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SITE ACCESS TRAINING MANUAL

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SITE ACCESS TRAINING MANUAL

This manual has been developed as a study and reference document for both the initial Site Access Training Course and the annual Site Access Refresher Training Course. This manual should be used as a supplementary study guide during attendance at these courses and as a reference document for maintenance of knowledge.

This manual was developed for use by NRC employees and contract personnel. It is not intended for distribution and use outside of these groups.

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Revision Log

This version of the SAT Manual reflects the following changes to the August 1996 edition:

Table of Contents--revised to include section changes as listed below and correct page numbering consistent with these changes.

Chapter 1--Section 1.7 added to provide information on background radiation.

Chapter 2--Section 2.5.2, changed LD 50/30 to LD 50/60. Section 2.6.2.1 changed "nonstochastic" to "deterministic."

Chapter 3--Sections 3.3.3.1-3.3.3.7 added to delineate different dose limits and provide additional narrative describing TEDE and TODE concepts in sections 3.3.3.1 and 3.3.3.2, respectively.
Appendix 3-4,provided updated copy of 10 CFR Part 20.

Chapter 4--Section 4.2.2, corrected last sentence of third paragraph from "factor of four" to "factor of two."
Deleted section 4.6 "Exposure Control Cards."

Chapter 6--Section 6.5.5, deleted reference to INEL.

Chapter 9--Section 9.0.2, added MSDS importance and NRC MOU with OSHA to objectives.

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CHAPTER 1

IONIZING RADIATION

1

1.0 IONIZING RADIATION: TYPES, QUANTITIES AND UNITS

1.0.1 Purpose

Provide an introduction to and understanding of ionizing radiation that may be encountered at a nuclear power station or fuel cycle facility as well as the terminology (quantities and units) associated with these radiations.

1.0.2 Objectives

At the conclusion of this topic, course participants should be able to:

- Describe and discuss the characteristics and features of radiation types, quantities and units,
- Determine the quantity of radioactive material based on radioactive decay half-life.

1.0.3 References

- Chart of the Nuclides
- Health Physics Texts
- NCRP Report No. 93

1.1 Types of Ionizing Radiation

There are five types of ionizing radiation commonly found at nuclear power stations or fuel cycle facilities. They are the alpha particle, beta particle, gamma ray, x-ray and neutron particle. These radiations come from unstable atoms which must release energy and/or mass to reach a stable state. They also originate with the energy release and atom splitting of the fission process.

1.2 Characteristics of Ionizing Radiation

The five types of radiation interact with neutral atoms in a direct or indirect manner to produce ions and are, therefore, referred to as ionizing radiation. Ions are atoms and particles which have either a positive or negative charge. The five types of radiation can also cause excitation (without ionization) of a neutral atom by changing the energy level and stability characteristics of the atom.

1.2.1 Alpha Particles

Alpha particles have the following characteristics:

- Identical in composition to a helium nucleus; consists of two neutrons and two protons,
- Large and massive particle (4 AMU or approximately 8000 times the mass of a beta particle) with a double positive charge,
- Very energetic (all start with energies in the MeV range) and have the highest ionization potential of the five types of radiation,
- Least penetrating of the ionizing radiations. Because alpha particles are heavy, they travel in a relatively straight line. However, due to their large size and high charge they can be stopped by a few centimeters of air, a piece of paper, and the dead layer of skin (epidermis),
- Present an internal radiation hazard when they are in close contact with live tissue, but are not an external hazard because they do not penetrate the epidermis to reach live tissue, and
- Source of alpha particles is primarily the decay of heavy radionuclides such as, U-235, Pu-239, Nd-144.

1.2.2 Beta Particles

Beta particles have the following characteristics:

- Composition similar to that of an electron but originate inside the nucleus,

- Very light particles (mass of an electron, about 0.0005 AMU) with either a positive charge (+) or negative charge (-), depending on decay scheme. However, negative beta emission is the predominate mode of decay,

- Energies range from keV to MeV and they have a lower ionization potential than alpha particles but higher potential than the remaining three types of radiation,

- Travel much greater distances in air than alpha particles but are still a relatively low penetrating radiation. They are stopped in a few meters of air, by a few millimeters of tissue or plastic, and thinner sheets of aluminum. Since atoms are surrounded by negative charged electrons, the beta particles (low mass and negative charge) are easily deflected by atoms and travel a "crooked path",

- Constitute an external radiation hazard to the skin and an internal hazard to tissue, and

- Source of beta particles is the decay of activation and fission products such as, Fe-59, I-131, Cs-137, C-14, Sr-90 (no gamma), Co-58.

1.2.3 Gamma Rays

Gamma rays have the following characteristics:

- Electromagnetic radiation consisting of pure energy traveling at the speed of light,

- No charge, no rest mass, and a low ionization potential,

- Originate within the nucleus of atoms with energies in the keV to MeV range. Most gamma rays are emitted concurrent with beta particle decay,

- Most penetrating of the five radiation types and travel an extensive distance in air (hundreds of meters) and tissue. Since the gamma has no charge, it generally travels in a somewhat straight path,

- Gamma rays are both an external and internal hazard. Most of the radiation dose received by workers and visitors at nuclear power plants is from gamma radiation, and

- Source of gamma rays is the decay of activation and fission products such as, Fe-59, Co-60, Kr-85, Xe-133, Cs-137.

1.2.4 X-rays

Very similar to gamma rays. The main difference between them is that X-rays originate outside the nucleus while gamma rays originate within the nucleus.

1.2.5 Neutrons

Neutrons have the following characteristics:

- A neutral particle with a mass approximately equal to that of a proton (1 amu),

- Due to lack of charge, high energy neutrons travel an extensive distance in air and tissue and are highly penetrating, but less than gamma and x-rays,

- They have a wide range of energies (less than an eV to MeV) and their travel path becomes more "crooked" as they slow down. Neutrons have the lowest ionization potential of the five types of radiation.

- Both an external and internal hazard, but a neutron source inside the body is extremely unlikely,

- Neutrons are unique, as compared to the above four types of radiation, in that a neutron will decay into a proton and beta (-) particle pair after about 10 minutes (if still a free neutron), and

- Source of neutrons is primarily the nuclear fission of reactor fuel, U-235 and U-238. A few other nuclear reactions such as the bombardment of beryllium with alpha particles, spontaneous fission of Cf-252 and Pu-239 are used as neutron sources.

1.2.6 Summary of Characteristics

Ionizing radiation characteristics are summarized in Table 1-1.

1.3 Quantities and Units

A quantity can be considered a description of a physical concept or principle whereas a unit is the magnitude or measure of that quantity. For example, volume is a quantity and the liter is a unit of volume. Conversion factors for international (SI) units (becquerel, coulombs/kg, gray and sievert) are provided in parentheses where applicable.

1.3.1 Radioactivity (Curie)

A quantity describing the number of decays occurring per unit time. A widely used unit of radioactivity is the curie (Ci) which is equal to 37 billion decays per second (dps). Often, smaller, more convenient units of measure such as the millicurie (one-thousandth of a curie), and the microcurie (one-millionth of a curie) are used. (1 becquerel (Bq) = 1 dps, 1 Ci = 3.7×10^{10} Bq)

1.3.2 Specific Activity (Curie per Gram)

The concentration of radioactive material expressed as an activity per unit mass. This quantity indicates how much material is required to achieve a certain decay rate. Usually, the higher the specific activity, the greater the hazard.

1.3.3 Half-Life ($T_{1/2}$)

Characterizes the rate of decay of a radionuclide by defining the length of time required for half of the radioactive atoms to decay. The half-life is unique to each radionuclide. For instance, I-131 has a half-life of 8 days. After 8 days, only one half of the I-131 atoms remain. Similarly, following 16 days, only 1/4 of the initial activity remains.

1.3.4 Absorbed Dose (rad)

A measure of the energy deposited in tissue by ionizing radiation. The unit for absorbed dose is the rad, an acronym from radiation absorbed dose. (1 gray = 100 rad)

1.3.5 Dose Equivalent (rem)

A term used to recognize the fact that not all types of radiation are equally effective in producing biological change or damage, even when the absorbed doses are equal. The dose equivalent, in units of rem, is obtained by multiplying the absorbed dose in rad times a conversion factor (technically referred to as the quality factor) which weighs each type of radiation according to its ability to produce biological damage in a living system. The rem is an acronym from roentgen equivalent man. (1 sievert = 100 rem)

rem = rad x Q

1.3.6 Quality Factor (Q)

A factor which accounts for differing biological damage from the same absorbed dose. It is a linear-energy-transfer (LET) factor. That is, the radiation types that have higher LETs (transfer higher amount of energy over a short distance) have the higher Q's. The quality factors for the 5 types of ionizing radiation discussed herein are

shown below:

Radioactive Type	Quality Factor
alpha particle	20
beta particle	1
gamma and X-ray	1
neutron	10

1.4 Exposure,

The Roentgen (R) is no longer an officially recognized radiation unit. Historically, it has been defined as a quantity expressing the intensity of X-ray or gamma ray radiation in terms of their ability to ionize air.

The average atomic number for soft tissue is not greatly different from air, and therefore, for photon energies in the range of 0.1 to 10 MeV, one Roentgen is approximately equal to one rad and because the quality factor is 1 for X-ray and gamma ray radiations, then one rad is 1 rem:

1 r ~ 1 rad ~ 1 rem

This relationship is not valid for gamma and X radiation interactions in hard tissues (e.g. bone), energies outside this range or types of radiation other than gamma and x-rays.

You will still see the Roentgen used on radiation survey meter scales and pocket chambers, but the Roentgen cannot be used on dose records. Instead, the units of rad or rem are required to be used.

1.5 Rates

Exposure, absorbed dose, and dose equivalent values are often measured in terms of time. That is, the rate at which the exposure or dose is occurring:

$$\text{dose rate} = \frac{\text{dose}}{\text{time}} \text{ (mrem/hour)}$$

and

$$\text{time to reach a dose} = \frac{\text{dose allowed}}{\text{dose rate}}$$

1.6 Summary of Quantities and Units

Radiation quantities and units are summarized on Table 1-2.

1.7 Background Radiation

The average background radiation levels are approximately 360 mrem in a year, or about 1 mrem per day. These rates vary based on location with cities at higher elevation having higher cosmic radiation due to less atmospheric shielding. In addition, background radiation levels vary due to the amount of radioactive material in the soil.

The average annual effective dose equivalent for the U.S. Population is as follows:

Natural Background:
- Radon - 200 mrem/y
- Cosmic - 27 mrem/y
- Cosmogenic - 1 mrem/y
- Terrestrial - 28 mrem/y
- Internal - 39 mrem/y

Occupational - 0.9 mrem/y
Nuclear Fuel Cycle - 0.05 mrem/y
Consumer Products - 5 to 13 mrem/y
Environment - 0.06 mrem/y
Medical:
- Diagnostic X-rays - 39 mrem/y
- Nuclear Medicine - 14 mrem/y

Approximate Total - 360 mrem/y

TABLE 1-1

CHARACTERISTICS OF IONIZING RADIATION

TYPE	SYMBOL	COMPOSITION	REST MASS (amu)	CHARGE	TYPICAL ENERGIES	RANGE (air)	RANGE (tissue)	PRIMARY HAZARD
Alpha Particle	α	2p + 2n	4	+2	4-8 MeV	few centimeters	50-70 micrometer	internal
Beta Particle	β	electron	0 00055	±1	0.018-4 MeV	up to a few meters	few millimeters	external and internal
Gamma Ray	γ	electromagnetic ray	0	0	0.01-2 MeV	a few hundred meters	about 1 meter	external and internal
X-Ray	x	electromagnetic ray	0	0	10 eV-0.1 MeV	a few hundred meters	about 1 meter	external and internal
Neutron	n	free neutron	1	0	.025 eV-5 MeV	a few meters	about 0.1 meter	external and internal

TABLE 1-2A

HEALTH PHYSICS QUANTITIES AND UNITS

QUANTITY	SYMBOL	DESCRIPTION	UNIT
Activity	A	Rate of decay of unstable nuclei	curie (Ci) or becquerel (Bq) (1 Ci = 3.7 x 10^{10} dps) (1 Bq = 1 dps)
Specific Activity	$\frac{A}{m}$	Activity per unit mass	curies/gram
Half-Life	$T_{1/2}$	Time required for the activity of the sample to decrease to one-half of the starting value	time (seconds, years, etc.)

TABLE 1-2B

HEALTH PHYSICS QUANTITIES AND UNITS

QUANTITY	SYMBOL	DESCRIPTION	APPLICABLE RADIATIONS	APPLICABLE MEDIUM	SPECIAL UNIT
Absorbed Dose	D	Amount of energy deposited in matter by ionizing radiation	all types	any energy absorbing material*	rad gray (Gy) 1 Gy = 100 rad
Dose Equivalent	H	Amount of energy deposited in a living system modified to better assess the biological effect of a given absorbed dose	all types	human	rem seivert (Sv) 1 Sv = 100 rem
Quality Factor	Q	Conversion factor from absorbed dose to dose equivalent for a given type and energy of radiation	all types	human	$\frac{\text{rem}}{\text{rad}}$

*Code of Federal Regulations specifies that the rad applies to energy deposited in tissue

CHAPTER 2

BIOLOGICAL EFFECTS

2

2.0 BIOLOGICAL EFFECTS

2.0.1 Purpose

Provide a brief overview of the Biological Effects resulting from exposure to Ionizing Radiation.

2.0.2 Objectives

At the conclusion of this section, you should be able to:

- Describe direct and indirect radiation effects,
- Discuss stochastic and non-stochastic effects,
- Explain the difference between high dose biological effects and low dose effects,
- Summarize the important aspects of the three acute radiation syndromes,
- Specify the LD50/60 and explain its significance,
- Summarize the three possible consequences of exposure to low doses of radiation,
- Describe the low dose risk assessment model adopted by the NRC, and
- Specify the recommended radiation exposure limit for developing embryos.

2.0.3 References

- USNRC Regulatory Guide 8.29, "Instruction Concerning Risks from Occupational Radiation Exposure"
- USNRC Regulatory Guide 8.13, "Instruction Concerning Pre-Natal Radiation Exposure"

2.1 Introduction

Biological effects of radiation are typically divided into two categories; High Dose (Acute Exposure) and Low Dose (Chronic Exposure). However, there is actually only one biological effect and that is the effect of radiation on cells. High doses tend to kill cells while low doses tend to damage or change them.

High doses can kill so many cells that tissues and organs are damaged. This in turn causes a rapid "Whole Body" response or Acute Radiation Syndrome (ARS). This differs from the cellular changes produced by low doses which don't cause an immediate problem to any body organ. At least not until those "cellular changes" develop into cancer many years later.

This means that the so called "Whole Body" response is actually just an expression of the cumulative lethal effect of radiation on many individual cells.

2.2 Radiation Effects

Although we tend to think of biological effects in terms of the effect of radiation on living cells, in actuality, ionizing radiation, by definition, interacts only with atoms by the process of ionization. Thus, all radiation effects begin with the consequence of radiation interactions with the atoms of which cells are made. As a result, radiation effects on humans proceed from the lowest to the highest level:

- Atoms,
- Molecules,
- Cells,
- Tissues,
- Organs, and
- Whole Body

Even though all subsequent biological effects can be traced back to the interaction of radiation with atoms, there are, in reality, two mechanisms by which radiation ultimately affects cells. These

two mechanisms are commonly called direct and indirect effects.

2.2.1 Direct Effects

If radiation interacts with the atoms which form cellular components critical to the survival of the cell, we refer to this as a direct effect. An example may be the interaction of radiation with the atoms forming the genetic material which insures the ability of the cell to reproduce and thus survive. If enough atoms are affected such that the chromosomes do not replicate properly or there is a significant alteration in the deoxyribonucleic acid molecule (DNA - the genetic component which governs the cell's function) then the cell may be destroyed by "direct" interference with its life sustaining system.

2.2.2 Indirect Effects

Recall that the human body is mostly water. If an individual is exposed to radiation, the probability of the radiation interacting directly with critical cellular components as described above is very small. This is evident since these critical components make up such a small portion of the cell. However, that same radiation event is more likely to interact with a water molecule (composed of hydrogen and oxygen atoms) which constitutes a major portion of the body's volume.

When radiation interacts with water it produces what are termed free radicals (H, O, OH etc.) by breaking the bonds which hold the H_2O molecule together. These free radicals recombine forming some benign chemical compounds but also some very toxic ones. In particular, hydrogen peroxide (H_2O_2) may be formed which can destroy the cell. Thus, when exposed to ionizing radiation, the indirect method of cell destruction is by far the most likely to occur.

2.3 Cell Sensitivity

Not all living cells are equally sensitive. From the perspective of direct cell killing, those which replicate rapidly are more sensitive than those which are dormant. This is evident since replicating cells require that the DNA information be correct in order for the cell's progeny to survive. A direct interaction of radiation would result in the death of such a cell, whereas a direct interaction with the DNA of a dormant cell would have little effect. As a result, the relative sensitivity of living cells can be predicted according to their rate of replication. This yields the following hierarchy:

- Lymphocytes and Blood Forming Cells - most sensitive,
- Reproductive Cells and Gastrointestinal (GI) Cells - very sensitive, and
- Nerve and Muscle Cells - least sensitive.

The turnover rate of these cell systems is ranked from fastest to slowest.

2.4 Organ Sensitivity

The sensitivity of the various organs of the human body correlate with the relative sensitivity of the cells from which they are composed. This yields the following hierarchy:

- Blood Forming Organs - most sensitive,
- Reproductive and Gastrointestinal Tract Organs - very sensitive,
- Skin - sensitive, and
- Muscle and Brain - least sensitive.

Its important to understand that the rate of division of the cells forming or being produced by an organ system is not the only criterion determining overall sensitivity. The relative importance of the organ system to the overall well being of the body is also important. Thus, even though the skin has a high turnover rate, it is considered a lesser risk because it is not quite as important as the blood, GI and reproductive cell systems to the

survival of the body.

An example of a sensitive cell system is a malignant tumor which we can assume is composed of cells in a roughly spherical configuration. The outer layer of cells is rapidly dividing and also has a good blood supply and hence lots of oxygen.

As already noted, cells are most sensitive when they are dividing and the presence of oxygen increases sensitivity. Anoxic cells (cells with insufficient oxygen) tend to be dormant, sluggish and inactive such as the cells located in the interior of a tumor.

As the tumor is exposed to radiation it "shrinks" meaning that the outer layer of rapidly dividing cells is destroyed while the inner dormant cells which are less sensitive to the radiation survive. By extending the radiation treatment of the tumors over time, the outer cells are destroyed and the inner cells are given time to develop a good blood supply and become oxygen rich. Another reason for extending the treatment time is to give healthy cells which must also be exposed to the radiation a chance to repair any radiation damage. Using this technique, radiation therapy becomes a very effective means of cancer control.

