDRESS (Street No., Rural Rt., or Airline and Airport)	1 Aviation Circle			
	CITY	WASHINGTON	STATE	DC	ZIP CODE 20001
	ROOM NO. or OTHER LOCATION	Terminal B LN7	CONTACT PERSON	[redacted]	
	PHONE NO.	[redacted]	FAX NO.	[redacted]	
	MANUFACTURER	SMITH DECTION	MODEL NO.	6040 ATIX	
	DATE OF MFR.	MARCH 2008	SERIAL NO.	77778	
	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 Facilities 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

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

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

X-Ray Machine Settings: kV: See Comment; mA: See Comment

Radiation Survey Instrument Used: Make/Model Number: INOVISION 451P; Serial Number: 0500; Calibration Date Due: 1-11-12

Background: 5 uR/hr

Survey Location Description	Survey Point	External Surface Exposure Rates (uR/hr)		Internal Exposure (mR) "Optional"		Comments
	1	15	uR/hr		mR	
	2	57	uR/hr		mR	
	3	19	uR/hr		mR	
	4	38	uR/hr		mR	
	5	22	uR/hr		mR	
	6	15	uR/hr		mR	
	7	12	uR/hr		mR	
	8	8	uR/hr		mR	
	9	10	uR/hr		mR	
	10	14	uR/hr		mR	
	11	18	uR/hr		mR	
	12	14	uR/hr		mR	
	13	18	uR/hr		mR	

Highest External Surface Exposure Rate Reading: 57 uR/hr — Location Description: ENT LEFT 2

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	GOOD
Condition of Lead Curtains	☐ SAT	☐ UNSAT *	* Describe UNSAT Condition	GOOD

Other Comments, Recommendations, Corrections, or Problems Encountered

A) 80.15KV, - 80.60KV 400 uA

B) 81.50KV - 81.38KV 727 uA

C) 79.80 KV - 80.11 KV 678 uA

D) 75.20 KV - 75.10 KV 646 uA

MWO 3735633 Avg .81 mR

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

SURVEYOR'S SIGNATURE: [redacted]

DATE OF SURVEY AND INSPECTION: 3-16-11