

Date:	RADIATIO	N SAFETY	LABORATORY REVIEW						
PERMITTEE:		NO.:	DEPT:						
LAB BLDG/ ROC	M NO:								
laboratory. Its particular Radiological Say form provides a deficiencies. If extremely imposes An excessive number 1	purpose is to evaluate yo fety Committee (RSC) req mechanism for identifyin any deficiencies are iden rtant that any deficiencie	ur laboratory uirements for ng weaknesse <b>tified, we wil</b> es identified de ncorrected rep	al of the radiation safety practices and procedures in your's compliance with applicable State, Federal, and TAMU the safe use of radioactive materials (RAM). This review is in your laboratory and an opportunity for you to correct conduct a follow-up inspection within 30 days. It is furing this review be promptly addressed and corrected. peat deficiencies may result in disciplinary action.						
	ms of noncompliance or u		ions were identified.						
Items o	Items of noncompliance or unsafe conditions were identified.								
Inactiv	Inactive – No RAM use since last inspection (storage only).								
conditions. If a questions or co	ssistance is desired in cor	recting defici	g details of any items of noncompliance or unsafe iencies, implementing suggestions, or if you have contact Radiological Safety at (979) 845-2132 or						
Follow Up Inspec	tion Performed? [Y] [N	] [N/A]	BY:						
How were items	of noncompliance resolved	?							

☐ All noncompliant items have been resolved. **DATE**\_\_\_\_\_\_\_ **INITIAL**\_\_\_

v	N	NA	POSTINGS AND GENERAL RECORDS FOR SEALED AND UNSEALED SOURCE USERS	Υ	N	NA	RAM SECURITY FOR SEALED AND UNSEALED SOURCE USERS		
H	14	IVA	Are all four signs and postings present?				21. Is appropriate survey instrument available and		
			Are all rour signs and postings present:     Is the EHS Radionuclide Laboratory Procedure				used (if applicable)?		
			Manual and/or Radiological Safety Program Manual				22. Is all RAM used/stored in authorized areas?		
			available?				23. Is all RAM properly shielded?		
			3. Are written protocols available?				24. Is all labware containing RAM marked, and never		
			4. Are permit records available?				left unattended?		
			5. Is the authorized worker list accurate?				25. Is all RAM secured against unauthorized		
			6. Is all food, drink, etc., kept away from designated				access/removal?		
			RAM areas?				RAM WASTE DISPOSAL (IF APPLICABLE)		
			TRAINING	Υ	N	NA	FOR UNSEALED SOURCE USERS		
Υ	N	NA	FOR SEALED AND UNSEALED SOURCE USERS				26. Are adequate disposal records kept? On campus= 1		
			7. Have all RAM users completed appropriate EHS rad				yr; Off-site = life of permit		
			safety training?				27. Is RAM waste properly packaged, labeled, and		
			8. Have all RAM users completed refresher training in				shielded?		
			the last 2 years?				28. Is RAM waste properly segregated?		
			9. Does the permittee provide and document lab-				29. Is RAM properly disposed of?		
			specific instructions to workers?	V	NI.	NI A	INTERNAL/EXTERNAL DOSIMETRY (IF APPLICABLE)		
γ	N	NA	RAM RECEIPT, INVENTORY, TRANSFER	Υ	N	NA	FOR SEALED AND UNSEALED SOURCE USERS		
	IV	NA	FOR SEALED AND UNSEALED SOURCE USERS				30. Are necessary personnel obtaining bioassays?		
			10. Are all RAM receipt records complete?				31. Are personnel wearing dosimetry while handling		
			11. Have permit verification forms been				RAM?		
			completed/returned to EHS?				32. Dosimetry is properly worn, used, and stored?		
			12. Has EHS been notified of receipt of RAM	V	N.	NI A	SPECIAL REQUIREMENTS		
			shipments?	Υ	N	NA	FOR REMOTE SITES AND GAUGE USERS		
			13. All RAM transferred properly (if applicable)?				33. Have access to their current TAMU license?		
Υ	N	NA	SAFETY PRACTICES & SURVEYS				34. Have access to the state regulations 25 TAC		
ı	IV	IVA	FOR UNSEALED SOURCE USERS				289.202 and 289.203 available?		
			14. Have post-use contaminations surveys been				35. Have access to the Radiation Protection Program?		
			performed and documented?				36. Is moisture density gauge use log available?		
			15. Is adequate contamination survey documentation				37. Are survey instrument calibration records available		
			available?				and current?		
			16. Are all RAM users wearing appropriate closed-toe				38. Are leak test reports complete and available?		
			shoes that cover feet completely?				39. Are records of inspections, violations, and		
			17. Gloves?				responses on file?		
			18. Lab coat/equivalent?				40. Have all Gauge users completed DOT training in the		
			19. Are lab surfaces, equipment, sinks, storage for				last 2 years?		
-			RAM covered/marked?	41. <b>C</b>	OTHER	ITEM	IS OF NONCOMPLIANCE:		
			20. Are fume hoods & gloveboxes used and labeled						
<u> </u>			appropriately?						
Y=Compliant. N=Noncompliant. NA=Not Applicable									
<u> </u>									
CC	MM	<b>ENTS</b>	S/SUGGESTIONS:						
l									
l									
	Performed By: Date:								
	Permittee Signature: Date:								