Besides malignant tumors, there is also another "growth" which consists of rapidly dividing cells with a good blood supply and lots of oxygen. Unfortunately, this "growth" is the developing embryo of a pregnant female. Therefore, those conditions, which, on the one hand, make a malignant tumor desirably sensitive to radiation exposure, on the other hand, also make the developing embryo undesirably sensitive to radiation. Although similar in circumstance, the consequences of radiation exposure are dramatically different.

2.5 High Doses

Although we tend to associate high doses of radiation with catastrophic events such as nuclear weapons explosions, there have been documented cases of individuals dying from exposure to high doses of radiation resulting from workplace accidents and other tragic events. Some examples of radiation worker deaths which have occurred include criticality accidents and irradiator accidents. An example of a non-occupational accident occurred in Goiania Brazil where an abandoned medical radiation therapy source was cut open by individuals who did not know what it was. Contamination was spread over a large area and several members of the public died as a result of exposure to the radiation. Although the Chernobyl disaster involved radiation workers, it is a special case since most of the radiation casualties were emergency response personnel (firefighters) rather than the plant workers.

2.5.1 Whole Body Effects

Whole Body sensitivity depends on the most sensitive organs which, in turn, depend on the most sensitive cells. The most sensitive organs are blood forming (also known as hematopoietic) and GI.

The biological effects of radiation exposure depend on:

- Total dose,
- Time interval over which the dose is received,
- Tissue volume exposed, and
- Type of radiation.

The biological effects of radiation exposure increases as the:

- Dose increases,
- Tissue volume exposed increases,
- Time interval between beginning and end of dose decreases (i.e. acute dose yields less opportunity for cells to repair damage), and

- LET (linear energy transfer) of the radiation increases (i.e. more energy deposited per unit distance traveled within vital organs).

2.5.2 LD50/60

The LD50/60 is the dose at which 50% of those exposed are likely to die within 60 days without medical treatment. The LD50/60 is approximately 400 rad of penetrating radiation received by the whole body within a short time interval. Beginning at about 200 rad, some exposed individuals may die while above about 600 rad nearly everyone exposed dies. Although medical treatment can influence the dose response curve, medical treatment is only effective for doses below about 1000 rad. Acute exposures above about 1000 rad are usually fatal.

The LD50/60 does not indicate any one individuals probability of survival but provides a statistical estimate of the consequences when a large population is exposed.

It is sometimes difficult to understand why some people die while others survive after being exposed to the same dose. The principal explanation is the health of the individuals at the time of exposure and their ability to combat the incidental effects of radiation exposure such as the increased susceptibility to infections.

2.5.3 Acute Radiation Syndrome (ARS)

Although the ARS may occur if only specific portions of the body are exposed to radiation, it is not likely to occur unless major critical organs are involved which is the case for a whole body exposure.

2.5.3.1 Symptoms

The initial (prodromal) signs and symptoms of the ARS are nausea, vomiting, fatigue and loss of appetite. Below about 200 rad, these symptoms may be the only indication of radiation exposure. Unfortunately, these symptoms are no different from those produced by a common viral infection (flu).

2.5.3.2 Syndromes

In the ARS, there are three levels of effects (syndromes):

- Hematopoietic (Blood cells - most sensitive,
- Gastrointestinal (GI cells - very sensitive), and
- Central Nervous System (Brain/Muscle cells - insensitive).

These three syndromes are summarized below.

2.5.3.2.1 Hematopoietic (Blood System) Syndrome

- Organ Exposed - Bone Marrow
- Threshold - about 100 rad
- Duration of Initial Symptoms - about 2-3 days
- Latency Period (feeling OK) - about 2-3 weeks
- Prognosis - within 2-8 weeks death possible over 200 rad
- Effects - blood changes detectable by medical evaluation
- Cause of Death - infection, bleeding, anemia
- Response - transfusions, antibiotics, isolation, bone marrow transplant

2.5.3.2.2 Gastrointestinal (GI) Syndrome

- Organ Exposed - Intestinal lining (villi)
- Threshold - about 500 rad
- Duration of Initial Symptoms - about 2-3 days
- Latency Period (feeling OK) - about 3-5

days
- Prognosis - within 3-14 days death likely from this syndrome for doses over 1,000 rad
- Effects - nausea, vomiting, diarrhea (in addition to blood system syndrome effects)
- Cause of Death - infection, bleeding, dehydration, electrolyte imbalance, circulatory collapse
- Response - None, except to make the individual comfortable

2.5.3.2.3 Central Nervous System (CNS) Syndrome

- Organ Exposed - Brain
- Threshold - about 2,000 rad
- Duration of Initial Symptoms - not much time for initial symptoms - possible disorientation
- Latency Period (feeling OK) - about 15 min-3 hrs
- Prognosis - within 3 days death likely from this syndrome for doses over 5,000 rad
- Effects - lethargy, convulsions, tremors, ataxia (loss of muscle control), coma (in addition to effects of blood system syndrome and GI syndrome)
- Cause of Death - respiratory/circulatory collapse
- Response - None, except to make the individual comfortable

The CNS syndrome is sometimes referred to as the Cerebro-Vascular Syndrome since it now appears that the principal effect is the brains inability to control muscles such as the heart (blood circulation) or direct muscle dysfunction.

As noted above, there is no response possible if the dose received places the victim in the GI or CNS syndrome range. That is why bone marrow transplants and other medical treatments are only effective if the dose is such that the patient is suffering only from the hematopoietic syndrome. The threshold for the GI syndrome is about 500 rad but death becomes a certainty only above about 1,000 rad.

2.5.4 Other High Dose Effects

There are several other effects that are not part of the ARS. Some of these are skin effects, cataracts and sterility.

2.5.4.1 Skin Effects

Skin effects include:

- Erythema (reddening like a sunburn),
- Dry desquamation (peeling),
- Moist desquamation (blistering), and
- Epilation (hair loss).

Skin effects are more likely with low energy x or gamma radiation or beta radiation. The energy of the radiation is mostly deposited in the skin surface. The doses required are relatively high, the threshold is about 300 rad.

2.5.4.2 Cataracts

Another effect is cataracts (opacities over the lens of the eye). Cataracts appear to have a threshold of about 200 rad before they are formed. Neutrons are especially effective in producing cataracts because they have a high quality factor (biological effectiveness) and the eye has a high water content which is particularly effective in stopping neutrons.

2.5.4.3 Sterility

Sterility may be caused by radiation in both males and females. In either case it requires significant doses (on the order of hundreds of rad) to the reproductive cells to produce sterility. In males, at the lower end of the required dose range, sterility may be temporary with a gradual return to

normal. At the upper end of the dose range (approximately 400 rad), sterility may be permanent for both males and females.

2.5.5 High Dose Summary

Radiation effects cells. High doses of radiation effect many cells which result in tissue/organ damage which ultimately yields one of the Acute Radiation Syndromes. Even normally radioresistant cells such as those in the brain cannot withstand the cell killing capability of very high radiation doses.

2.6 Low Doses

Radiation workers as well as members of the public are far more likely to receive low doses of radiation spread out over their entire lives. The principal effect of low doses of radiation (below about 10 rad) received over extended periods of time is non-lethal cell mutations with the greatest concern being the induction of cancer.

There are three general categories of effects resulting from exposure to low doses of radiation. These are:

- Genetic - The effect is suffered by the future offspring of the individual exposed,
- Somatic - The effect is suffered by the individual exposed. Since cancer is the primary result, it is sometimes called the Carcinogenic effect, and
- In-Utero - Some mistakenly consider this to be a genetic consequence of radiation exposure because the effect is suffered by a developing embryo/fetus. However, this is actually a special case of the somatic effect since the embryo/fetus is the one exposed to the radiation.

2.6.1 Genetic

This effect involves the mutation of very specific cells, namely the sperm and egg cells. Mutations in these reproductive cells are passed to the offspring of the individuals exposed.

Some examples of mutagenic agents are:

- Physical - Radiation,
- Chemical - e.g., nitrous acid, and
- Biological - Viruses.

One very important fact to remember is that radiation increases the spontaneous mutation rate but produces no new mutations. Therefore, despite all of the hideous creatures purportedly produced by radiation in the science fiction literature and cinema, no such transformations have been observed in humans.

The mutation rate appears to be dependent on dose with no threshold. Scientific experts unanimously agree that this linear no-threshold model is the best approximation to the available data from animal studies and human populations exposed to high doses. The NRC accepts this model.

Although some mutations are lethal or harmful there is nothing that guarantees that all mutations will be bad. However, the Biological Effects of Ionizing Radiation (BEIR) Committee states that it is prudent to assume that all mutations are bad and thus radiation exposure should be held to the absolute minimum or As Low As Reasonably Achievable (ALARA). This is particularly important since it is believed that risk is directly proportional to dose without any threshold.

Despite the above statements, one very important point to consider is that genetic effects from low dose exposures have not been conclusively observed in human studies. One possible explanation is that mutations in the reproductive

cells produce such significant changes in the fertilized egg that the result is a non-viable organism which is spontaneously aborted during the earliest stages.

Genetic risks from 1 rem of radiation exposure to the reproductive organs are approximately 50-1000 times less than the spontaneous risk for various anomalies.

2.6.2 Somatic (Carcinogenic) Effects

From an occupational risk perspective, this effect is most significant since the individual exposed (usually the radiation worker) suffers the consequences (typically cancer). As noted in USNRC Regulatory Guide 8.29, this is also the NRC's greatest concern.

Some examples of carcinogenic agents are:

- Physical - Radiation,
- Chemical - Cigarettes, and
- Biological - Viruses.

Radiation induced cancer is well documented. Many studies have been accomplished which directly link the induction of cancer and exposure to radiation. Some of the populations studied and their associated their associated cancers are:

- Lung Cancer - uranium miners,
- Bone Cancer- radium dial painters,
- Thyroid Cancer - therapy patients,
- Breast Cancer - therapy patients,
- Skin Cancer - radiologists, and
- Leukemia - atom bomb survivors, in-utero exposures, radiologists, therapy patients.

2.6.2.1 Risk

The risk of cancer is determined from real data at high doses and computed estimates at low doses (USNRC Regulatory Guide 8.29 provides an extensive discussion of this subject).

Scientific experts disagree on the shape of the dose response curve. It is not clear whether the relationship between dose and risk is linear or curved. General consensus, however, indicates that both linear and curved (actually a linear-quadratic) relationships provide a good estimate depending on the effect. The NRC, however, has adopted the linear no-threshold model, just like the model for genetic risk, since it appears to be the most conservative. These risks result in stochastic effects.

Stochastic Effects

Stochastic effects are health effects that occur randomly, and the probability of the effect rather than the severity, is assumed to be linear and without a threshold. Cancer and hereditary effects are examples of stochastic effects.

Deterministic ("Nonstochastic") Effects

The risks of injury to organs are called deterministic or nonstochastic effects. The severity of these effects varies with the dose. There is believed to exist a dose threshold which must be exceeded in order for these effects to occur. Cataracts and reddening of the skin are examples of nonstochastic effects.

Sparse data lead to statistical risk estimation. Risk estimates are therefore strictly applicable only to large exposed populations, not to any one exposed individual. For individual estimates, Probability of Causation theory is used which looks not only at the direct link between dose and cancer but also considers all of the additional factors which may have influenced the development of that specific cancer.

2.6.2.2 Incidence/Mortality

The risk estimates for all radiation induced cancers is about 4 excess cases per 10,000 individuals exposed to 1 rem. Normal incidence is about 1 in 4 chances of developing any type of cancer. However, not all cancers are associated with exposure to radiation.

The risk of dying from cancer is about one half of the risk of getting the cancer.

Exposure to radiation is not a guarantee of cancer, however, because of the linear model, more exposure means more risk (e.g. double the dose = double the risk). The no-threshold model also indicates that there is no dose of radiation so small that it will not have some effect.

2.6.3 In-Utero Effects

In addition to being a mutagen and a carcinogen, radiation is also a teratogen, i.e. it is capable of producing physical malformations during fetal development. Some examples of teratogenic agents are:

- Physical - Radiation,
- Chemical - Many (e.g. Thalidomide), and
- Biological - Viruses (e.g. German measles).

As noted previously, the effects from in-utero exposure can be considered a subset of the general category of somatic effects. The malformations produced do not indicate a genetic effect, however, since it was the embryo that was exposed, not the reproductive cells of the parents.

The principal effects of exposure in-utero are:

- Intrauterine death,
- Growth retardation,
- Developmental abnormalities, and
- Childhood cancers.

Important factors which influence the probability and magnitude of the effect are the:

- Dose, and
- Stage of Fetal Development

The stage of fetal development is an important factor which governs the types of effects observed. Some examples of the relationship between stage of development and effect are:

Weeks Post Conception	- Effect
0-1 (pre-implantation)	- intrauterine death
2-7 (organogenesis)	- developmental abnormalities/ growth retardation/cancer
8-40 (fetal stage)	- same as above with lower risk plus possible functional abnormalities

Because of the additional risk associated with the development of the organ systems during the first three months of gestation, radiation exposure during this period (first trimester) is considered to pose a greater risk.

The risk of childhood cancer due to in-utero exposure is about the same as for adults, however, the risk of all in-utero effects is about 1-10 per 1,000 exposed per rad. By far, medical procedures are the largest source of in-utero radiation expo-

sure. Normal risks of fetal abnormalities are about 5-30 per 1,000 live births.

Because of in-utero sensitivity, 10 CFR Part 20 sets limits for occupationally exposed pregnant women who have declared their pregnancy. The radiation dose to the embryo/fetus is limited to 0.5 rem during the entire gestation period (or no more than 0.05 rem additional if, at the time of declaration, this limit would be exceeded).

2.6.4 Low Dose Summary

The three principal effects of exposure to low levels of radiation are:

- Genetic,
- Somatic, and
- In-Utero.

The approximate risk of low dose radiation effects per 10,000 exposed per rad is:

- Genetic - 1-2,
- Somatic (cancer) - 4,
- In-Utero (cancer) - 2-10, and
- In-Utero (all) - 10-100.

Appendix 2-1

Regulatory Guide 8.29

U.S. NUCLEAR REGULATORY COMMISSION

Revision 1
February 1996

REGULATORY GUIDE

OFFICE OF NUCLEAR REGULATORY RESEARCH

REGULATORY GUIDE 8.29

(Draft was issued as DG-8012)

INSTRUCTION CONCERNING RISKS FROM OCCUPATIONAL RADIATION EXPOSURE

A. INTRODUCTION

Section 19.12 of 10 CFR Part 19, "Notices, Instructions and Reports to Workers: Inspection and Investigations," requires that all individuals who in the course of their employment are likely to receive in a year an occupational dose in excess of 100 mrem (1 mSv) be instructed in the health protection issues associated with exposure to radioactive materials or radiation. Section 20.1206 of 10 CFR Part 20, "Standards for Protection Against Radiation," requires that before a planned special exposure occurs the individuals involved are, among other things, to be informed of the estimated doses and associated risks.

This regulatory guide describes the information that should be provided to workers by licensees about health risks from occupational exposure. This revision conforms to the revision of 10 CFR Part 20 that became effective on June 20, 1991, to be implemented by licensees no later than January 1, 1994. The revision of 10 CFR Part 20 establishes new dose limits based on the effective dose equivalent (EDE), requires the summing of internal and external dose, establishes a requirement that licensees use procedures and engineering controls to the extent practicable to achieve occupational doses and doses to members of the public that are as low as is reasonably achievable (ALARA), provides for planned special exposures, establishes a dose limit for the embryo/fetus of an occupationally exposed declared pregnant woman, and explicitly states that Part 20 is not to be construed as limiting action that may be necessary to protect health and safety during emergencies.

Any information collection activities mentioned in this regulatory guide are contained as requirements in 10 CFR Part 19 or 10 CFR Part 20. These regulations provide the regulatory bases for this guide. The information collection requirements in 10 CFR Parts 19 and 20 have been cleared under OMB Clearance Nos. 3150-0044 and 3150-0014, respectively.

B. DISCUSSION

It is important to qualify the material presented in this guide with the following considerations.

The coefficient used in this guide for occupational radiation risk estimates, 4×10^{-4} health effects per rem, is based on data obtained at much higher doses and dose rates than those encountered by workers. The risk coefficient obtained at high doses and dose rates was reduced to account for the reduced effectiveness of lower doses and dose rates in producing the stochastic effects observed in studies of exposed humans.

The assumption of a linear extrapolation from the lowest doses at which effects are observable down to

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This guide was issued after consideration of comments received from the public. Comments and suggestions for improvements in these guides are encouraged at all times, and guides will be revised, as appropriate, to accommodate comments and to reflect new information or experience.

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the occupational range has considerable uncertainty. The report of the Committee on the Biological Effects of Ionizing Radiation (Ref. 1) states that

> "... departure from linearity cannot be excluded at low doses below the range of observation. Such departures could be in the direction of either an increased or decreased risk. Moreover, epidemiologic data cannot rigorously exclude the existence of a threshold in the 100 mrem dose range. Thus, the possibility that there may be no risk from exposures comparable to external natural background radiation cannot be ruled out. At such low doses and dose rates, it must be acknowledged that the lower limit of the range of uncertainty in the risk estimates extends to zero."

The issue of beneficial effects from low doses, or hormesis, in cellular systems is addressed by the United Nations Scientific Committee on the Effects of Atomic Radiation (Ref. 2). UNSCEAR states that "... it would be premature to conclude that cellular adaptive responses could convey possible beneficial effects to the organism that would outweigh the detrimental effects of exposures to low doses of low-LET radiation."

In the absence of scientific certainty regarding the relationship between low doses and health effects, and as a conservative assumption for radiation protection purposes, the scientific community generally assumes that any exposure to ionizing radiation can cause biological effects that may be harmful to the exposed person and that the magnitude or probability of these effects is directly proportional to the dose. These effects may be classified into three categories:

Somatic Effects: Physical effects occurring in the exposed person. These effects may be observable after a large or acute dose (e.g., 100 rems[1] (1 Sv) or more to the whole body in a few hours); or they may be effects such as cancer that may occur years after exposure to radiation.

Genetic Effects: Abnormalities that may occur in the future children of exposed individuals and in subsequent generations (genetic effects exceeding normal incidence have not been observed in any of the studies of human populations).

Teratogenic Effects: Effects such as cancer or congenital malformation that may be observed in children who were exposed during the fetal and embryonic stages of development (these effects have been observed from high, i.e., above 20 rems (0.2 Sv), acute exposures).

The normal incidence of effects from natural and manmade causes is significant. For example, approximately 20% of people die from various forms of cancer whether or not they ever receive occupational exposure to radiation. To avoid increasing the incidence of such biological effects, regulatory controls are imposed on occupational doses to adults and minors and on doses to the embryo/fetus from occupational exposures of declared pregnant women.

Radiation protection training for workers who are occupationally exposed to ionizing radiation is an essential component of any program designed to ensure compliance with NRC regulations. A clear understanding of what is presently known about the biological risks associated with exposure to radiation will result in more effective radiation protection training and should generate more interest on the part of the workers in complying with radiation protection standards. In addition, pregnant women and other occupationally exposed workers should have available to them relevant information on radiation risks to enable them to make informed decisions regarding the acceptance of these risks. It is intended that workers who receive this instruction will develop respect for the risks involved, rather than excessive fear or indifference.

