An inspection was recently conducted to review certain radiation safety activities associated with your use of radioactive materials, including compliance with the safety rules and regulations of Washington University and Washington University Medical Center. Inspections indicating an excessive number of deficiencies or uncorrected repeat deficiencies will be referred to the Radiation Safety Committee for action. Deficiencies identified with a ✓ should be promptly addressed.

POSTING & RECORDS
_ 1. NRC Form 3 not posted
_ 2. Emergency Procedures sign not posted
_ 3. Authorized Personnel Only sign not posted
_ 4. Radioactive Materials sign not posted
_ 5. Radiation Area sign not posted
_ 6. Radiation Safety approved drain not posted
_ 7. Airborne Radioactivity Area sign not posted
_ 8. Exposure levels exceeding 0.2 mR/hr not posted
_ 9. Notice of Violation not posted
_ 10. No written response to Rad Safety Committee
_ 11. Radiation Safety Manual and/or records inaccessible
_ 12. Lab members unaware of Manual/records location
_ 13. Failure to accurately or timely provide RAM Inventory

TRAINING REQUIREMENTS
_ 14. Failure to timely conduct/document ALARA and/or Refresher training
_ 15. Radworker(s) not adequately trained in lab-specific or other procedures
_ 16. Failure to pass applicable radiation safety exam(s) prior to working with radioactive material

DOSIMETRY & BIOASSAY
_ 17. Personnel bioassay(s) delinquent
_ 18. Personnel monitor(s)
  a. delinquent
  b. stored in a radiation work/storage area
  c. location of exposure records unknown
  d. not worn as intended

RADIOACTIVE MATERIAL RECEIPT & TRANSFER
_ 19. RAM receipt records inadequate
  a. ≤ 10%
  b. > 10% ≤ 25%
  c. > 25%
  d. other, see comments
_ 20. RAM ordered/received directly from supplier
_ 21. RAM provided to unauthorized staff
_ 22. Unauthorized RAM removal from institution

RADIOACTIVE MATERIAL USE & STORAGE
_ 23. Accountability records inadequate
  a. ≤ 10%
  b. > 10% ≤ 25%
  c. > 25%
  d. other, see comments
_ 24. RAM inadequately shielded; add lead/plexiglass

_ 25. RAM improperly stored/transported
  a. radwaste overflowing
  b. liquid radwaste needs secondary container
  c. radwaste container(s) not capped
  d. radwaste stored in improper container
_ 26. Failure to request closeout prior to vacating/renovating RAM area, or before repair/disposal/transfer of equipment formerly used with RAM
_ 27. Use or storage of RAM in an unauthorized area
_ 28. RAM not secured against theft
  a. unattended laboratory not locked
  b. unlocked refrigerator/freezer or unattended RAM/radwaste in area of public access

SAFETY PRACTICES, SURVEYS & SUPPLIES
_ 29. Laboratory survey records inadequate
  a. ≤ 35%
  b. > 35% ≤ 70%
  c. > 70%
  d. other; see comments
_ 30. Failure to monitor personnel/area for contamination before leaving area
_ 31. Personnel not wearing gloves and/or proper PPE while working with RAM
_ 32. Failure to use approved fume hood as required
_ 33. Laboratory surfaces inadequately covered
_ 34. Unmarked equipment/labware used for RAM
_ 35. Food/drink/smoking
  a. Clean Area sign not posted or not visible
  b. evidence of eating/drinking/storing food or drink in an area other than a Clean Area
  c. other; see comments
_ 36. Survey instrument inaccessible
_ 37. Survey instrument not properly calibrated
_ 38. Lack of essential decontamination supplies

RADIOACTIVE MATERIAL WASTE DISPOSAL
_ 39. Radwaste disposal records inadequate
  a. radwaste containers
  b. drain disposal
  c. other, see comments
_ 40. Improper packaging/segregation of radwaste
_ 41. Improper disposal of radwaste
_ 42. OTHER see comments

Date ____________________________

Signature of Radiation Safety Inspector ____________________________

Signature of Laboratory Staff Member ____________________________

RADIATION SAFETY OFFICE USE ONLY
☐ Repeat Deficiencies _______Total Points _______