



LAWRENCE BERKELEY NATIONAL LABORATORY
Radiation Protection Group
Bldg. 075 Ext. 7652

DISPERSIBLE RADIOACTIVE MATERIAL
ON-THE-JOB TRAINING RECORD

Authorization(s): _____

Employee No./Employee Name: _____

Completion of Radiation Safety Training Requirements:

It is LBNL's policy that each employee receives training and qualification commensurate with the hazards and work tasks associated with the use of radionuclides or radiation generating devices. It is recommended by the RPG that this form, or equivalent, be used to document site/operation specific training given to an individual performing work tasks under a Radiological Work Authorization (RWA). Additionally, this form or other documented OJT records of such training should be kept in the radioisotope journal (RIJ).

Working will be using dispersible radioactive material:

> 10CFR835, Appendix D < 10CFR835, Appendix D (LAS quantities)

Topics Covered (Worker to check "N/A" or complete as applicable):

N/A	Initials	Date Completed	
1. _____	_____	_____	ALARA (Distance / Shielding / Time)
2. _____	_____	_____	Meaning of Labels / Postings / Markings in work locations (Postings – e.g. RCA, RMA, CA, RA, HCA & HRA)
3. _____	_____	_____	Proper Handling of radioactive material
4. _____	_____	_____	Personal Protective Equipment
5. _____	_____	_____	Work & Personnel Survey Requirements (Pre/During/Post)
6. _____	_____	_____	Spills and cleanup
7. _____	_____	_____	Work Areas - Contamination Areas , Radioactive Material Areas, or Designated Work Areas (Postings / Controls required)
8. _____	_____	_____	Dosimetry (e.g. Whole body / Extremity rings / EPD)
9. _____	_____	_____	Shielding (e.g. Temporary / Fixed)
10. _____	_____	_____	Survey Instruments (Checks for use)
11. _____	_____	_____	Daily use / dispose records, quarterly inventory
12. _____	_____	_____	Shipping / Receiving / Procurement of radioactive material
13. _____	_____	_____	Bioassay
14. _____	_____	_____	Other Training (e.g. EHS0471, EHS0473, & EHS0478)

Additional Controls / Requirements (Other Topics Covered):

Employee /Signature _____ Date: _____

Training Provided By
 Name/Signature _____ Date: _____

FILE OJT IN THE RADIOISOTOPE JOURNAL