C. REGULATORY POSITION

Instruction to workers performed in compliance with 10 CFR 19.12 should be given prior to occupational exposure and periodically thereafter. The frequency of retraining might range from annually for licensees with complex operations such as nuclear power plants, to every three years for licensees who possess, for example, only low-activity sealed sources. If a worker is to participate in a planned special exposure, the worker should be informed of the associated risks in compliance with 10 CFR 20.1206.

In providing instruction concerning health protection problems associated with exposure to radiation, all occupationally exposed workers and their supervisors should be given specific instruction on the risk of biological effects resulting from exposure to radiation. The extent of these instructions should be commensurate with the radiological risks present in the workplace.

The instruction should be presented orally, in printed form, or in any other effective communication media to workers and supervisors. The appendix to this guide provides useful information for demonstrating compliance with the training requirements in 10 CFR Parts 19 and 20. Individuals should be given an opportunity to discuss the information and to ask questions. Testing is recommended, and each trainee should be asked to acknowledge in writing that the instruction has been received and understood.

[1] In the International System of Units (SI), the rem is replaced by the sievert; 100 rems is equal to 1 sievert (Sv).

D. IMPLEMENTATION

The purpose of this section is to provide information to applicants and licensees regarding the NRC staff's plans for using this regulatory guide.

Except in those cases in which an applicant or licensee proposes acceptable alternative methods for complying with specified portions of the Commission's regulations, the guidance and instructional materials in this guide will be used in the evaluation of applications for new licenses, license renewals, and license amendments and for evaluating compliance with 10 CFR 19.12 and 10 CFR Part 20.

REFERENCES

1. National Research Council, *Health Effects of Exposure to Low Levels of Ionizing Radiation*, Report of the Committee on the Biological Effects of Ionizing Radiation (BEIR V), National Academy Press, Washington, DC, 1990.
2. United Nations Scientific Committee on the Effects of Atomic Radiation (UNSCEAR), *Sources and Effects of Ionizing Radiation*, United Nations, New York, 1993.

APPENDIX

INSTRUCTION CONCERNING RISKS FROM OCCUPATIONAL RADIATION EXPOSURE

This instructional material is intended to provide the user with the best available information about the health risks from occupational exposure to ionizing radiation. Ionizing radiation consists of energy or small particles, such as gamma rays and beta and alpha particles, emitted from radioactive materials, which can cause chemical or physical damage when they deposit energy in living tissue. A question and answer format is used. Many of the questions or subjects were developed by the NRC staff in consultation with workers, union representatives, and licensee representatives experienced in radiation protection training.

This Revision 1 to Regulatory Guide 8.29 updates the material in the original guide on biological effects and risks and on typical occupational exposure. Additionally, it conforms to the revised 10 CFR Part 20, "Standards for Protection Against Radiation," which was required to be implemented by licensees no later than January 1, 1994. The information in this appendix is intended to help develop respect by workers for the risks associated with radiation, rather than unjustified fear or lack of concern. Additional guidance concerning other topics in radiation protection training is provided in other NRC regulatory guides.

1. What is meant by health risk?

A health risk is generally thought of as something that may endanger health. Scientists consider health risk to be the statistical probability or mathematical chance that personal injury, illness, or death may result from some action. Most people do not think about health risks in terms of mathematics. Instead, most of us consider the health risk of a particular action in terms of whether we believe that particular action will, or will not, cause us some harm. The intent of this appendix is to provide estimates of, and explain the bases for, the risk of injury, illness, or death from occupational radiation exposure. Risk can be quantified in terms of the probability of a health effect per unit of dose received.

When x-rays, gamma rays, and ionizing particles interact with living materials such as our bodies, they may deposit enough energy to cause biological damage. Radiation can cause several different types of events such as the very small physical displacement of molecules, changing a molecule to a different form, or ionization, which is the removal of electrons from atoms and molecules. When the quantity of radiation energy deposited in living tissue is high enough, biological damage can occur as a result of chemical bonds being broken and cells being damaged or killed. These effects can result in observable clinical symptoms.

The basic unit for measuring absorbed radiation is the rad. One rad (0.01 gray in the International System of units) equals the absorption of 100 ergs (a small but measurable amount of energy) in a gram of material such as tissue exposed to radiation. To reflect biological risk, rads must be converted to rems. The new international unit is the sievert (100 rems = 1 Sv). This conversion accounts for the differences in the effectiveness of different types of radiation in causing damage. The rem is used to estimate biological risk. For beta and gamma radiation, a rem is considered equal to a rad.

2. What are the possible health effects of exposure to radiation?

Health effects from exposure to radiation range from no effect at all to death, including diseases such as leukemia or bone, breast, and lung cancer. Very high (100s of rads), short-term doses of radiation have been known to cause prompt (or early) effects, such as vomiting and diarrhea,[1] skin burns, cataracts, and even death. It is suspected that radiation exposure may be linked to the potential for genetic effects in the children of exposed parents. Also, children who were exposed to high doses (20 or more rads) of radiation prior to birth (as an embryo/fetus) have shown an increased risk of mental retardation and other congenital malformations. These effects (with the exception of genetic effects) have been observed in various studies of medical radiologists, uranium miners, radium workers, radiotherapy patients, and the people exposed to radiation from atomic bombs dropped on Japan. In addition, radiation effects studies with laboratory animals, in which the animals were given relatively high doses, have provided extensive data on radiation-induced health effects, including genetic effects.

It is important to note that these kinds of health effects result from high doses, compared to occupational levels, delivered over a relatively short period of time.

Although studies have not shown a consistent cause-and-effect relationship between current levels of occupational radiation exposure and biological effects, it is prudent from a worker protection perspective to assume that some effects may occur.

[1]These symptoms are early indicators of what is referred to as the acute radiation syndrome, caused by high doses delivered over a short time period, which includes damage to the blood-forming organs such as bone marrow, damage to the gastrointestinal system, and, at very high doses, can include damage to the central nervous system.

3. **What is meant by early effects and delayed or late effects?**

EARLY EFFECTS

Early effects, which are also called immediate or prompt effects, are those that occur shortly after a large exposure that is delivered within hours to a few days. They are observable after receiving a very large dose in a short period of time, for example, 300 rads (3 Gy) received within a few minutes to a few days. Early effects are not caused at the levels of radiation exposure allowed under the NRC's occupational limits.

Early effects occur when the radiation dose is large enough to cause extensive biological damage to cells so that large numbers of cells are killed. For early effects to occur, this radiation dose must be received within a short time period. This type of dose is called an acute dose or acute exposure. The same dose received over a long time period would not cause the same effect. Our body's natural biological processes are constantly repairing damaged cells and replacing dead cells; if the cell damage is spread over time, our body is capable of repairing or replacing some of the damaged cells, reducing the observable adverse conditions.

For example, a dose to the whole body of about 300–500 rads (3–5 Gy), more than 60 times the annual occupational dose limit, if received within a short time period (e.g., a few hours) will cause vomiting and diarrhea within a few hours; loss of hair, fever, and weight loss within a few weeks; and about a 50 percent chance of death if medical treatment is not provided. These effects would not occur if the same dose were accumulated gradually over many weeks or months (Refs. 1 and 2). Thus, one of the justifications for establishing annual dose limits is to ensure that occupational dose is spread out in time.

It is important to distinguish between whole body and partial body exposure. A localized dose to a small volume of the body would not produce the same effect as a whole body dose of the same magnitude. For example, if only the hand were exposed, the effect would mainly be limited to the skin and underlying tissue of the hand. An acute dose of 400 to 600 rads (4–6 Gy) to the hand would cause skin reddening; recovery would occur over the following months and no long-term damage would be expected. An acute dose of this magnitude to the whole body could cause death within a short time without medical treatment. Medical treatment would lessen the magnitude of the effects and the chance of death; however, it would not totally eliminate the effects or the chance of death.

DELAYED EFFECTS

Delayed effects may occur years after exposure. These effects are caused indirectly when the radiation changes parts of the cells in the body, which causes the normal function of the cell to change, for example, normal healthy cells turn into cancer cells. The potential for these delayed health effects is one of the main concerns addressed when setting limits on occupational doses.

A delayed effect of special interest is genetic effects. Genetic effects may occur if there is radiation damage to the cells of the gonads (sperm or eggs). These effects may show up as genetic defects in the children of the exposed individual and succeeding generations. However, if any genetic effects (i.e., effects in addition to the normal expected number) have been caused by radiation, the numbers are too small to have been observed in human populations exposed to radiation. For example, the atomic bomb survivors (from Hiroshima and Nagasaki) have not shown any significant radiation-related increases in genetic defects (Ref. 3). Effects have been observed in animal studies conducted at very high levels of exposure and it is known that radiation can cause changes in the genes in cells of the human body. However, it is believed that by maintaining worker exposures below the NRC limits and consistent with ALARA, a margin of safety is provided such that the risk of genetic effects is almost eliminated.

4. **What is the difference between acute and chronic radiation dose?**

Acute radiation dose usually refers to a large dose of radiation received in a short period of time. Chronic dose refers to the sum of small doses received repeatedly over long time periods, for example, 20 mrem (or millirem, which is 1-thousandth of a rem) (0.2 mSv) per week every week for several years. It is assumed for radiation protection purposes that any radiation dose, either acute or chronic, may cause delayed effects. However, only large acute doses cause early effects; chronic doses within the occupational dose limits do not cause early effects. Since the NRC limits do not permit large acute doses, concern with occupational radiation risk is primarily focused on controlling chronic exposure for which possible delayed effects, such as cancer, are of concern.

The difference between acute and chronic radiation exposure can be shown by using exposure to the sun's rays as an example. An intense exposure to the sun can result in painful burning, peeling, and growing of new skin. However, repeated short exposures provide time for the skin to be repaired between exposures. Whether exposure to the sun's rays is long term or spread over short periods, some of the injury may not be repaired and may eventually result in skin cancer.

Cataracts are an interesting case because they can be caused by both acute and chronic radiation. A certain threshold level of dose to the lens of the eye is required before there is any observable visual impairment, and the impairment remains after the exposure is stopped. The threshold for cataract development

from acute exposure is an acute dose on the order of 100 rads (1 Gy). Further, a cumulative dose of 800 rads (8 Gy) from protracted exposures over many years to the lens of the eye has been linked to some level of visual impairment (Refs. 1 and 4). These doses exceed the amount that may be accumulated by the lens from normal occupational exposure under the current regulations.

5. What is meant by external and internal exposure?

A worker's occupational dose may be caused by exposure to radiation that originates outside the body, called "external exposure," or by exposure to radiation from radioactive material that has been taken into the body, called "internal exposure." Most NRC-licensed activities involve little, if any, internal exposure. It is the current scientific consensus that a rem of radiation dose has the same biological risk regardless of whether it is from an external or an internal source. The NRC requires that dose from external exposure and dose from internal exposure be added together, if each exceeds 10% of the annual limit, and that the total be within occupational limits. The sum of external and internal dose is called the total effective dose equivalent (TEDE) and is expressed in units of rems (Sv).

Although unlikely, radioactive materials may enter the body through breathing, eating, drinking, or open wounds, or they may be absorbed through the skin. The intake of radioactive materials by workers is generally due to breathing contaminated air. Radioactive materials may be present as fine dust or gases in the workplace atmosphere. The surfaces of equipment and workbenches may be contaminated, and these materials can be resuspended in air during work activities.

If any radioactive material enters the body, the material goes to various organs or is excreted, depending on the biochemistry of the material. Most radioisotopes are excreted from the body in a few days. For example, a fraction of any uranium taken into the body will deposit in the bones, where it remains for a longer time. Uranium is slowly eliminated from the body, mostly by way of the kidneys. Most workers are not exposed to uranium. Radioactive iodine is preferentially deposited in the thyroid gland, which is located in the neck.

To limit risk to specific organs and the total body, an annual limit on intake (ALI) has been established for each radionuclide. When more than one radionuclide is involved, the intake amount of each radionuclide is reduced proportionally. NRC regulations specify the concentrations of radioactive material in the air to which a worker may be exposed for 2,000 working hours in a year. These concentrations are termed the derived air concentrations (DACs). These limits are the total amounts allowed if no external radiation is received. The resulting dose from the internal radiation sources (from breathing air at 1 DAC) is the maximum allowed to an organ or to the worker's whole body.

6. How does radiation cause cancer?

The mechanisms of radiation-induced cancer are not completely understood. When radiation interacts with the cells of our bodies, a number of events can occur. The damaged cells can repair themselves and permanent damage is not caused. The cells can die, much like the large numbers of cells that die every day in our bodies, and be replaced through the normal biological processes. Or a change can occur in the cell's reproductive structure, the cells can mutate and subsequently be repaired without effect, or they can form precancerous cells, which may become cancerous. Radiation is only one of many agents with the potential for causing cancer, and cancer caused by radiation cannot be distinguished from cancer attributable to any other cause.

Radiobiologists have studied the relationship between large doses of radiation and cancer (Refs. 5 and 6). These studies indicate that damage or change to genes in the cell nucleus is the main cause of radiation-induced cancer. This damage may occur directly through the interaction of the ionizing radiation in the cell or indirectly through the actions of chemical products produced by radiation interactions within cells. Cells are able to repair most damage within hours; however, some cells may not be repaired properly. Such misrepaired damage is thought to be the origin of cancer, but misrepair does not always cause cancer. Some cell changes are benign or the cell may die; these changes do not lead to cancer.

Many factors such as age, general health, inherited traits, sex, as well as exposure to other cancer-causing agents such as cigarette smoke can affect susceptibility to the cancer-causing effects of radiation. Many diseases are caused by the interaction of several factors, and these interactions appear to increase the susceptibility to cancer.

7. Who developed radiation risk estimates?

Radiation risk estimates were developed by several national and international scientific organizations over the last 40 years. These organizations include the National Academy of Sciences (which has issued several reports from the Committee on the Biological Effects of Ionizing Radiations, BEIR), the National Council on Radiation Protection and Measurements (NCRP), the International Commission on Radiological Protection (ICRP), and the United Nations Scientific Committee on the Effects of Atomic Radiation (UNSCEAR). Each of these organizations continues to review new research findings on radiation health risks.

Several reports from these organizations present new findings on radiation risks based upon revised estimates of radiation dose to survivors of the atomic bombing at Hiroshima and Nagasaki. For example, UNSCEAR published risk estimates in 1988 and 1993 (Refs. 5 and 6). The NCRP also published a report in 1988, "New Dosimetry at Hiroshima and Nagasaki and Its Implications for Risk Estimates" (Ref. 7). In January 1990, the National Academy of Sciences released the fifth report of the BEIR Committee, "Health Effects of Exposure to Low Levels of Ionizing Radiation" (Ref. 4). Each of these publications also provides extensive bibliographies on other published studies concerning radiation health effects for those who may wish to read further on this subject.

8. What are the estimates of the risk of fatal cancer from radiation exposure?

We don't know exactly what the chances are of getting cancer from a low-level radiation dose, primarily because the few effects that may occur cannot be distinguished from normally occurring cancers. However, we can make estimates based on extrapolation from extensive knowledge from scientific research on high dose effects. The estimates of radiation effects at high doses are better known than are those of most chemical carcinogens (Ref. 8).

From currently available data, the NRC has adopted a risk value for an occupational dose of 1 rem (0.01 Sv) Total Effective Dose Equivalent (TEDE) of 4 in 10,000 of developing a fatal cancer, or approximately 1 chance in 2,500 of fatal cancer per rem of TEDE received. The uncertainty associated with this risk estimate does not rule out the possibility of higher risk, or the possibility that the risk may even be zero at low occupational doses and dose rates.

The radiation risk incurred by a worker depends on the amount of dose received. Under the linear model explained above, a worker who receives 5 rems (0.05 Sv) in a year incurs 10 times as much risk as another worker who receives only 0.5 rem (0.005 Sv). Only a very few workers receive doses near 5 rems (0.05 Sv) per year (Ref. 9).

According to the BEIR V report (Ref. 4), approximately one in five adults normally will die from cancer from all possible causes such as smoking, food, alcohol, drugs, air pollutants, natural background radiation, and inherited traits. Thus, in any group of 10,000 workers, we can estimate that about 2,000 (20%) will die from cancer without any occupational radiation exposure.

To explain the significance of these estimates, we will use as an example a group of 10,000 people, each exposed to 1 rem (0.01 Sv) of ionizing radiation. Using the risk factor of 4 effects per 10,000 rem of dose, we estimate that 4 of the 10,000 people might die from delayed cancer because of that 1-rem dose (although the actual number could be more or less than 4) in addition to the 2,000 normal cancer fatalities expected to occur in that group from all other causes. This means that a 1-rem (0.01 Sv) dose may increase an individual worker's chances of dying from cancer from 20 percent to 20.04 percent. If one's lifetime occupational dose is 10 rems, we could raise the estimate to 20.4 percent. A lifetime dose of 100 rems may increase chances of dying from cancer from 20 to 24 percent. The average measurable dose for radiation workers reported to the NRC was 0.31 rem (0.0031 Sv) for 1993 (Ref. 9). Today, very few workers ever accumulate 100 rems (1 Sv) in a working lifetime, and the average career dose of workers at NRC-licensed facilities is 1.5 rems (0.015 Sv), which represents an estimated increase from 20 to about 20.06 percent in the risk of dying from cancer.

It is important to understand the probability factors here. A similar question would be, "If you select one card from a full deck of cards, will you get the ace of spades?" This question cannot be answered with a simple yes or no. The best answer is that your chance is 1 in 52. However, if 1000 people each select one card from full decks, we can predict that about 20 of them will get an ace of spades. Each person will have 1 chance in 52 of drawing the ace of spades, but there is no way we can predict which persons will get that card. The issue is further complicated by the fact that in a drawing by 1000 people, we might get only 15 successes, and in another, perhaps 25 correct cards in 1000 draws. We can say that if you receive a radiation dose, you will have increased your chances of eventually developing cancer. It is assumed that the more radiation exposure you get, the more you increase your chances of cancer.

The normal chance of dying from cancer is about one in five for persons who have not received any occupational radiation dose. The additional chance of developing fatal cancer from an occupational exposure of 1 rem (0.01 Sv) is about the same as the chance of drawing any ace from a full deck of cards three times in a row. The additional chance of dying from cancer from an occupational exposure of 10 rem (0.1 Sv) is about equal to your chance of drawing two aces successively on the first two draws from a full deck of cards.

It is important to realize that these risk numbers are only estimates based on data for people and research animals exposed to high levels of radiation in short periods of time. There is still uncertainty with regard to estimates of radiation risk from low levels of exposure. Many difficulties are involved in designing research studies that can accurately measure the projected small increases in cancer cases that might be caused by low exposures to radiation as compared to the normal rate of cancer.

These estimates are considered by the NRC staff to be the best available for the worker to use to make an informed decision concerning acceptance of the risks associated with exposure to radiation. A worker who decides to accept this risk should try to keep exposure to radiation as low as is reasonably achievable (ALARA) to avoid unnecessary risk.

