# RPR-11b Post-Job Laboratory Survey Form

**Building:** _______________

**Room:** _______________

**Program:** ________________

**Date:** ___________________

**Radionuclides present**

**Comments:**

__________________________________________________________________

__________________________________________________________________

__________________________________________________________________

__________________________________________________________________

**Performed by:** ________________  **Signature:** ________________

**Reviewed by:** ________________  **Signature:** ________________

### Swipe Location

<table>
<thead>
<tr>
<th>Swipe</th>
<th>Location</th>
<th>Swipe</th>
<th>Location</th>
<th>Direct</th>
<th>Location</th>
<th>Results</th>
</tr>
</thead>
<tbody>
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### Instrument

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<tr>
<th>Make</th>
<th>Model</th>
<th>Serial</th>
<th>Cal due</th>
<th>BKG Range</th>
<th>Unit</th>
</tr>
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</tbody>
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**Radiation Levels > 5 mrem/hr @ 30 cm**

- **(Y/N)_____** If Y, Radiation Area Posted

**Radiation Levels > 100 mrem/hr @ 30 cm**

- **(Y/N)_____** If Y, Radiation Area Posted

**For Reviewer:**

- Instruments were Source Checked ☐ prior to survey
- Are survey results$^1$ > Action Level  **Y / N**  Are survey results$^2$ > MDA?  **Y / N**

**Action Levels:**

- $\alpha$: 20 dpm/100cm$^2$
- $\beta$: 1000 dpm/100cm$^2$

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$^1$ If swipes are > action level after 2nd analysis notify RSO or designee and decontaminate area.
RPR-11b User Formal Map Survey Form

* On contact Dose Rate (y/n)

$30cm$ To indicate a Dose Rate at 30 cm ($y/n$)

☐ Swipe

# Direct Scan

¹ If swipes are > action level after 2nd analysis notify Authorized User or designee and decontaminate area.