



## Cabinet X-Ray Unit Radiation Survey Form

WO#: 3735653

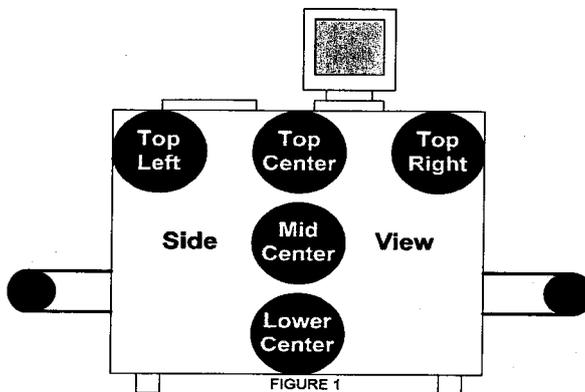
Location: LGA C/P

Background Reading: .003  $\mu$ R/hr

Date: 3/9/11

1. Identify Cabinet X-ray Unit and X-ray Generator information:
  - a. Check appropriate Make/Model box below (if 'Other', record Make and Model on the line provided);
  - b. Record the X-ray Unit's serial number next to the Make/Model;
  - c. With the X-rays turned "ON", record the X-ray Generator Voltage (kV) and Anode Current ( $\mu$ A) Readings;
  - d. Convert Anode Current readings from  $\mu$ A to mA by dividing the  $\mu$ A value by 1000 (example: 100  $\mu$ A = 0.100 mA);
  - e. Transfer the Observed Voltage and Converted Anode Current readings to Box 05, Section 7.2 (Technical Factors) of DOE-0014 FAA Form 165-17.

Make / Model	Serial Number	Observed Voltage and Anode Current	Convert Anode Current to mA for FAA form (divide $\mu$ A by 1000)
<input type="checkbox"/> Smiths Heimann 5030s	s/n _____	+ _____ kV, - _____ kV, _____ $\mu$ A	_____ mA
<input checked="" type="checkbox"/> Smiths Heimann 6040i	s/n <u>40467</u>	+ <u>69.58</u> kV, - <u>69.58</u> kV, <u>398.3</u> $\mu$ A	<u>.398</u> mA
<input type="checkbox"/> Smiths Heimann 7555i	s/n _____	+ _____ kV, - _____ kV, _____ $\mu$ A	_____ mA
<input type="checkbox"/> Rapiscan 519	s/n _____	_____ kV, _____ $\mu$ A	_____ mA
<input type="checkbox"/> Rapiscan 520B	s/n _____	_____ kV, _____ $\mu$ A	_____ mA
<input type="checkbox"/> Rapiscan 522B	s/n _____	_____ kV, _____ $\mu$ A	_____ mA
<input type="checkbox"/> Other _____	s/n _____	_____ kV, _____ $\mu$ A	_____ mA



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2. While holding the meter 5 centimeters (about 2 inches) from the surface, take readings in the area of the circles shown (Figure 1 above) on BOTH sides (Left and Right) of the X-ray machine (total of 10 readings):

**Note:** The Invision 451P Radiation Meter has a default range setting of  $\mu$ R/hr. Meter readings in  $\mu$ R/hr must be converted to mR/hr for this form and DOE-0014 FAA Form 165-17.  
 Conversion: 100  $\mu$ R/hr = 0.100 mR/hr.