9. If I receive a radiation dose that is within occupational limits, will it cause me to get cancer?

Probably not. Based on the risk estimates previously discussed, the risk of cancer from doses below the occupational limits is believed to be small. Assessment of the cancer risks that may be associated with low doses of radiation are projected from data available at doses larger than 10 rems (0.1 Sv) (Ref. 3). For radiation protection purposes, these estimates are made using the straight line portion of the linear quadratic model (Curve 2 in Figure 1). We have data on cancer probabilities only for high doses, as shown by the solid line in Figure 1. Only in studies involving radiation doses above occupational limits are there dependable determinations of the risk of cancer, primarily because below the limits the effect is small compared to differences in the normal cancer incidence from year to year and place to place. The ICRP, NCRP, and other standards-setting organizations assume for radiation protection purposes that there is some risk, no matter how small the dose (Curves 1 and 2). Some scientists believe that the risk drops off to zero at some low dose (Curve 3), the threshold effect. The ICRP and NCRP endorse the linear quadratic model as a conservative means of assuring safety (Curve 2).

For regulatory purposes, the NRC uses the straight line portion of Curve 2, which shows the number of effects decreasing linearly as the dose decreases. Because the scientific evidence does not conclusively demonstrate whether there is or is not an effect at low doses, the NRC assumes for radiation protection purposes, that even small doses have some chance of causing cancer. Thus, a principle of radiation protection is to do more than merely meet the allowed regulatory limits; doses should be kept as low as is reasonably achievable (ALARA). This is as true for natural carcinogens such as sunlight and natural radiation as it is for those that are manmade, such as cigarette smoke, smog, and x-rays.

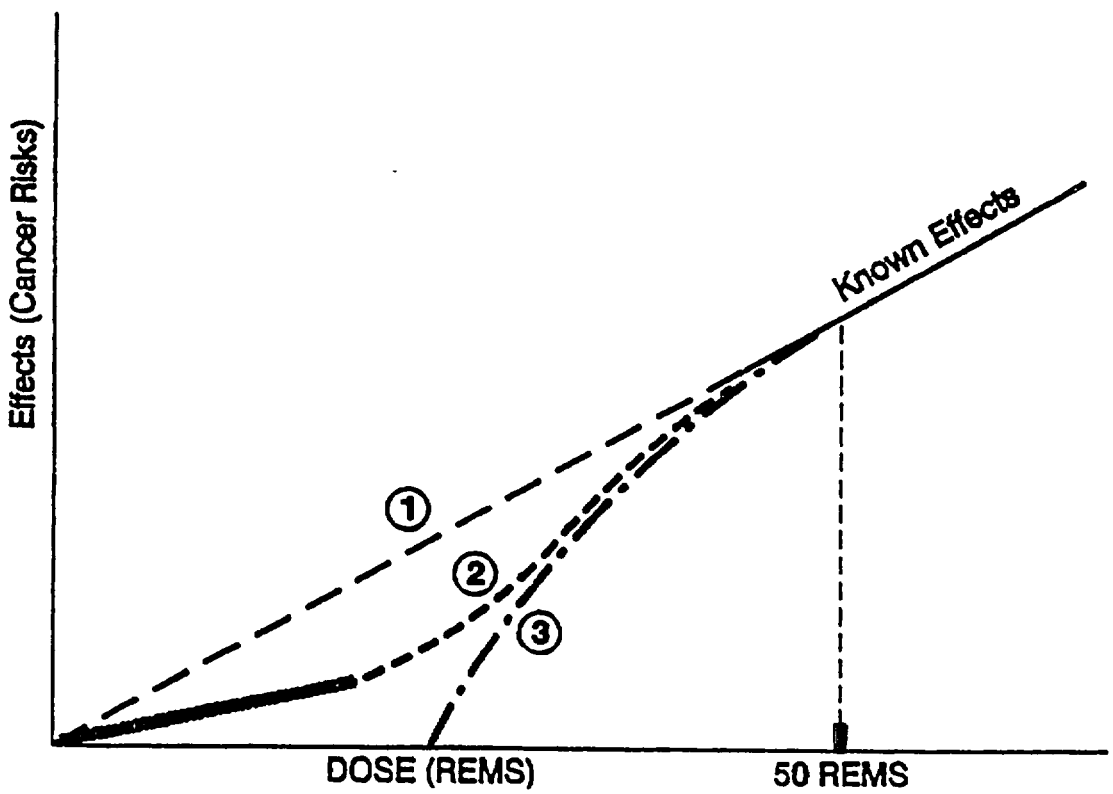

Figure 1. Some Proposed Models for How the Effects of Radiation Vary With Doses at Low Levels

10. How can we compare the risk of cancer from radiation to other kinds of health risks?

One way to make these comparisons is to compare the average number of days of life expectancy lost because of the effects associated with each particular health risk. Estimates are calculated by looking at a large number of persons, recording the age when death occurs from specific causes, and estimating the average number of days of life lost as a result of these early deaths. The total number of days of life lost is then averaged over the total observed group.

Several studies have compared the average days of life lost from exposure to radiation with the number of days lost as a result of being exposed to other health risks. The word "average" is important because an individual who gets cancer loses about 15 years of life expectancy, while his or her coworkers do not suffer any loss.

Some representative numbers are presented in Table 1. For categories of NRC-regulated industries with larger doses, the average measurable occupational dose in 1993 was 0.31 rem (0.0031 Sv). A simple calculation based on the article by Cohen and Lee (Ref. 10) shows that 0.3 rem (0.003 Sv) per year from age 18 to 65 results in an average loss of 15 days. These estimates indicate that the health risks from occupational radiation exposure are smaller than the risks associated with many other events or activities we encounter and accept in normal day-to-day activities.

It is also useful to compare the estimated average number of days of life lost from occupational exposure to radiation with the number of days lost as a result of working in several types of industries. Table 2 shows average days of life expectancy lost as a result of fatal work-related accidents. Table 2 does not include non-accident types of occupational risks such as occupational disease and stress because the data are not available.

These comparisons are not ideal because we are comparing the possible effects of chronic exposure to radiation to different kinds of risk such as accidental death, in which death is inevitable if the event occurs. This is the best we can do because good data are not available on chronic exposure to other workplace carcinogens. Also, the estimates of loss of life expectancy for workers from radiation-induced cancer do not take into consideration the competing effect on the life expectancy of the workers from industrial accidents.

11. What are the health risks from radiation exposure to the embryo/fetus?

During certain stages of development, the embryo/fetus is believed to be more sensitive to radiation damage than adults. Studies of atomic bomb survivors exposed to acute radiation doses exceeding 20 rads (0.2 Gy) during pregnancy show that children born after receiving these doses have a higher risk of mental retardation. Other studies suggest that an association exists between exposure to diagnostic x-rays before birth and carcinogenic effects in childhood and in adult life. Scientists are uncertain about the magnitude of the risk. Some studies show the embryo/fetus to be more sensitive to radiation-induced cancer than adults, but other studies do not. In recognition of the possibility of increased radiation sensitivity, and because dose to the

Table 1 Estimated Loss of Life Expectancy from Health Risks[a]

Health Risk	*Estimate of Life Expectancy Lost (average)*	
Smoking 20 cigarettes a day		6 years
Overweight (by 15%)		2 years
Alcohol consumption (U.S. average)		1 year
All accidents combined		1 year
Motor vehicle accidents	207 days	
Home accidents	74 days	
Drowning	24 days	
All natural hazards (earthquake, lightning, flood, etc.)		7 days
Medical radiation		6 days
Occupational Exposure		
0.3 rem/y from age 18 to 65	15 days	
1 rem/y from age 18 to 65	51 days	

[a]Adapted from Reference 10.

Table 2 Estimated Loss of Life Expectancy from Industrial Accidents[a]

Industry Type	*Estimated Days of Life Expectancy Lost (Average)*
All industries	60
Agriculture	320
Construction	227
Mining and Quarrying	167
Transportation and Public Utilities	160
Government	60
Manufacturing	40
Trade	27
Services	27

[a]Adapted from Reference 10.

embryo/fetus is involuntary on the part of the embryo/fetus, a more restrictive dose limit has been established for the embryo/fetus of a declared pregnant radiation worker. See Regulatory Guide 8.13, "Instruction Concerning Prenatal Radiation Exposure."

If an occupationally exposed woman declares her pregnancy in writing, she is subject to the more restrictive dose limits for the embryo/fetus during the remainder of the pregnancy. The dose limit of 500 mrems (5 mSv) for the total gestation period applies to the embryo/fetus and is controlled by restricting the exposure to the declared pregnant woman. Restricting the woman's occupational exposure, if she declares her pregnancy, raises questions about individual privacy rights, equal employment opportunities, and the possible loss of income. Because of these concerns, the declaration of pregnancy by a female radiation worker is voluntary. Also, the declaration of pregnancy can be withdrawn for any reason, for example, if the woman believes that her benefits from receiving the occupational exposure would outweigh the risk to her embryo/fetus from the radiation exposure.

12. Can a worker become sterile or impotent from normal occupational radiation exposure?

No. Temporary or permanent sterility cannot be caused by radiation at the levels allowed under NRC's occupational limits. There is a threshold below which these effects do not occur. Acute doses on the order of 10 rems (0.1 Sv) to the testes can result in a measurable but temporary reduction in sperm count. Temporary sterility (suppression of ovulation) has been observed in women who have received acute doses of 150 rads (1.5 Gy). The estimated threshold (acute) radiation dose for induction of permanent sterility is about 200 rads (2 Gy) for men and about 350 rads (3.5 Gy) for women (Refs. 1 and 4). These doses are far greater than the NRC s occupational dose limits for workers.

Although acute doses can affect fertility by reducing sperm count or suppressing ovulation, they do not have any direct effect on one's ability to function sexually. No evidence exists to suggest that exposures within the NRC's occupational limits have any effect on the ability to function sexually.

13. What are the NRC occupational dose limits?

For adults, an annual limit that does not exceed:

- 5 rems (0.05 Sv) for the total effective dose equivalent (TEDE), which is the sum of the deep dose equivalent (DDE) from external exposure to the whole body and the committed effective dose equivalent (CEDE) from intakes of radioactive material.
- 50 rems (0.5 Sv) for the total organ dose equivalent (TODE), which is the sum of the DDE from external exposure to the whole body and the committed dose equivalent (CDE) from intakes of radioactive material to any individual organ or tissue, other than the lens of the eye.
- 15 rems (0.15 Sv) for the lens dose equivalent (LDE), which is the external dose to the lens of the eye.
- 50 rems (0.5 Sv) for the shallow dose equivalent (SDE), which is the external dose to the skin or to any extremity.

For minor workers, the annual occupational dose limits are 10 percent of the dose limits for adult workers.

For protection of the embryo/fetus of a declared pregnant woman, the dose limit is 0.5 rem (5 mSv) during the entire pregnancy.

The occupational dose limit for adult workers of 5 rems (0.05 Sv) TEDE is based on consideration of the potential for delayed biological effects. The 5-rem (0.05 Sv) limit, together with application of the concept of keeping occupational doses ALARA, provides a level of risk of delayed effects considered acceptable by the NRC. The limits for individual organs are below the dose levels at which early biological effects are observed in the individual organs.

The dose limit for the embryo/fetus of a declared pregnant woman is based on a consideration of the possibility of greater sensitivity to radiation of the embryo/fetus and the involuntary nature of the exposure.

14. What is meant by ALARA?

ALARA means "as low as is reasonably achievable." In addition to providing an upper limit on an individual's permissible radiation dose, the NRC requires that its licensees establish radiation protection

programs and use procedures and engineering controls to achieve occupational doses, and doses to the public, as far below the limits as is reasonably achievable. "Reasonably achievable" also means "to the extent practicable." What is practicable depends on the purpose of the job, the state of technology, the costs for averting doses, and the benefits. Although implementation of the ALARA principle is a required integral part of each licensee's radiation protection program, it does not mean that each radiation exposure must be kept to an absolute minimum, but rather that "reasonable" efforts must be made to avert dose. In practice, ALARA includes planning tasks involving radiation exposure so as to reduce dose to individual workers and the work group.

There are several ways to control radiation doses, e.g., limiting the time in radiation areas, maintaining distance from sources of radiation, and providing shielding of radiation sources to reduce dose. The use of engineering controls, from the design of facilities and equipment to the actual set-up and conduct of work activities, is also an important element of the ALARA concept.

An ALARA analysis should be used in determining whether the use of respiratory protection is advisable. In evaluating whether or not to use respirators, the goal should be to achieve the optimal sum of external and internal doses. For example, the use of respirators can lead to increased work time within radiation areas, which increases external dose. The advantage of using respirators to reduce internal exposure must be evaluated against the increased external exposure and related stresses caused by the use of respirators. Heat stress, reduced visibility, and reduced communication associated with the use of respirators could expose a worker to far greater risks than are associated with the internal dose avoided by use of the respirator. To the extent practical, engineering controls, such as containments and ventilation systems, should be used to reduce workplace airborne radioactive materials.

15. What are background radiation exposures?

The average person is constantly exposed to ionizing radiation from several sources. Our environment and even the human body contain naturally occurring radioactive materials (e.g., potassium-40) that contribute to the radiation dose that we receive. The largest source of natural background radiation exposure is terrestrial radon, a colorless, odorless, chemically inert gas, which causes about 55 percent of our average, nonoccupational exposure. Cosmic radiation originating in space contributes additional exposure. The use of x-rays and radioactive materials in medicine and dentistry adds to our population exposure. As shown below in Table 3, the average person receives an annual radiation dose of about 0.36 rem (3.6 mSv). By age 20, the average person will accumulate over 7 rems (70 mSv) of dose. By age 50, the total dose is up to 18 rems (180 mSv). After 70 years of exposure this dose is up to 25 rems (250 mSv).

Table 3 Average Annual Effective Dose Equivalent to Individuals in the U.S.[a]

Source		*Effective Dose Equivalent (mrems)*
Natural		
Radon	200	
Other than Radon	100	
Total		300
Nuclear Fuel Cycle		0.05
Consumer Products[b]		9
Medical		
Diagnostic X-rays	39	
Nuclear Medicine	14	
Total		53
Total		about 360 mrems/year

[a]Adapted from Table 8.1, NCRP 93 (Ref. 11).

[b]Includes building material, television receivers, luminous watches, smoke detectors, etc. (from Table 5.1, NCRP 93, Ref. 11).

16. What are the typical radiation doses received by workers?

For 1993, the NRC received reports on about a quarter of a million people who were monitored for occupational exposure to radiation. Almost half of those monitored had no measurable doses. The other half had an average dose of about 310 mrem (3.1 mSv) for the year. Of these, 93 percent received an annual dose of less than 1 rem (10 mSv); 98.7 percent received less than 2 rems (20 mSv); and the highest reported dose was for two individuals who each received between 5 and 6 rems (50 and 60 mSv).

Table 4 lists average occupational doses for workers (persons who had measurable doses) in various occupations based on 1993 data. It is important to note that beginning in 1994, licensees have been required to sum external and internal doses and certain licensees are required to submit annual reports. Certain types of licensees such as nuclear fuel fabricators may report a significant increase in worker doses because of the exposure to long-lived airborne radionuclides and the requirement to add the resultant internal dose to the calculation of occupational doses.

Table 4 Reported Occupational Doses for 1993[a]

Occupational Subgroup	Average Measurable Dose per Worker (millirems)
Industrial Radiography	540
Commercial Nuclear Power Reactors	310
Manufacturing and Distribution of Radioactive Materials	300
Low-Level Radioactive Waste Disposal	270
Independent Spent Nuclear Fuel Storage	260
Nuclear Fuel Fabrication	130

[a]From Table 3.1 in NUREG-0713 (Ref. 9).

17. How do I know how much my occupational dose (exposure) is?

If you are likely to receive more than 10 percent of the annual dose limits, the NRC requires your employer, the NRC licensee, to monitor your dose, to maintain records of your dose, and, at least on an annual basis for the types of licensees listed in 10 CFR 20.2206, "Reports of Individual Monitoring," to inform both you and the NRC of your dose. The purpose of this monitoring and reporting is so that the NRC can be sure that licensees are complying with the occupational dose limits and the ALARA principle.

External exposures are monitored by using individual monitoring devices. These devices are required to be used if it appears likely that external exposure will exceed 10 percent of the allowed annual dose, i.e., 0.5 rem (5 mSv). The most commonly used monitoring devices are film badges, thermoluminescence dosimeters (TLDs), electronic dosimeters, and direct reading pocket dosimeters.

With respect to internal exposure, your employer is required to monitor your occupational intake of radioactive material and assess the resulting dose if it appears likely that you will receive greater than 10 percent of the annual limit on intake (ALI) from intakes in 1 year. Internal exposure can be estimated by measuring the radiation emitted from the body (for example, with a "whole body counter") or by measuring the radioactive materials contained in biological samples such as urine or feces. Dose estimates can also be made if one knows how much radioactive material was in the air and the length of time during which the air was breathed.

18. What happens if a worker exceeds the annual dose limit?

If a worker receives a dose in excess of any of the annual dose limits, the regulations prohibit any occupational exposure during the remainder of the year in which the limit is exceeded. The licensee is also required to file an overexposure report with the NRC and provide a copy to the individual who received the dose. The licensee may be subject to NRC enforcement action such as a fine (civil penalty), just as individuals are subject to a traffic fine for exceeding a speed limit. The fines and, in some serious or repetitive cases, suspension of a license are intended to encourage licensees to comply with the regulations.

Radiation protection limits do not define safe or unsafe levels of radiation exposure. Exceeding a limit does not mean that you will get cancer. For radiation protection purposes, it is assumed that risks are related to the size of the radiation dose. Therefore, when your dose is higher your risk is also considered to be higher. These limits are similar to highway speed limits. If you drive at 70 mph, your risk is higher than at 55 mph, even though you may not actually have an accident. Those who set speed limits have determined that the risks of driving in excess of the speed limit are not acceptable. In the same way, the revised 10 CFR Part 20 establishes a limit for normal occupational exposure of 5 rems (0.05 Sv) a year. Although you will not necessarily get cancer or some other radiation effect at doses above the limit, it does mean that the licensee's safety program has failed in some way. Investigation is warranted to determine the cause and correct the conditions leading to the dose in excess of the limit.

19. What is meant by a "planned special exposure"?

A "planned special exposure" (PSE) is an infrequent exposure to radiation, separate from and in addition to the radiation received under the annual occupational limits. The licensee can authorize additional dose in any one year that is equal to the annual occupational dose limit as long as the individual's total dose from PSEs does not exceed five times the annual dose limit during the individual's lifetime. For example, licensees may authorize PSEs for an adult radiation worker to receive doses up to an additional 5 rems (0.05 Sv) in a year above the 5-rem (0.05-Sv) annual TEDE occupational dose limit. Each worker is limited to no more than 25 rems (0.25 Sv) from planned special exposures in his or her lifetime. Such exposures are only allowed in exceptional situations when alternatives for avoiding the additional exposure are not available or are impractical.

