

**SITE ON-THE-JOB (OJT) CHECKLIST FOR HANDS-ON TASKS FOR FIXED INDUSTRIAL GAUGES
40-HOUR & 8-HOUR GAUGE TRAINING GRADUATES**



STUDENT: _____ TEST TAKEN: _____

*(This on-site OJT test is be administered by the site RSO for those employees completing
a 40-hour or 8 hour training course and needing hands-on documentation with fixed industrial gauges)*

Facility: _____

Radioactive materials license number (if applicable): _____

Person conducting checklist: _____ SIGNATURE: _____

(Should be completed by site RSO or other Advanced Authorized User deemed qualified by the RSO)

USE INSTRUMENTATION PROPERLY:

	Completed	Date	Initials (RSO)
1 Check calibration, turn-on, battery check, source check	YES _____	____/____/____	_____
2 Establish background	YES _____	____/____/____	_____
3 Perform survey of gauge	YES _____	____/____/____	_____
4 Prepare survey report form	YES _____	____/____/____	_____
5 Turn off meter, disengage batteries	YES _____	____/____/____	_____
6 Store survey meter properly	YES _____	____/____/____	_____

PERFORM A SHUTTER CHECK:

1 Review Sealed Source & Device Registry for proper operability	YES _____	____/____/____	_____
2 Use appropriate survey meter; or, contact control room	YES _____	____/____/____	_____
3 Survey closest point of the source to the shutter, note radiation levels	YES _____	____/____/____	_____
4 Close shutter	YES _____	____/____/____	_____
5 Note decrease in radiation levels; or, confirm with control room	YES _____	____/____/____	_____
6 Return shutter to original position	YES _____	____/____/____	_____
7 Note shutter check completion on work page or inventory	YES _____	____/____/____	_____

PERFORM A LOCKOUT/TAGOUT:

1 Close shutter ensuring shutter is closed	YES _____	____/____/____	_____
2 Administer a lock according to company policies	YES _____	____/____/____	_____
3 Remove lock according to company policies	YES _____	____/____/____	_____
4 Perform a survey to ensure shutter is open or contact control room	YES _____	____/____/____	_____

PERFORM A LEAK TEST

1 Obtain an authorized leak test kit	YES _____	____/____/____	_____
2 Follow instructions on using items in kit	YES _____	____/____/____	_____
3 Evaluate the gauge and identify leak test points	YES _____	____/____/____	_____
4 Lock out the gauge	YES _____	____/____/____	_____
5 Swipe most appropriate points for potential leakage	YES _____	____/____/____	_____
6 Place swipe in package and seal	YES _____	____/____/____	_____
7 Complete paper work to be sent to analytical company	YES _____	____/____/____	_____
8 Survey the package to ensure compliance with USPS	YES _____	____/____/____	_____

PERFORMING AN INVENTORY:

1 Understand and explain the columns in the inventory sheet	YES _____	____/____/____	_____
Identify the element, mass number, radioactivity, initial activity date, manufacturer, model and serial no. of a gauge	YES _____	____/____/____	_____
2 Assess the location of the gauge	YES _____	____/____/____	_____
3 Assess the environmental conditions around the gauge	YES _____	____/____/____	_____
4 Evaluate the CONDITION of the gauge & explain actions needed:	YES _____	____/____/____	_____
a Explain "GOOD"	YES _____	____/____/____	_____
b Explain "FAIR"	YES _____	____/____/____	_____
c Explain "POOR"	YES _____	____/____/____	_____
5 Demonstrate how to take care and clean a gauge	YES _____	____/____/____	_____
6 Demonstrate that proper POSTING is being used	YES _____	____/____/____	_____

UNDERSTANDING DOSIMETRY REQUIREMENTS

1 Company radioactive materials license does not require dosimetry OR;	YES _____ NO _____ N/A _____
2 Third party dosimetry service used. If YES proceed to 2a-d	YES _____ NO _____ N/A _____
a Demonstrates where to wear a dosimeter	YES _____
b Demonstrates where to store dosimeter when not in use	YES _____
c Demonstrates knowledge as to frequency of change in dosimeter	YES _____

UNDERSTANDING DOSIMETRY REQUIREMENTS (Continued)

- d Explains purpose of the CONTROL badge YES ____/____/____
- OR;
- 3 Company uses the Radiation Work Permit (RWP) to document personnel doses (procedure must be approved by the regulator) YES ____ NO ____ N/A ____
- If YES, 40-hour trained employee completes the following:
- a Demonstrates knowledge of the RWP checklist YES ____/____/____
- b Complete a RWP using a hypothetical dose scenario YES ____/____/____
- c Understand the purpose of "PROXIMITY" RWP in lieu of a badge YES ____/____/____
- d Explain steps when relocating a gauge (if license authorizes) YES ____/____/____
- e Understand maintenance of log documenting dose of employees YES ____/____/____

DEMONSTRATING ADMINISTRATIVE KNOWLEDGE

- 1 Show where "Notice to Employees" is posted YES ____/____/____
- 2 Confirm that employee has read and understands the Radiation Protection Program YES ____/____/____
- 3 Understands the need to read the Radiation Protection Manual annually YES ____/____/____
- 4 Understand why "EMERGENCY PHONE NO." posting must be accurate YES ____/____/____
- 5 Demonstrate knowledge of storage area for gauges & posting requirements YES ____/____/____
- 6 Understands the need for refresher training (at frequency approved by the regulator) before continuing work. *NOTE: Refresher training can be on a topic as decided by the Site RSO. This includes topics of an upcoming campaign, changes in procedures or RPM, changes in regulations, or simply further enhancement in a particular subject.* YES ____/____/____
- 7 Explains what to do in an EMERGENCY YES ____/____/____
- 8 Explains **SECURITY** requirements at the facility YES ____/____/____
- 9 Understands the 3-year refresher training for USDOT HAZMAT to ship and receive radioactive materials and sign shipping papers. *(Note: Not all personnel need USDOT HAZMAT training. Only key personnel who handle, package or sign shipping documents for outgoing or incoming shipments require this training)* YES ____/____/____
- 10 Understands the purpose of the Sealed Source & Device registry for each source YES ____/____/____

COMMENTS:

Completed: RSO Signature _____

Date: _____