FRONT		BACK	
TOP LEFT	<u>.004</u> mR/hr	TOP LEFT	<u>.005</u> mR/hr
TOP CENTER	<u>.002</u> mR/hr	TOP CENTER	<u>.003</u> mR/hr
TOP RIGHT	<u>.005</u> mR/hr	TOP RIGHT	<u>.002</u> mR/hr
MID CENTER	<u>.002</u> mR/hr	MID CENTER	<u>.003</u> mR/hr
LOWER CENTER	<u>.006</u> mR/hr	LOWER CENTER	<u>.004</u> mR/hr

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WO#: 3735653  
X-Ray Serial #: 40467

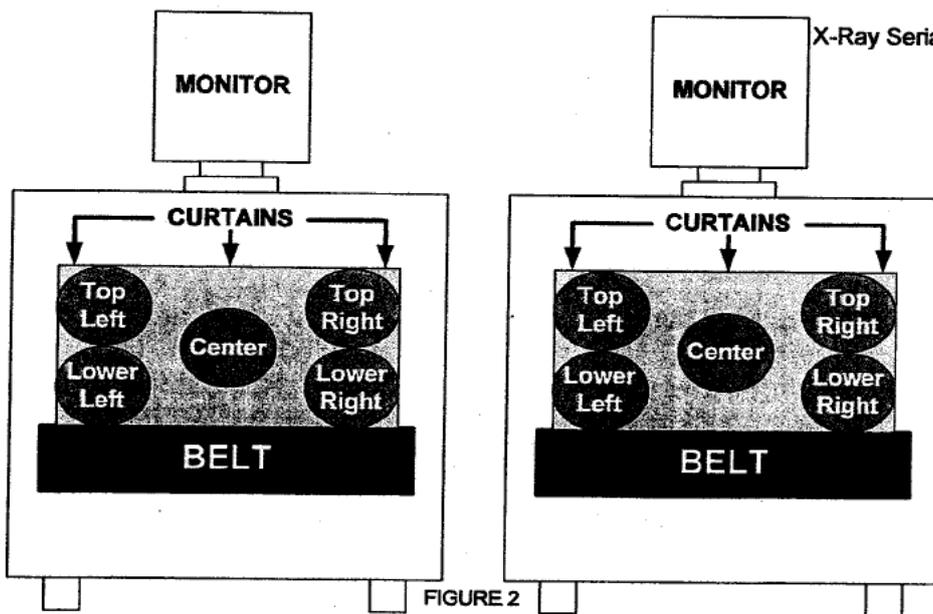


FIGURE 2

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3. While holding the meter 5 centimeters (about 2 inches) from the surface, take readings in the area of the circles shown (Figure 2 above) on **BOTH** sides (ENTRANCE and EXIT) of the X-ray machine (total of 10 readings):

<u>ENTRANCE</u>		<u>EXIT</u>	
TOP LEFT	<u>.012</u> mR/hr	TOP LEFT	<u>.033</u> mR/hr
TOP RIGHT	<u>.003</u> mR/hr	TOP RIGHT	<u>.057</u> mR/hr
LOWER LEFT	<u>.005</u> mR/hr	LOWER LEFT	<u>.040</u> mR/hr
LOWER RIGHT	<u>.006</u> mR/hr	LOWER RIGHT	<u>.045</u> mR/hr
CENTER	<u>.004</u> mR/hr	CENTER	<u>.074</u> mR/hr

4. Transfer the 8 highest readings (out of all 20 readings) to **Box 05, Section 7.3 (Exposure Levels)** of DOE-0014 FAA Form 165-17. Be sure to enter values in mR/hr! (100  $\mu$ R/hr = 0.100 mR/hr).

**Note:** On all X-Ray equipment, any reading of 0.5 mR/h (= 500  $\mu$ R/h) or higher is considered a failure of the Radiation Leak Survey.

5. Perform Cumulative Exposure Test:
- Push the MODE button once on the Inovision 451P;
  - Verify that the meter's scale changes from  $\mu$ R/h to  $\mu$ R (Cumulative Mode);
  - Place the meter on the belt and run through the X-Ray beam 10 times in Cumulative Mode. Record total here: .800 mR
  - Divide the cumulative exposure value by 10 to obtain the Dosage per Inspection;
  - Record this result in Section 8.1 (Additional Information) of DOE-0014 FAA Form 165-17.

Survey Performed By (print your name): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: 3/9/11

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