Before the licensee authorizes a PSE, the licensee must ensure that the worker is informed of the purpose and circumstances of the planned operation, the estimated doses expected, and the procedures to keep the doses ALARA while considering other risks that may

be present. (See Regulatory Guide 8.35, "Planned Special Exposures.")

20. Why do some facilities establish administrative control levels that are below the NRC limits?

There are two reasons. First, the NRC regulations state that licensees must take steps to keep exposures to radiation ALARA. Specific approval from the licensee for workers to receive doses in excess of administrative limits usually results in more critical risk-benefit analyses as each additional increment of dose is approved for a worker. Secondly, an administrative control level that is set lower than the NRC limit provides a safety margin designed to help the licensee avoid doses to workers in excess of the limit.

21. Why aren't medical exposures considered as part of a worker's allowed dose?

NRC rules exempt medical exposure, but equal doses of medical and occupational radiation have equal risks. Medical exposure to radiation is justified for reasons that are quite different from the reasons for occupational exposure. A physician prescribing an x-ray, for example, makes a medical judgment that the benefit to the patient from the resulting medical information justifies the risk associated with the radiation. This judgment may or may not be accepted by the patient. Similarly, each worker must decide on the benefits and acceptability of occupational radiation risk, just as each worker must decide on the acceptability of any other occupational hazard.

Consider a worker who receives a dose of 3 rems (0.03 Sv) from a series of x-rays in connection with an injury or illness. This dose and any associated risk must be justified on medical grounds. If the worker had also received 2 rems (0.02 Sv) on the job, the combined dose of 5 rems (0.05 Sv) would in no way incapacitate the worker. Restricting the worker from additional job exposure during the remainder of the year would not have any effect on the risk from the 3 rems (0.03 Sv) already received from the medical exposure. If the individual worker accepts the risks associated with the x-rays on the basis of the medical benefits and accepts the risks associated with job-related exposure on the basis of employment benefits, it would be unreasonable to restrict the worker from employment involving exposure to radiation for the remainder of the year.

22. How should radiation risks be considered in an emergency?

Emergencies are "unplanned" events in which actions to save lives or property may warrant additional doses for which no particular limit applies. The revised 10 CFR Part 20 does not set any dose limits for emergency or lifesaving activities and states that nothing in Part 20 "shall be construed as limiting actions that may be necessary to protect health and safety."

Rare situations may occur in which a dose in excess of occupational limits would be unavoidable in order to carry out a lifesaving operation or to avoid a large dose to large populations. However, persons called upon to undertake any emergency operation should do so only on a voluntary basis and with full awareness of the risks involved.

For perspective, the Environmental Protection Agency (EPA) has published emergency dose guidelines (Ref. 2). These guidelines state that doses to all workers during emergencies should, to the extent practicable, be limited to 5 rems (0.05 Sv). The EPA further states that there are some emergency situations for which higher limits may be justified. The dose resulting from such emergency exposures should be limited to 10 rems (0.1 Sv) for protecting valuable property, and to 25 rems (0.25 Sv) for lifesaving activities and the protection of large populations. In the context of this guidance, the dose to workers that is incurred for the protection of large populations might be considered justified for situations in which the collective dose to others that is avoided as a result of the emergency operation is significantly larger than that incurred by the workers involved.

Table 5 presents the estimates of the fatal cancer risk for a group of 1,000 workers of various ages, assuming that each worker received an acute dose of 25 rems (0.25 Sv) in the course of assisting in an emergency. The estimates show that a 25-rem emergency dose might increase an individual's chances of developing fatal cancer from about 20% to about 21%.

Table 5
Risk of Premature Death from Exposure to 25-Rems (0.25-Sv) Acute Dose

Age at Exposure (years)	*Estimated Risk of Premature Death (Deaths per 1,000 Persons Exposed)*
20–30	9.1
30–40	7.2
40–50	5.3
50–60	3.5

Source: EPA-400-R-92-001 (Ref. 2).

23. How were radiation dose limits established?

The NRC radiation dose limits in 10 CFR Part 20 were established by the NRC based on the recommendations of the ICRP and NCRP as endorsed in Federal radiation protection guidance developed by the EPA

(Ref. 12). The limits were recommended by the ICRP and NCRP with the objective of ensuring that working in a radiation-related industry was as safe as working in other comparable industries. The dose limits and the principle of ALARA should ensure that risks to workers are maintained indistinguishable from risks from background radiation.

24. Several scientific reports have recommended that the NRC establish lower dose limits. Does the NRC plan to reduce the regulatory limits?

Since publication of the NRC's proposed rule in 1986, the ICRP in 1990 revised its recommendations for radiation protection based on newer studies of radiation risks (Ref. 13), and the NCRP followed with a revision to its recommendations in 1993. The ICRP recommended a limit of 10 rems (0.1 Sv) effective dose equivalent (from internal and external sources), over a 5-year period with no more than 5 rems (0.05 Sv) in 1 year (Ref. 13). The NCRP recommended a cumulative limit in rems, not to exceed the individual's age in years, with no more than 5 rems (0.05 Sv) in any year (Ref. 14).

The NRC does not believe that additional reductions in the dose limits are required at this time. Because of the practice of maintaining radiation exposures ALARA (as low as is reasonably achievable), the average radiation dose to occupationally exposed persons is well below the limits in the current Part 20 that became mandatory January 1, 1994, and the average doses to radiation workers are below the new limits recommended by the ICRP and the NCRP.

25. What are the options if a worker decides that the risks associated with occupational radiation exposure are too high?

If the risks from exposure to occupational radiation are unacceptable to a worker, he or she can request a transfer to a job that does not involve exposure to radiation. However, the risks associated with the exposure to radiation that workers, on the average, actually receive are comparable to risks in other industries and are considered acceptable by the scientific groups that have studied them. An employer is not obligated to guarantee a transfer if a worker decides not to accept an assignment that requires exposure to radiation.

Any worker has the option of seeking other employment in a nonradiation occupation. However, the studies that have compared occupational risks in the nuclear industry to those in other job areas indicate that nuclear work is relatively safe. Thus, a worker may find different kinds of risk but will not necessarily find significantly lower risks in another job.

26. Where can one get additional information on radiation risk?

The following list suggests sources of useful information on radiation risk:

- The employer—the radiation protection or health physics office where a worker is employed.
- Nuclear Regulatory Commission Regional Offices:

King of Prussia, Pennsylvania	(610) 337-5000
Atlanta, Georgia	(404) 331-4503
Lisle, Illinois	(708) 829-9500
Arlington, Texas	(817) 860-8100

- U.S. Nuclear Regulatory Commission
  Headquarters
  Radiation Protection & Health Effects Branch
  Office of Nuclear Regulatory Research
  Washington, DC 20555
  Telephone: (301) 415-6187
- Department of Health and Human Services
  Center for Devices and Radiological Health
  1390 Piccard Drive, MS HFZ-1
  Rockville, MD 20850
  Telephone: (301) 443-4690
- U.S. Environmental Protection Agency
  Office of Radiation and Indoor Air
  Criteria and Standards Division
  401 M Street NW.
  Washington, DC 20460
  Telephone: (202) 233-9290

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14. National Council on Radiation Protection and Measurements, *Limitation of Exposure to Ionizing Radiation*, NCRP Report No. 116, March 1993.

*Copies are available for inspection or copying for a fee from the NRC Public Document Room at 2120 L Street NW., Washington, DC; the PDR's mailing address is Mail Stop LL-6, Washington, DC 20555; telephone (202) 634-3273; fax (202) 634-3343. Copies may be purchased at current rates from the U.S. Government Printing Office, P.O. Box 37082, Washington, DC 20402-9328 (telephone (202) 512-2249); or from the National Technical Information Service by writing NTIS at 5285 Port Royal Road, Springfield, VA 22161.

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U.S. Nuclear Regulatory Commission, "Planned Special Exposures," Regulatory Guide 8.35, June 1992.[2]

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[1]Copies are available for inspection or copying for a fee from the NRC Public Document Room at 2120 L Street NW., Washington, DC; the PDR's mailing address is Mail Stop LL-6, Washington, DC 20555-0001; telephone (202) 634-3273; fax (202) 634-3343. Copies may be purchased at current rates from the U.S. Government Printing Office, P.O. Box 37082, Washington, DC 20402-9328 (telephone (202) 512-2249); or from the National Technical Information Service by writing NTIS at 5285 Port Royal Road, Springfield, VA 22161.

[2]Single copies of regulatory guides may be obtained free of charge by writing the Office of Administration, Attn: Distribution and Services Section, USNRC, Washington, DC 20555, or by fax at (301) 415-2260. Copies are available for inspection or copying for a fee from the NRC Public Document Room at 2120 L Street NW., Washington, DC; the PDR's mailing address is Mail Stop LL-6, Washington, DC 20555-0001; telephone (202) 634-3273; fax (202) 634-3343.

REGULATORY ANALYSIS

A separate regulatory analysis was not prepared for this Revision 1 to Regulatory Guide 8.29. A value/impact statement, which evaluated essentially the same subjects as are discussed in a regulatory analysis, accompanied Regulatory Guide 8.29 when it was issued in July 1981.

This Revision 1 to Regulatory Guide 8.29 is needed to conform with the Revised 10 CFR Part 20, "Standards for Protection Against Radiation," as published May 21, 1991 (56 FR 23360). The regulatory analysis prepared for 10 CFR Part 20 provides the regulatory basis for this Revision 1 of Regulatory Guide 8.29, and it examines the costs and benefits of the rule as implemented by the guide. A copy of the "Regulatory Analysis for the Revision of 10 CFR Part 20" (PNL-6712, November 1988), is available for inspection and copying for a fee in the NRC's Public Document Room at 2120 L Street NW., Washington, DC 20555-0001.

CHAPTER 3

RADIATION PROTECTION

STANDARDS AND GUIDES

3.0 RADIATION PROTECTION STANDARDS AND GUIDES

3.0.1 Purpose

Provide an overview of the regulations and guides for exposure to ionizing radiation and describe the types of areas and warning signs that may be encountered at a nuclear power station or fuel cycle facility.

3.0.2 Objectives

At the conclusion of this topic, course participants should be able to:

- Describe regulations governing occupational radiation exposure to personnel and minors, and dose limits to members of the general public,
- Explain the annual and lifetime dose limits and requirements for conducting Planned Special Exposures,
- Discuss the requirement to keep occupational radiation exposure and exposure to the public As Low As Reasonably Achievable (ALARA),
- Describe exposure control areas, corresponding warning signs, and state the permissible radiation/radioactivity levels,
- Discuss recommendations concerning emergency exposure, and
- Discuss regulations governing prenatal radiation exposure.
- Identify the purpose of NRC forms 3, 4, and 5.

3.0.3 References

- USNRC Regulatory Guide 8.10 - Operating Philosophy for Maintaining Occupational Radiation Exposures As Low As Is Reasonably Achievable
- NRC Management Directive and Handbook 10.131-Standards for Protection Against Ionizing Radiation (formerly MC-0524)
- 10 CFR Part 20 - Standards for Protection Against Radiation
- USNRC Regulatory Guide 8.13 - Instruction Concerning Prenatal Radiation Exposure
- 10 CFR Part 19 - Notices, Instructions, and Reports to Workers; Inspections

3.1 Keeping Radiation Exposure ALARA

The standards, regulations, and guides discussed in this chapter provide permissible levels (often called limits) and controls for protection against ionizing radiation. The limits were established as maximum permissible or acceptable values. However, it is prudently assumed that any radiation exposure, no matter how small, carries with it some risk. Therefore, 10 CFR Part 20 also requires that radiation exposure be kept "as low as is reasonably achievable" (ALARA).

The ALARA concept applies to all personnel exposed to ionizing radiation and applies to an individual's total radiation exposure, from both external radiation and from intakes of radioactivity inside the body. Every individual must strive to maintain her or his total exposure as far below the limits as practicable. Note that this may mean that small intakes of radioactive material may be allowed as long as the total dose is minimized, i.e., the sum of external and internal dose is less. Minimization of total radiation dose will ensure that total risk to the individual from radiation will be minimized.

3.2 Instructions to Radiation Workers/ Inspections

The basic instructional requirements are in 10 CFR Part 19. 10 CFR 19.12 describes requirements for training of workers who are likely to receive in a year a dose in excess of 100 mrem.

The regulations concerning inspections, the presence of licensee representatives and worker representatives during inspections and consultation with workers by inspectors are provided in 10 CFR 19.14 and 19.15.

3.3 Standards for Radiation Exposure

3.3.1 Sources of Standards and Requirements

The following are sources for standards and requirements:

- NRC Management Directive 10.131 provides the "Standards" governing radiation exposure of NRC employees,
- 10 CFR Part 20 is the basic regulation for the control of occupational exposure and the control of radioactive material by NRC licensees, and
- Other applicable regulations and guidance are provided in Regulatory Guides, other parts of Title 10 and Title 40 of the Code of Federal Regulations.

Note: NRC employees visiting a site are expected to obey the site regulatory and administrative limits. For this reason they need to attend the licensee's site-specific training.

3.3.2 Definition of Licensee Facility/Site Area

Three types of facility/site areas are defined within 10 CFR Part 20: restricted area, unrestricted area, and controlled area. Licensees are not required to establish controlled areas, but may do so if they choose. These areas are defined as follows:

- Restricted Area-an area, access to which is limited by the licensee for the purpose of protecting individuals against undue risks from exposure to radiation and radioactive materials.
- Unrestricted Area-an area, access to which is neither limited nor controlled by the licensee.
- Controlled Area-an area, outside of a restricted area but inside the site boundary, access to which can be limited by the licensee for any reason.

Figure 3-1 gives a simplified representation of these areas.

3.3.3 Occupational Dose Limits

The following sections provide occupational dose limits as specified in 10 CFR Part 20. These designations are summarized in Table 3-1. You will see these terms used in NRC Forms 4 and 5, which are included in this manual.

In addition to the these limits the intake of soluble uranium is limited to 10 milligrams per week based on chemical toxicity to the kidney.

3.3.3.1 Stochastic Limit

- 5 rem per year to the whole body (sum of external and internal dose).

The external dose is known as the "Deep Dose Equivalent," or DDE. The DDE is for that part of the whole body receiving the highest exposure. The internal dose is known as the "Committed Effective Dose Equivalent," or CEDE. The CEDE is the dose "committed" to the whole body from radioactive material in the body evaluated over a period of 50 years but assigned to the year in which the intake occurred. It is "effective" in

terms of the dose to the whole body. In some cases this will be an actual dose to the whole body, e.g., Cs-137 which is uniformly distributed throughout the body; in other cases it is the dose to an organ expressed as an equivalent dose to the whole body. That is, even though the whole body was not actually exposed, the dose to the organ will produce the same risk as an effective dose to the whole body. It is a "dose equivalent" which is expressed in units of rem as previously discussed in Chapter 1. The sum of the DDE and CEDE is known as the "Total Effective Dose Equivalent," or TEDE.

$$TEDE \leq 5 \text{ rem/yr}$$
$$TEDE = DDE + CEDE$$

This is called the "stochastic" limit. Keeping occupational exposure to the whole body under 5 rem per year will limit the risk of cancer and genetic effects to very low levels. In this manner, risk to radiation workers will be comparable to that of workers in other safe industries.

Note: The whole body is defined as head, trunk, (including male gonads), arms above the elbow, or legs above the knee.

3.3.3.2 Deterministic (Nonstochastic) Limit

- 50 rem per year to the maximum exposed organ (sum of external and internal dose).

The external dose is the DDE, and the internal dose is known as the "Committed Dose Equivalent," or CDE. It is a "committed" dose in that the dose to the organ over a period of 50 years is assigned to the year of the intake. It is a "dose equivalent" because the dose is expressed in units of rem as discussed in Chapter 1. The sum of the DDE and CDE is known as the "Total Organ Dose Equivalent," or TODE.

$$TODE \leq 50 \text{ rem/yr}$$
$$TODE = DDE + CDE$$

The relationship between the CEDE and CDE is expressed as:

$$CEDE = CDE \times Wt$$

Wt is the "weighting factor" which is a means of expressing the relative significance of the risk of an internal dose to an individual organ to a dose to the whole body. Values of Wt for various organs appear in 10 CFR Part 20. For example, the Wt value for the thyroid is 0.03 which means that a dose of 1 rem to the thyroid would have the same risk as an "effective" dose of 0.03 rem (1 rem x 0.03).

The TODE is called the "deterministic" (also called a "nonstochastic") limit. Keeping occupational exposure to the maximum exposed organ under 50 rem per year will ensure that organ-specific effects such as reduced thyroid functioning or damage to red bone marrow will be prevented.

3.3.3.3 Lens Dose Equivalent

- 15 rem per year to the lens of the eye, the "Lens Dose Equivalent," or LDE.

The LDE does not include any dose from internally deposited radioactive material.

3.3.3.4 Shallow Dose Equivalent

- 50 rem per year "Shallow Dose Equivalent," or SDE, to the skin or extremities.

The extremities are defined as hand, elbow, arm below the elbow, foot, knee, or leg below the knee. The SDE does not include any dose from internally deposited radioactive material.

3.3.3.5 Planned Special Exposure

A "Planned Special Exposure," or PSE is an infrequent exposure to radiation, separate from and in addition to the above-mentioned annual dose limits. A PSE allows a person to receive an additional dose equal to the annual dose limit provided:

- The conditions are exceptional,
- The licensee authorizes the PSE in writing prior to the exposure,
- The individual is informed of the purpose, projected dose, and ALARA measures for the PSE,
- The lifetime PSE does not exceed 5 times the appropriate annual dose limit,
- The individual is informed of the dose associated with the PSE,
- PSE records are maintained, and
- The individuals complete exposure history is documented (NRC Form 4).

3.3.3.6 Dose to the Embryo/Fetus

Prenatal radiation exposure is subject to special limits which are less than those for the adult worker. They are:

- 500 mrem per gestational period to the embryo/fetus of a declared pregnant woman,
- Uniform monthly exposure over the gestational period is encouraged.

Regulatory Guide 8.13 describes possible risks to the embryo/fetus from radiation and alternatives to occupational exposure that should be considered.

It should be noted that participation in the prenatal exposure control program is strictly voluntary. If a woman chooses not to declare a pregnancy, then the woman is subject to the occupational limits for the adult worker.

3.3.3.7 Occupational Dose to Minors

The permissible dose values for individuals under 18 years of age are 10 percent (one-tenth) of the adult occupational dose limits.

3.3.4 Exposure to Airborne Radioactive Materials

The dose to individuals from radioactive material inside the body (internal exposure) is controlled by limiting the amount of radioactive material that is permitted to be inhaled or ingested. This limiting value is called the Annual Limit on Intake (ALI), expressed in microcuries. One ALI (called the stochastic ALI) results in 5 rem of internal whole body exposure.

Inhalation is the most likely pathway for internal radioactive material. Inhaled radioactivity is controlled by defining the Derived Air Concentration (DAC), which is obtained by dividing the ALI by the amount of air breathed by a worker in 2000 hours (one work year).

