

## **RADIOLOGICAL RECORDS AND REPORTS**

---

### **1.0 SCOPE**

This Performance Assessment Guide for Radiological Records and Reports will be used to carry out the oversight responsibility of the U.S. Department of Energy (DOE) Brookhaven Group. This guide was prepared to assist in conducting performance-based assessments of both DOE prime contractors and subcontractors to ensure that their radiological records and reports programs identify, disposition, and take corrective action on issues that affect satisfactory facility performance. The goals are to ensure that laboratory employees and the public do not experience injuries and illness as a result of radiological activities and that there is little or no economic loss to the Government.

Radiological records and reports assessments will be directed at all prime contractors and subcontractors working at DOE sites. DOE line management must ensure that these contractors comply with DOE Orders and with Federal and State regulations. Information developed from this assessment will determine the degree to which this is being done as well as the effectiveness of the laboratory's program.

### **2.0 ATTRIBUTES AND LINES OF INQUIRY**

This section provides lines of inquiry to help assess whether the laboratory has implemented a program that ensures that radiological records and reports requirements are incorporated into line activities. This section will be used to evaluate the laboratory's independent line organization.

**2.1** The laboratory has identified and established criteria for maintenance of employee records.

- Do exposure records meet the reporting requirements of DOE 5484.1 and 10 CFR 835, Subparts H and I?
- Are employees provided with an annual report of their occupational exposure history?
- Are records of personnel exposures from dosimeter readings or dose reconstruction calculations and methods of determining exposures at the site permanently maintained and retrievable?

**2.2** The laboratory has identified and established criteria for visitor records and reports.

- Are visitors provided a report of their exposure (including zero dose) within 30 days and on request?
- Is a record kept of each visitor's pre-entry orientation?

**2.3** The laboratory has identified and established criteria for records associated with radiological procedures.

- Are records used to determine if ALARA programs are effectively reducing radiation exposures? Are records kept of ALARA meeting minutes and the like?
- Are requirements or commitments regarding radiological practices identified so that they are not inadvertently left out of subsequent revisions?
- Are the rationales for procedure revision kept so that reviewers may determine the appropriateness of proposed changes?

**2.4** The laboratory has identified and established criteria for records associated with radiological surveys.

- Are survey records kept such that supporting information is identifiable (e.g., instrument calibration and surveyor data)?
- Does the survey record filing system tie surveys to specific tasks or chronology of events?

**2.5** The laboratory has identified and established criteria for calibration records.

- Are calibration records sufficient to determine whether the calibration was valid, including as necessary the as-found, as-left, calibrator, traceability to the National Institute of Standards and Technology (NIST)?
- Are maintenance histories maintained for the life cycle of the instrument?

**2.6** The laboratory has identified and established criteria for a records maintenance system.

- Are comprehensive records related to occupational radiation exposure systematically generated and maintained consistent with the *Radiological Control Manual* and established standards?
- Does the records management system incorporate radiological records of personnel exposure and assessment; status of work areas (e.g., radiation surveys and air sample results); technical and administrative bases for radiological programs (e.g., standards, dose evaluation methods, policies); and records of unusual occurrences, deficiency reports, investigations, lessons learned, and the like?
- Do exposure records meet retention requirements of 10 CFR 835?
- Are records maintained in a centralized location and protected from loss such that the level of effort required to retrieve all the records relevant to a given incident (including field monitoring records, air sampling data, bioassay analysis, in vivo measurement, dose assessments, etc.) would be minimal?
- Are documented procedures for record maintenance, including the length of storage, established for all types of radiological records?

**2.7** The laboratory has identified and established criteria for a radiological reporting system.

- Are records of radiological incidents distributed to responsible parties?
- Are corrective actions that result from incident responses followed up by other means when the incident report is closed?
- Are incidents analyzed to determine root cause, with the lessons applied to all aspects of the work to be performed?

### **3.0 STANDARDS AND REQUIREMENTS**

#### **3.1 Specific DOE Orders and Directives.**

- DOE O 0200.1, "Information Management Program."
- DOE O 440.1A, "Worker Protection Management for DOE Federal and Contractor Employees."
- DOE 5700.6C, "Quality Assurance."
- DOE/EH-0256T, "U.S. Department of Energy radiological Control Manual, Rev. 1."

#### **3.2 Title 10 CFR Requirements.**

- 10 CFR 830.120, "Quality Assurance requirements for DOE Nuclear Facilities."
- 10 CFR 835, "Occupational Radiation Protection."

### **4.0 GUIDANCE TO ASSESSOR**

This assessment guide is intended to assist in conducting a performance assessment of radiological records and reports. It is not to be considered as all-inclusive, inflexible, or limiting reasonable assessment concentration when lines of inquiry responses dictate that an area must be more thoroughly probed.

The attributes of a comprehensive program are provided above as lines of inquiry regarding procedures, managers, training, and the like, and should give the assessor some insight as to whether there is a working program in place. Talking to the radiological records and reports workers themselves will let you know if they feel safe working in radiological records and reports and if they feel the controls are adequate.