The product of the airborne concentration of radioactivity (in DACs) and the exposure time (in hours) is called DAC-hours. The annual limit is then 2000 DAC-hours. On this basis, the following relationships exists:

- 2000 DAC-hours = 1 ALI (stochastic) and,
- 2000 DAC-hours = 5 rem, or,
- 1 DAC-hour = 2.5 mrem.

Some radionuclides, for example I-131, seek out and preferrentially irradiate specific body organs. For these radionuclides, ALIs (called nonstochastic ALIs) have been derived to limit dose to specific body organs from inhalation of radioactive material to 50 rem per year. In this case,

- 2000 DAC-hours = 1 ALI (nonstochastic),
- 2000 DAC-hours = 50 rem internal organ dose, or,

Note that if the individual has any external radiation dose, the allowable number of DAC-hours of internal dose must be reduced by that amount in order to keep the total dose below the 5 rem annual whole body dose limit or the 50 rem annual individual organ dose limit.

3.3.5 Administrative Limits

Licensees frequently use Administrative Limits to control the dose for periods less than a year to avoid exceeding regulatory limits and to promote ALARA. Limits of 50 mrem per day and 100 mrem per week are examples of administrative limits on whole body exposures used by some licensees.

3.3.6 Personnel Monitoring

Personnel monitoring and recording of monitoring results are generally required for any individual likely to exceed 10 percent of the limits stated in paragraphs 3.3.3 and 3.3.4.

For all workers required to be monitored, the licensee must provide those workers a dose report by April 30 for the previous calendar year's exposure (required by 10 CFR 19.13).

Also, an individual must be monitored if he or she enters a high or very high radiation area.

3.3.7 Dose Limits for Members of the Public

The dose limits for members of the public are:

- 100 mrem in a year whole body (sum of external and internal exposure),
- 2 mrem in any one hour in an unrestricted area from external sources of radiation

Limiting concentrations of radioactive materials in air and water for members of the public are given in 10 CFR Part 20, Appendix B, Table 2. These concentrations are based on a dose limit of 50 mrem per year.

3.4 Areas and Warning Signs

3.4.1 Areas and Warning Signs, Permissible Levels of Radiation/Radioactivity

Within Restricted Areas, various areas must be identified and posted to control sources of radiation exposure. These areas are summarized below:

Radiation Area-must be conspicuously posted and identified if radiation levels exceed 5 mrem in any one hour at 30 cm (about 1 foot) from the radiation source or from any surface that the radiation penetrates,

High Radiation Area-any area where the radiation levels exceed 100 mrem in one hour at 30 cm from the radiation source or from any surface that the radiation penetrates. These areas must also be:

- Locked or otherwise positively controlled (NRC allows alternative control methods up to 1,000 mrem/hr), and
- Posted and identified by barrier and posting (signs) which are separate from the radiation area barrier and posting.

Very High Radiation Area-is an area where radiation dose levels exceed 500 rad per hour at one meter from the radiation source or from any surface that the radiation penetrates. Licensees are required to institute control measures in addition to those for High Radiation Areas to ensure that an individual cannot gain unauthorized or inadvertent access to a Very High Radiation Area. Such measures may include use of shielding or cocooning of the area to control access and use of key controls, work procedures, and protective equipment, e.g., alarming personnel dosimeters.

Examples of known Very High Radaition Areas at nuclear power plants include:

- Inside containment during power operations,
- Reactor cavity (PWRs) with incore thimbles retracted,
- Traverse incore probe (TIP) room (BWRs),
- Spent fuel pool and transfer canal.

Airborne Radioactivity Area-an area in which airborne radioactive materials exceed the DACs specified in Appendix B or exist in such concentrations that an individual exposed for one week would receive an intake in excess of 0.6 percent ALI or 12 DAC-hours. For a typical 40 hour work week, this would mean that posting is required at 0.3 DAC.

Radioactive Material-areas in which licensed material is used or stored are required to be posted if the amounts exceed 10 times the quantities specified in Appendix C.

3.4.2 Other Areas and Signs

A Contamination Area (Zone) contains loose contamination, as defined by the licensee. Protective clothing is required for entry into contamination areas.

Part 50 of Title 10 of the Code of Federal Regulations, Appendix I (ALARA) limits annual doses in unrestricted areas from effluents or emissions during normal reactor operations to values ranging from 3 mrem whole body to 20 mrad to the skin of the whole body.

Part 190 of Title 40 of the Code of Federal Regulations (EPA) limits the whole body dose in unrestricted area from all fuel cycle operations, excluding mining, to 25 mrem per year.

Part 71 of Title 10 of the Code of Federal Regulations (Transportation) has a variety of limits depending on shipping material class and accessibility to the material. In general, accessible exposure levels are not to exceed 200 mrem per hour on contact and 10 mrem per hour at 1 meter.

3.4.3 Warning Signs

Examples of several warning signs are shown on Figures 3-2 through 3-6. The radiation "emblem" is magenta, purple, or black on a yellow background.

3.5 Recommendations Concerning Emergency Exposure

NRC Management Directive 10.131, provides guidance, recommendations, and limits for personnel exposures during emergencies. The maximum permissible dose values are:

- Saving of Human Life - 100 rem (only on a voluntary basis if the doses in excess of 25 rem),
- Recovery of Deceased Victims - based on PSE assessment, and
- Protection of Health and Property - based on PSE assessment.

TABLE 3-1
DOSE LIMITS AND ASSOCIATED TERMINOLOGY

Type of Exposure	10 CFR Part 20 Designation	Dose Limit
Total Whole Body Dose (Sum of External and Internal)	Total Effective Dose Equivalent (TEDE) TEDE = DDE + CEDE	5 rem/year
External Dose	Deep Dose Equivalent (DDE)	(a)
Internal Whole Body Dose	Committed Effective Dose Equivalent (CEDE)	(a)
Total Organ Dose (Sum of External and Internal)	Total Organ Dose Equivalent (TODE) TODE = DDE + CDE	50 rem/year
Internal Organ Dose	Committed Dose Equivalent (CDE)	(a)
Skin Dose	Shallow Dose Equivalent (SDE), Skin of Whole Body	50 rem/year
Extremity Dose	Shallow Dose Equivalent (SDE), Maximum Extremity	50 rem/year
Eye Dose	Eye Dose Equivalent to Lens of the Eye (LDE)	15 rem/year

(a) No separate limits per se. Included in limits for whole body and individual organs. In absence of any internal exposure, external dose is limited to 5 rem per year. In absence of any external exposure, internal exposure is limited to 2000 DAC-hours per year or 1 ALI.

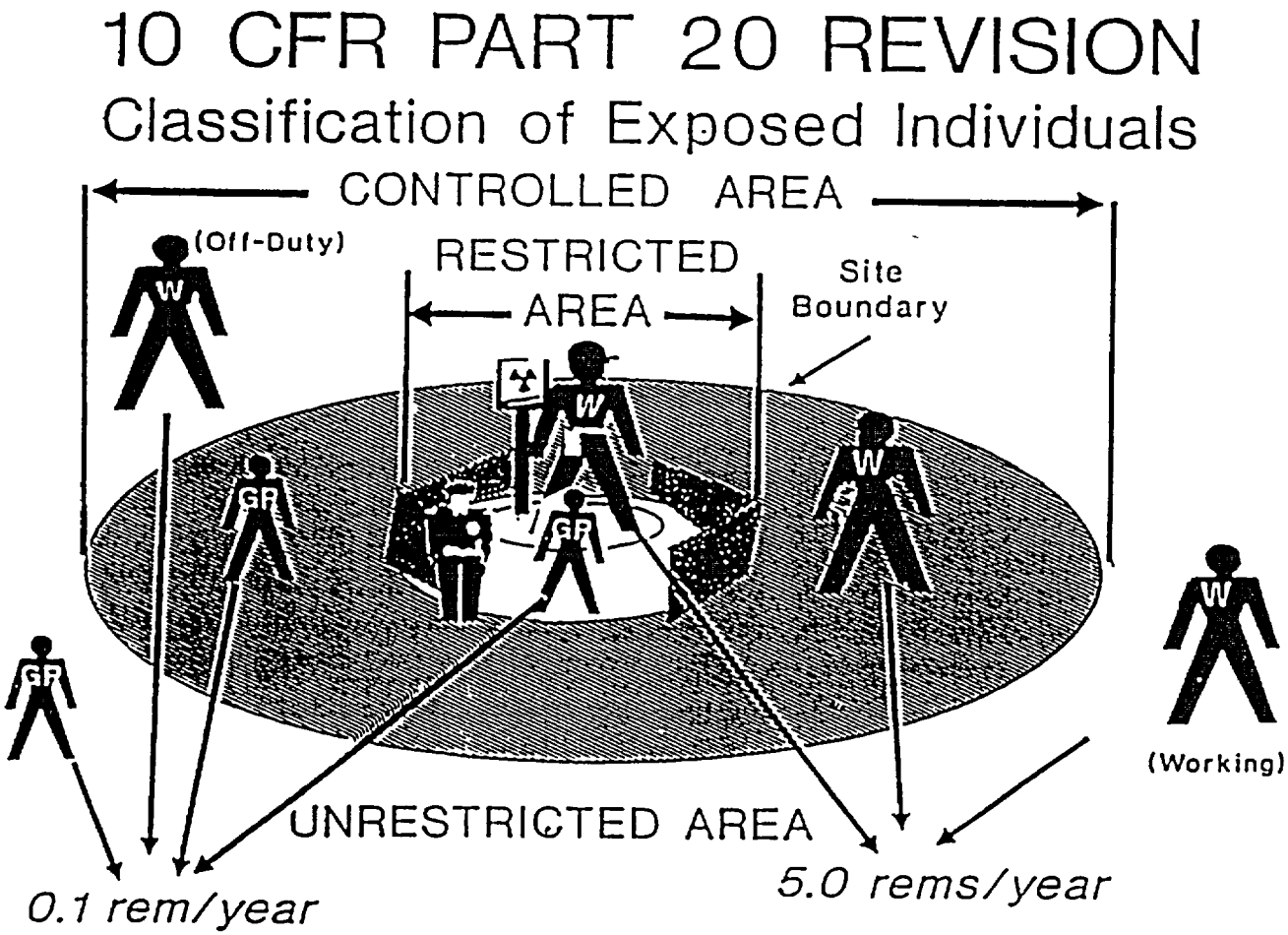


Figure 3-1 Area Classification Designations

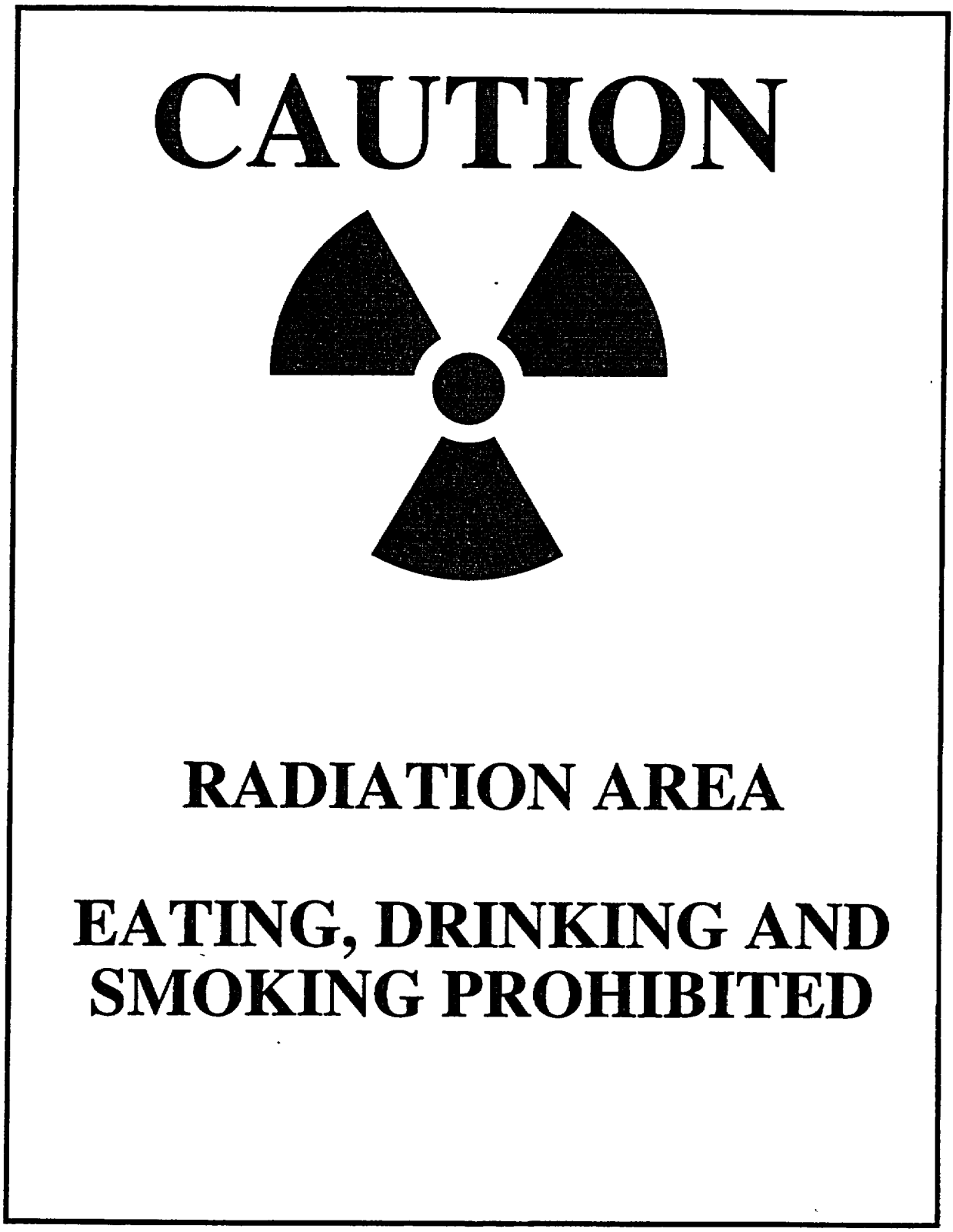


Figure 3-2 Sample "Radiation Area" Warning Sign.

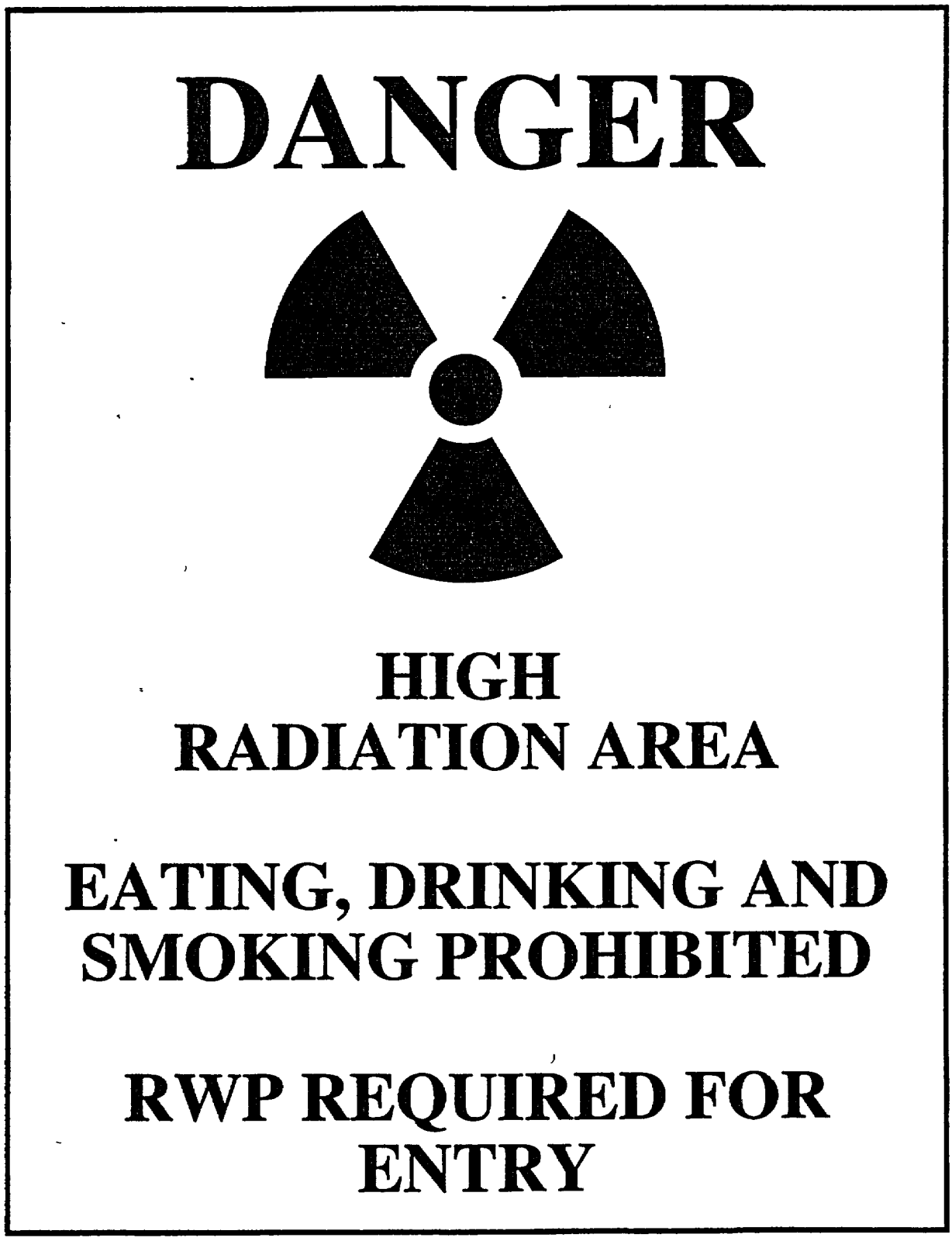


Figure 3-3 Sample "High Radiation Area" Warning Sign Requiring an RWP for Entry.

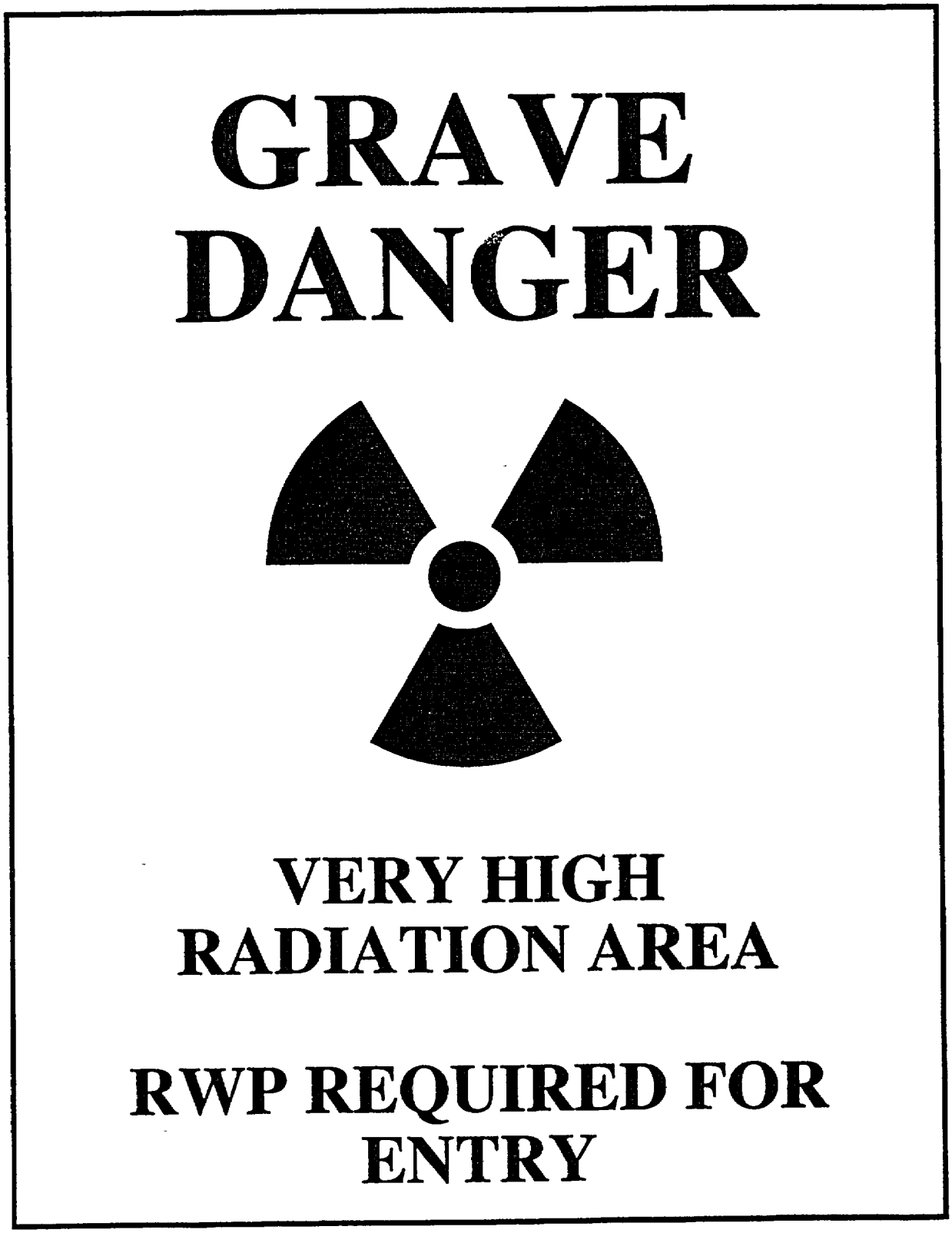
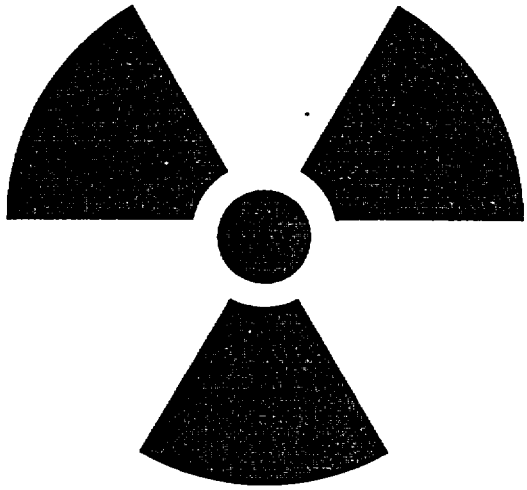


Figure 3-4 Sample "Very High Radiation Area" Sign

CAUTION



AIRBORNE RADIOACTIVITY AREA

EATING, DRINKING AND SMOKING PROHIBITED

RWP REQUIRED FOR ENTRY

Figure 3-5 Sample "Airborne Radioactivity Area" Warning Sign Requiring an RWP for Entry.

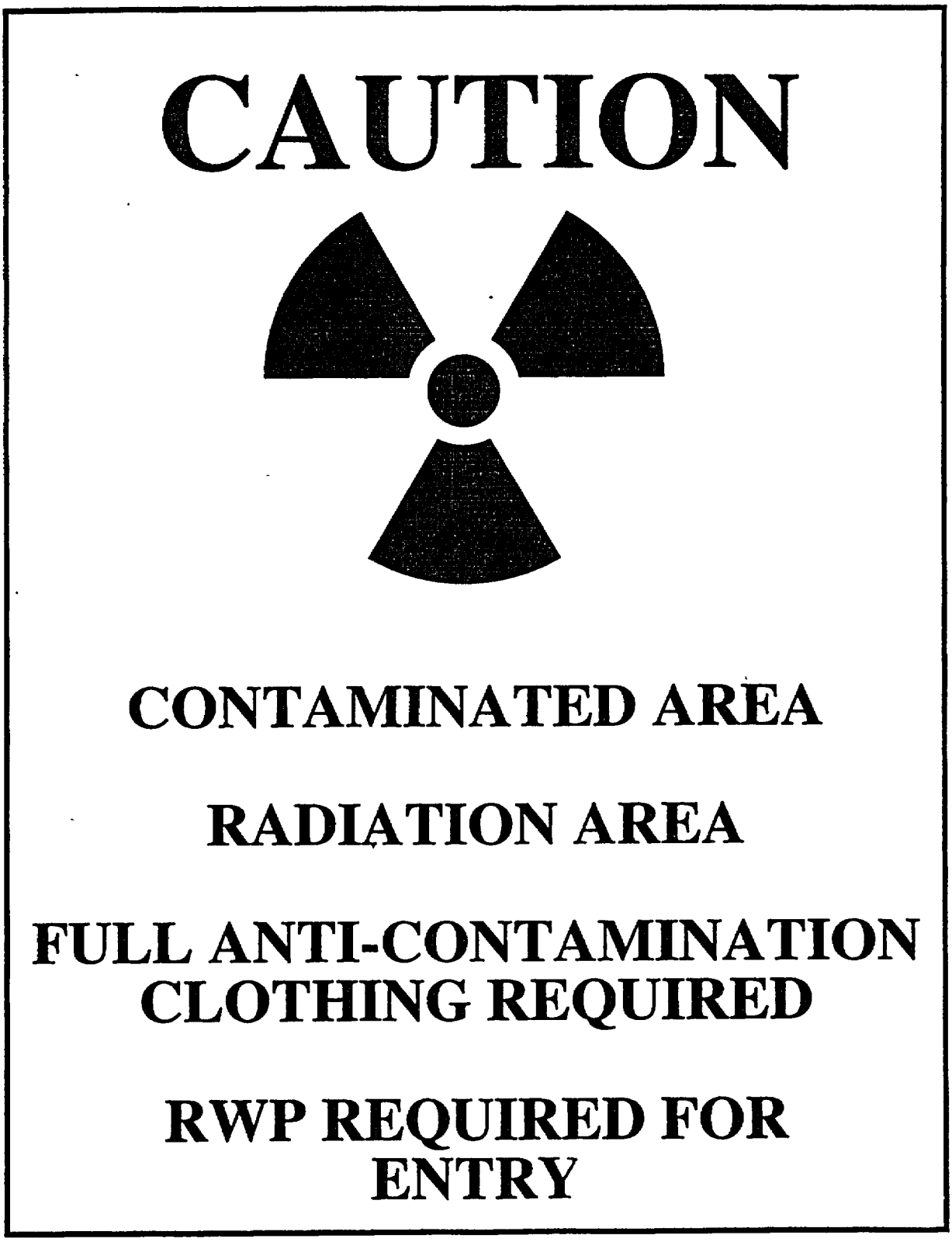


Figure 3-6 Sample "Contaminated Area" Warning Sign.

Appendix 3-1

Health Physics Position

HEALTH PHYSICS POSITION-
Compliance with Certain 10 CFR 20 Requirements for NRC Employees to be Granted Unescorted Access to Licensee Facilities:

QUESTION:

(a) In consideration of a licensee's need to comply with the requirements of 10 CFR 20.2104, "Determination of prior occupational dose," what information on the prior occupational dose of an NRC inspector, or other NRC employee, can a licensee expect the inspector (or other NRC employee) to provide when that individual is to have unescorted access to the licensee's facility?

(b) How is 10 CFR 20.1702, "Use of other controls," to be applied to NRC employees who are to have unescorted access to the licensee's facility?

ANSWER:

(a) 10 CFR 20.2104 applies to individuals who are likely to receive an occupational dose requiring individual monitoring. Under 10 CFR 20.1502, individual monitoring is required for (1) individuals who are likely to receive, in a year, 10% of the occupational dose limits at the licensee's facility and (2) for monitoring external doses, individuals who enter a high or very high radiation area.

Generally, no NRC employee is likely to receive an occupational dose exceeding 10% of the occupational dose limits in a year at any licensee's facility. However, some NRC employees, particularly inspectors, do enter high or very high radiation areas at licensee facilities and are required to be monitored. Furthermore, NRC expects that, for liability and other considerations, some licensees will want to provide appropriate dosimeters and monitoring to NRC inspectors and other NRC employees at their facilities; however, such activities should not impede or delay NRC inspection efforts. NRC employees are expected to follow licensee procedures to the greatest extent possible. Each NRC employee to whom a licensee will issue one or more individual monitoring devices will provide the licensee with a signed estimate of that employee's prior occupational dose for the current year so that the licensee can meet the requirements of 10 CFR 20.2104(a)(1) with respect to that individual as permitted by 10 CFR 20.2104(c)(1).

Under 10 CFR 20.2104(a)(2), a licensee is required only to attempt to obtain the records of cumulative occupational dose received before the current year. In addition, under 10 CFR 20.2104(b), cumulative occupational exposure information is required only when planned special exposures may be allowed. Licensees do not approve planned special exposures of NRC personnel, and it is unlikely that NRC will approve such exposures for NRC personnel.

Therefore, records of cumulative occupational dose received before the current year are not needed for control of exposure of NRC employees and will not be provided by NRC employees. At a licensee's request, an NRC employee will provide the licensee with a signed statement that records of that employee's cumulative occupational radiation dose prior to the current year, requested pursuant to 10 CFR 20.2104(a)(2), will not be provided. Access to a licensee's facility must not be limited based on the lack of cumulative occupational dose history information for an NRC employee.

The NRC has its own program for radiation protection of its employees. Monitoring and control of exposures for NRC employees are established by NRC policy, which is generally consistent with the provisions of the revised 10 CFR Part 20. For external exposure, NRC personnel are monitored through a NVLAP-accredited TLD program, and are provided appropriate dosimeters for use during their NRC-related duties.

(b) For internal exposures, NRC employees are not expected to exceed the threshold, in 10 CFR 20.1502(b), for requiring individual monitoring for intake of radioactive materials. Furthermore, because of the relatively brief exposure times of NRC employees in airborne radioactivity areas, the requirements of 10 CFR 20.1702 generally can be met for NRC employees without requiring the use of respiratory protective equipment. (Many NRC employees have not been qualified to wear respiratory protective equipment). As indicated above, NRC employees are expected to follow licensee procedures to the greatest extent possible provided that this does not result in limiting the employees' access to the facility. (Such procedures include the use of prescribed protective clothing and contamination survey requirements.) Inspectors and other NRC employees will also participate in a licensee's bioassay program, as appropriate. Positive indications of intake meeting the licensee's procedural requirements for evaluation should be evaluated in a timely manner and reported promptly to the affected individual. Reports on evaluations of intakes will be forwarded by the NRC employee to, and assessed by, the cognizant NRC Radiation Safety Officer for inclusion in NRC employee dose records.

Appendix 3-2

NRC Forms 3, 4, and 5

NRC FORM 3
(1-96)

UNITED STATES NUCLEAR REGULATORY COMMISSION
Washington, DC 20555-0001

NOTICE TO EMPLOYEES

STANDARDS FOR PROTECTION AGAINST RADIATION (PART 20); NOTICES, INSTRUCTIONS AND REPORTS TO WORKERS; INSPECTIONS (PART 19); EMPLOYEE PROTECTION

WHAT IS THE NUCLEAR REGULATORY COMMISSION?

The Nuclear Regulatory Commission is an independent Federal regulatory agency responsible for licensing and inspecting nuclear power plants and other commercial uses of radioactive materials.

WHAT DOES THE NRC DO?

The NRC's primary responsibility is to ensure that workers and the public are protected from unnecessary or excessive exposure to radiation and that nuclear facilities, including power plants, are constructed to high quality standards and operated in a safe manner. The NRC does this by establishing requirements in Title 10 of the Code of Federal Regulations (10 CFR) and in licenses issued to nuclear users.

WHAT RESPONSIBILITY DOES MY EMPLOYER HAVE?

Any company that conducts activities licensed by the NRC must comply with the NRC's requirements. If a company violates NRC requirements, it can be fined or have its license modified, suspended or revoked.

Your employer must tell you which NRC radiation requirements apply to your work and must post NRC Notices of Violation involving radiological working conditions.

WHAT IS MY RESPONSIBILITY?

For your own protection and the protection of your co-workers, you should know how NRC requirements relate to your work and should obey them. If you observe violations of the requirements or have a safety concern, you should report them.

WHAT IF I CAUSE A VIOLATION?

If you engaged in deliberate misconduct that may cause a violation of the NRC requirements, or would have caused a violation if it had not been detected, or deliberately provided inaccurate or incomplete information to either the NRC or to your employer, you may be subject to enforcement action. If you report such a violation, the NRC will consider the circumstances surrounding your reporting in determining the appropriate enforcement action, if any.

HOW DO I REPORT VIOLATIONS AND SAFETY CONCERNS?

If you believe that violations of NRC rules or the terms of the license have occurred, or if you have a safety concern, you should report them immediately to your supervisor. You may report violations or safety concerns directly to the NRC. However, the NRC encourages you to raise your concerns with the licensee since it is the licensee who has the primary responsibility for, and is most able to ensure, safe operation of nuclear facilities. If you choose to report your concern directly to the NRC, you may report this to an NRC inspector or call or write to the NRC Regional Office serving your area. If you send your concern in writing, it will assist the NRC in protecting your identity if you clearly state in the beginning of your letter that you have a safety concern or that you are submitting an allegation. The NRC's toll-free SAFETY HOTLINE for reporting safety concerns is listed below. The addresses for the NRC Regional Offices and the toll-free telephone numbers are also listed below.

WHAT IF I WORK WITH RADIOACTIVE MATERIAL OR IN THE VICINITY OF A RADIOACTIVE SOURCE?

If you work with radioactive materials or near a radiation source, the amount of radiation exposure that you are permitted to receive may be limited by NRC regulations. The limits on your exposure are contained in sections 20.1201, 20.1207, and 20.1208 of Title 10 of the Code of Federal Regulations (10 CFR 20) depending on the part of the regulations to which your employer is subject. While these are the maximum allowable limits, your employer should also keep your radiation exposure as far below those limits as "reasonably achievable."

MAY I GET A RECORD OF MY RADIATION EXPOSURE?

Yes. Your employer is required to advise you of your dose annually if you are exposed to radiation for which monitoring was required by NRC. In addition, you may request a written report of your exposure when you leave your job.

HOW ARE VIOLATIONS OF NRC REQUIREMENTS IDENTIFIED?

NRC conducts regular inspections at licensed facilities to assure compliance with NRC requirements. In addition, your employer and site contractors conduct their own inspections to assure compliance. All inspectors are protected by Federal law. Interference with them may result in criminal prosecution for a Federal offense.

MAY I TALK WITH AN NRC INSPECTOR?

Yes. NRC inspectors want to talk to you if you are worried about radiation safety or have other safety concerns about licensed activities, such as the quality of construction or operations at your facility. Your employer may not prevent you from talking with an inspector. The NRC will make all reasonable efforts to protect your identity where appropriate and possible.

MAY I REQUEST AN INSPECTION?

Yes. If you believe that your employer has not corrected violations involving radiological working conditions, you may request an inspection.

Your request should be addressed to the nearest NRC Regional Office and must describe the alleged violation in detail. It must be signed by you or your representative.

HOW DO I CONTACT THE NRC?

Talk to an NRC inspector on-site or call or write to the nearest NRC Regional Office in your geographical area (see map below). If you call the NRC's toll-free SAFETY HOTLINE during normal business hours, your call will automatically be directed to the NRC Regional Office for your geographical area. If you call after normal business hours, your call will be directed to the NRC's Headquarters Operations Center, which is manned 24 hours a day.

CAN I BE FIRED FOR RAISING A SAFETY CONCERN?

Federal law prohibits an employer from firing or otherwise discriminating against you for bringing safety concerns to the attention of your employer or the NRC. You may not be fired or discriminated against because you:

- ask the NRC to enforce its rules against your employer;
- refuse to engage in activities which violate NRC requirements;
- provide information or are about to provide information to the NRC or your employer about violations of requirements or safety concerns;
- are about to ask for, or testify, help, or take part in an NRC, Congressional, or any Federal or State proceeding.

WHAT FORMS OF DISCRIMINATION ARE PROHIBITED?

It is unlawful for an employer to fire you or discriminate against you with respect to pay, benefits, or working conditions because you help the NRC or raise a safety issue or otherwise discourage you from engaging in protected activities. Violations of Section 211 of the Energy Reorganization Act (ERA) of 1974 (42 U.S.C. 5851) include the harassment and intimidation by employers of (i) employees who bring safety concerns directly to their employers or to the NRC; (ii) employees who have refused to engage in an unlawful practice, provided that the employee has identified the illegality to the employer; (iii) employees who have testified or are about to testify before Congress or in any Federal or State proceeding regarding any provision (or proposed provision) of the ERA or the Atomic Energy Act (AEA) of 1954, (iv) employees who have commenced or caused to be commenced a proceeding for the administration or enforcement of any requirement imposed under the ERA or AEA or who have, or are about to, testify, assist, or participate in such a proceeding.

HOW DO I FILE A DISCRIMINATION COMPLAINT?

If you believe that you have been discriminated against for bringing violations or safety concerns to the NRC or your employer, you may file a complaint with the U.S. Department of Labor (DOL) pursuant to Section 211 of the ERA. Your complaint must describe the firing or discrimination and must be filed within 180 days of the occurrence. Filing an allegation, complaint, or request for action with the NRC does not extend the requirement to file a complaint with the DOL within 180 days. You must file the complaint with the DOL. The NRC cannot file the complaint for you.

Send complaints to:

Office of the Administrator
Wage and Hour Division, Room S3502
Employment Standards Administration
U.S. Department of Labor
Constitution Avenue, NW
Washington, DC 20210

or any local office of the DOL, Wage and Hour Division. Check your telephone directory under U.S. Government listings.

WHAT CAN THE DEPARTMENT OF LABOR DO?

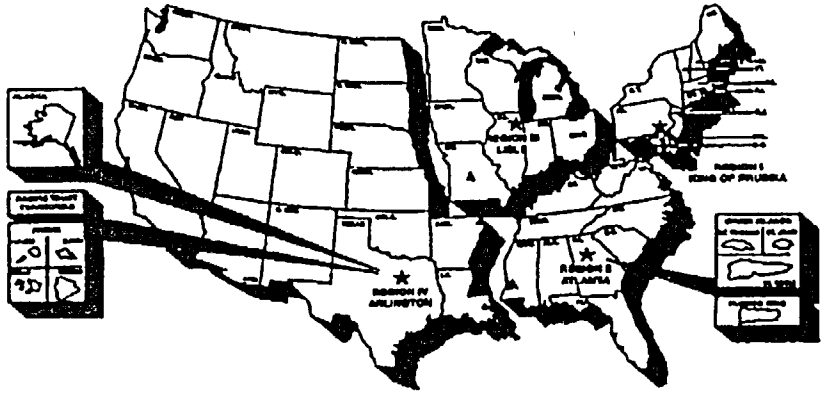
If your complaint involves a violation of Section 211 of the ERA by your employer, it is the DOL, NOT THE NRC, that provides the process for obtaining a personal remedy. The DOL will notify your employer that a complaint has been filed and will investigate your complaint.

If the DOL finds that your employer has unlawfully discriminated against you, it may order that you be reinstated, receive back pay, or be compensated for any injury suffered as a result of the discrimination.

WHAT WILL THE NRC DO?

The NRC will evaluate each allegation of harassment, intimidation, or discrimination. Following this evaluation, an investigator from the NRC's Office of Investigations may interview you and review available documentation. Based on the evaluation, and, if applicable, the interview, the NRC will assign a priority and a decision will be made whether to pursue the matter further through an investigation. The assigned priority is based on the specifics of the case and its significance relative to other ongoing investigations. The NRC may not pursue an investigation to the point that a conclusion can be made whether the harassment, intimidation, or discrimination actually occurred. Even if NRC decides not to pursue an investigation, if you have filed a complaint with DOL, the NRC will monitor the results of the DOL investigation.

If the NRC or DOL finds that unlawful discrimination has occurred, the NRC may issue a Notice of Violation to your employer, impose a fine, or suspend, modify, or revoke your employer's NRC license.



▲ • Callaway Plant Site in Missouri and Grand Gulf Plant Site in Mississippi are under the purview of Region IV.

UNITED STATES NUCLEAR REGULATORY COMMISSION REGIONAL OFFICE LOCATIONS

A representative of the Nuclear Regulatory Commission can be contacted by employees who wish to register complaints or concerns about radiological working conditions or other matters regarding compliance with Commission rules and regulations at the following addresses and telephone numbers.

REGIONAL OFFICES

REGION	ADDRESS	TELEPHONE
I	U.S. Nuclear Regulatory Commission, Region I 475 Allendale Road King of Prussia, PA 19406-1415	(800) 432-1156
II	U.S. Nuclear Regulatory Commission, Region II 101 Marietta Street, N.W., Suite 2900 Atlanta GA 30323-0199	(800) 577-8510
III	U.S. Nuclear Regulatory Commission, Region III 801 Warrenville Road Lisle, IL 60532-4351	(800) 522-3025
IV	U.S. Nuclear Regulatory Commission, Region IV 611 Ryan Plaza Drive, Suite 400 Arlington, TX 76011-8064	(800) 952-9677
WALNUT CREEK FIELD OFFICE	U.S. Nuclear Regulatory Commission 1450 Maria Lane Walnut Creek, CA 94596-5368	(800) 882-4672

To report safety concerns or violations of NRC requirements by your employer,

telephone

NRC SAFETY HOTLINE

1-800-695-7403

To report incidents involving fraud, waste, or abuse by an NRC employee or NRC contractor,

telephone:

OFFICE OF THE INSPECTOR GENERAL HOTLINE

1-800-233-3497

NRC FORM 4
(6 92)
10 CFR PART 20

U S. NUCLEAR REGULATORY COMMISSION

CUMULATIVE OCCUPATIONAL EXPOSURE HISTORY

APPROVED BY OMB NO. 3150-0005
EXPIRES:

ESTIMATED BURDEN PER RESPONSE TO COMPLY WITH THIS INFORMATION COLLECTION REQUEST: MINUTES. FORWARD COMMENTS REGARDING BURDEN ESTIMATE TO THE INFORMATION AND RECORDS MANAGEMENT BRANCH (MNBB 7714), U S. NUCLEAR REGULATORY COMMISSION, WASHINGTON, DC 20555, AND TO THE PAPERWORK REDUCTION PROJECT (3150-0005), OFFICE OF MANAGEMENT AND BUDGET, WASHINGTON, DC 20503.

1 NAME (LAST, FIRST, MIDDLE INITIAL)	2 IDENTIFICATION NUMBER	3 ID TYPE	4. SEX: MALE ☐ FEMALE ☐	5. DATE OF BIRTH

6. MONITORING PERIOD	7. LICENSEE NAME	8 LICENSE NUMBER	9. RECORD ☐ ESTIMATE ☐ NO RECORD ☐	10. ROUTINE ☐ PSE ☐

11. DDE	12. LDE	13. SDE, WB	14 SDE, ME	15 CEDE	16. CDE	17. TEDE	18. TODE

6. MONITORING PERIOD	7. LICENSEE NAME	8 LICENSE NUMBER	9. RECORD ☐ ESTIMATE ☐ NO RECORD ☐	10. ROUTINE ☐ PSE ☐

11. DDE	12. LDE	13. SDE, WB	14 SDE, ME	15 CEDE	16 CDE	17. TEDE	18. TODE

6 MONITORING PERIOD	7. LICENSEE NAME	8 LICENSE NUMBER	9. RECORD ☐ ESTIMATE ☐ NO RECORD ☐	10. ROUTINE ☐ PSE ☐

11. DDE	12. LDE	13. SDE, WB	14 SDE, ME	15 CEDE	16 CDE	17. TEDE	18. TODE

6 MONITORING PERIOD	7. LICENSEE NAME	8 LICENSE NUMBER	9. RECORD ☐ ESTIMATE ☐ NO RECORD ☐	10. ROUTINE ☐ PSE ☐

11 DDE	12. LDE	13 SDE, WB	14 SDE, ME	15 CEDE	16. CDE	17. TEDE	18. TODE

6 MONITORING PERIOD	7. LICENSEE NAME	8 LICENSE NUMBER	9. RECORD ☐ ESTIMATE ☐ NO RECORD ☐	10. ROUTINE ☐ PSE ☐

11 DDE	12 LDE	13 SDE, WB	14 SDE, ME	15 CEDE	16 CDE	17. TEDE	18 TODE

19 SIGNATURE OF MONITORED INDIVIDUAL	20 DATE SIGNED	21 CERTIFYING ORGANIZATION	22 SIGNATURE OF DESIGNEE	23. DATE SIGNED

NRC FORM 5
(6-92)
10 CFR PART 20

U.S. NUCLEAR REGULATORY COMMISSION

OCCUPATIONAL EXPOSURE RECORD FOR A MONITORING PERIOD

APPROVED BY OMB NO. 3150-0006
EXPIRES:

ESTIMATED BURDEN PER RESPONSE TO COMPLY WITH THIS INFORMATION COLLECTION REQUEST: MINUTES FORWARD COMMENTS REGARDING BURDEN ESTIMATE TO THE INFORMATION AND RECORDS MANAGEMENT BRANCH (MNBB 7714), U.S. NUCLEAR REGULATORY COMMISSION, WASHINGTON, DC 20555, AND TO THE PAPERWORK REDUCTION PROJECT (3150-0006), OFFICE OF MANAGEMENT AND BUDGET, WASHINGTON, DC 20503

1. NAME (LAST, FIRST, MIDDLE INITIAL)	2. IDENTIFICATION NUMBER	3. ID TYPE	4. SEX ☐ MALE ☐ FEMALE	6. DATE OF BIRTH

6. MONITORING PERIOD	7. LICENSEE NAME	8. LICENSE NUMBER(S)	9A.	9B.
			☐ RECORD	☐ ROUTINE
			☐ ESTIMATE	☐ PSE

INTAKES

10A. RADIONUCLIDE	10B. CLASS	10C. MODE	10D. INTAKE IN μCi

DOSES (in rem)

DEEP DOSE EQUIVALENT	(DDE)	11.
EYE DOSE EQUIVALENT TO THE LENS OF THE EYE	(LDE)	12.
SHALLOW DOSE EQUIVALENT, WHOLE BODY	(SDE,WB)	13.
SHALLOW DOSE EQUIVALENT, MAX EXTREMITY	(SDE,ME)	14.
COMMITTED EFFECTIVE DOSE EQUIVALENT	(CEDE)	15.
COMMITTED DOSE EQUIVALENT, MAXIMALLY EXPOSED ORGAN	(CDE)	16
TOTAL EFFECTIVE DOSE EQUIVALENT *(BLOCKS 11 + 15)*	*(TEDE)*	17.
TOTAL ORGAN DOSE EQUIVALENT, MAX ORGAN *(BLOCKS 11 + 16)*	*(TODE)*	18.

19. COMMENTS

20. SIGNATURE -- LICENSEE

21. DATE PREPARED

Appendix 3-3

10 CFR Part 19

PART 19 NOTICES, INSTRUCTIONS, AND REPORTS TO WORKERS: INSPECTION AND INVESTIGATIONS

19.1 Purpose.
19.2 Scope.
19.3 Definitions.
19.4 Interpretations.
19.5 Communications.
19.8 Information collection requirements: OMB approval.
19.11 Posting of notices to workers.
19.12 Instruction to workers.
19.13 Notifications and reports to individuals.
19.14 Presence of representatives of licensees and workers during inspections.
19.15 Consultation with workers during inspections.
19.16 Requests by workers for inspections.
19.17 Inspections not warranted; informal review.
19.18 Sequestration of witnesses and exclusion of counsel in interviews conducted under subpoena.
19.20 Employee protection.
19.30 Violations.
19.31 Application for exemptions.
19.32 Discrimination prohibited.
19.40 Criminal penalties.

59 FR 48944

Authority: Secs. 53, 63, 81, 103, 104, 161, 186, 68 Stat. 930, 933, 935, 936, 937, 948, 955, as amended, sec. 234, 83 Stat. 444, as amended, sec. 1701, 106 Stat. 2951, 2952, 2953 (42 U.S.C. 2073, 2093, 2111, 2133, 2134, 2201, 2236, 2282, 2297f); sec. 201, 88 Stat. 1242, as amended (42 U.S.C. 5841); Pub. L. 95–601, sec. 10, 92 Stat. 2951 (42 U.S.C. 5851).

55 FR 243

§ 19.1 Purpose.

The regulations in this part establish requirements for notices, instructions, and reports by licensees to individuals participating in licensed activities and options available to these individuals in connection with Commission inspections of licensees to ascertain compliance with the provisions of the Atomic Energy Act of 1954, as amended, Title II of the Energy Reorganization Act of 1974, and regulations, orders, and licenses thereunder regarding radiological working conditions. The regulations in this part also establish the rights and responsibilities of the Commission and individuals during interviews compelled by subpoena as part of agency inspections or investigations pursuant to section 161c of the Atomic Energy Act of 1954, as amended, on any matter within the Commission's jurisdiction.

61 FR 9901

§ 19.2 Scope.

The regulations in this part apply to all persons who receive, possess, use, or transfer material licensed by the Nuclear Regulatory Commission pursuant to the regulations in parts 30 through 36, 39, 40, 60, 61, 70, or part 72 of this chapter, including persons licensed to operate a production or utilization facility pursuant to part 50 of this chapter, persons licensed to possess power reactor spent fuel in an independent spent fuel storage installation (ISFSI) pursuant to part 72 of this chapter, and in accordance with 10 CFR 76.60 to persons required to obtain a certificate of compliance or an approved compliance plan under part 76 of this chapter. The regulations regarding interviews of individuals under subpoena apply to all investigations and inspections within the jurisdiction of the Nuclear Regulatory Commission other than those involving NRC employees or NRC contractors. The regulations in this part do not apply to subpoenas issued pursuant to 10 CFR 2.720.

55 FR 243

§ 19.3 Definitions.

As used in this part:

"Act" means the Atomic Energy Act of 1954, (68 Stat. 919) including any amendments thereto.

"Commission" means the United States Nuclear Regulatory Commission.

57 FR 61780

Exclusion means the removal of counsel representing multiple interests from an interview whenever the NRC official conducting the interview has concrete evidence that the presence of the counsel would obstruct and impede the particular investigation or inspection.

58 FR 7715

"License" means a license issued under the regulations in Parts 30 through 36, 39, 40, 60, 61, 70, or 72 of this chapter, including licenses to operate a production or utilization facility pursuant to Part 50 of this chapter. "Licensee" means the holder of such a license.

56 FR 23360

Restricted area means an area, access to which is limited by the licensee for the purpose of protecting individuals against undue risks from exposure to radiation and radioactive materials. Restricted area does not include areas used as residential quarters, but separate rooms in a residential building may be set apart as a restricted area.

55 FR 243

"Sequestration" means the separation or isolation of witnesses and their attorneys from other witnesses and their attorneys during an interview conducted as part of an investigation, inspection, or other inquiry.

"Worker" means an individual engaged in activities licensed by the Commission and controlled by a licensee, but does not include the licensee.

38 FR 22217

§ 19.4 Interpretations.

Except as specifically authorized by the Commission in writing, no interpretation of the meaning of the regulations in this part by any officer or employee of the Commission other than a written interpretation by the General Counsel will be recognized to be binding upon the Commission.

53 FR 43419

§ 19.5 Communications.

Except where otherwise specified in this part, all communications and reports concerning the regulations in this part should be addressed to the Regional Administrator of the appropriate U.S. Nuclear Regulatory Commission Regional Office listed in Appendix D of Part 20 of this chapter. Communications, reports, and applications may be delivered in person at the Commission's offices at 2120 L Street, NW., Washington, DC, or at 11555 Rockville Pike, Rockville, Maryland.

49 FR 19623

§ 19.8 Information collection requirements: OMB approval.

(a) The Nuclear Regulatory Commission has submitted the information collection requirements contained in this part to the Office of Management and Budget (OMB) for approval as required by the Paperwork Reduction Act of 1980 (44 U.S.C. 3501 et seq.). OMB has approved the information collection requirements contained in this part under control number 3150-0044.

(b) The approved information collection requirements contained in this part appear in § 19.13.

38 FR 22217

§ 19.11 Posting of notices to workers.

(a) Each licensee shall post current copies of the following documents:

(1) The regulations in this part and in Part 20 of this chapter;

(2) The license, license conditions, or documents incorporated into a license by reference, and amendments thereto;

(3) The operating procedures applicable to licensed activities;

(4) Any notice of violation involving radiological working conditions, proposed imposition of civil penalty, or order issued pursuant to Subpart B of Part 2 of this chapter, and any response from the licensee.

(b) If posting of a document specified in paragraph (a) (1), (2) or (3) of this section is not practicable, the licensee may post a notice which describes the document and states where it may be examined.

61 FR 6762

≫(c)(1) Each licensee and each applicant for a specific license shall prominently post NRC Form 3 (Revision dated January 1996), "Notice to Employees."

(2) Copies of NRC Form 3 may be obtained by writing to the Regional Administrator of the appropriate U.S. Nuclear Regulatory Commission Regional Office listed in Appendix D to Part 20 of this chapter or by calling the NRC Information and Records Management Branch at (301) 415-7230.

38 FR 22217

(d) Documents, notices, or forms posted pursuant to this section shall appear in a sufficient number of places to permit individuals engaged in licensed activities to observe them on the way to or from any particular licensed activity location to which the document applies, shall be conspicuous, and shall be replaced if defaced or altered.

(e) Commission documents posted pursuant to paragraph (a)(4) of this section shall be posted within 2 working days after receipt of the documents from the Commission; the licensee's response, if any, shall be posted within 2 working days after dispatch by the licensee. Such documents shall remain posted for a minimum of 5 working days or until action correcting the violation has been completed, whichever is later.

60 FR 36038

§ 19.12 Instruction to workers.

(a) All individuals who in the course of employment are likely to receive in a year an occupational dose in excess of 100 mrem (1 mSv) shall be—

(1) Kept informed of the storage, transfer, or use of radiation and/or radioactive material;

(2) Instructed in the health protection problems associated with exposure to radiation and/or radioactive material, in precautions or procedures to minimize exposure, and in the purposes and functions of protective devices employed;

(3) Instructed in, and required to observe, to the extent within the workers control, the applicable provisions of Commission regulations and licenses for the protection of personnel from exposure to radiation and/or radioactive material;

(4) Instructed of their responsibility to report promptly to the licensee any condition which may lead to or cause a violation of Commission regulations and licenses or unnecessary exposure to radiation and/or radioactive material;

(5) Instructed in the appropriate response to warnings made in the event of any unusual occurrence or malfunction that may involve exposure to radiation and/or radioactive material; and

(6) Advised as to the radiation exposure reports which workers may request pursuant to § 19.13.

(b) In determining those individuals subject to the requirements of paragraph (a) of this section, licensees must take into consideration assigned activities during normal and abnormal situations involving exposure to radiation and/or radioactive material which can reasonably be expected to occur during the life of a licensed facility. The extent of these instructions must be commensurate with potential radiological health protection problems present in the work place.

38 FR 22217

§ 19.13 Notifications and reports to individuals.

(a) Radiation exposure data for an individual, and the results of any measurements, analyses, and calculations of radioactive material deposited or retained in the body of an individual, shall be reported to the individual as specified in this section. The information reported shall include data and results obtained pursuant to Commission regulations, orders or license conditions, as shown in records maintained by the licensee pursuant to Commission regulations. Each notification and report shall: be in writing; include appropriate identifying data such as the name of the licensee, the name of the individual, the individual's social security number; include the individual's exposure information; and contain the following statement:

This report is furnished to you under the provisions of the Nuclear Regulatory Commission regulation 10 CFR Part 19. You should preserve this report for further reference.

58 FR 67657

(b) Each licensee shall advise each worker annually of the worker's dose as shown in records maintained by the licensee pursuant to the provisions of § 20.2106 of 10 CFR part 20.

59 FR 41641

(c)(1) At the request of a worker formerly engaged in licensed activities controlled by the licensee, each licensee shall furnish to the worker a report of the worker's exposure to radiation and/or to radioactive material:

(i) As shown in records maintained by the licensee pursuant to §20.2106 for each year the worker was required to be monitored under the provisions of § 20.1502; and

(ii) For each year the worker was required to be monitored under the monitoring requirements in effect prior to January 1, 1994.

(2) This report must be furnished within 30 days from the time the request is made or within 30 days after the exposure of the individual has been determined by the licensee, whichever is later. This report must cover the period of time that the worker's activities involved exposure to radiation from radioactive material licensed by the Commission and must include the dates and locations of licensed activities in which the worker participated during this period.

58 FR 67657

(d) When a licensee is required pursuant to §§ 20.2202, 20.2203, 20.2204, or 20.2206 of this chapter to report to the Commission any exposure of an individual to radiation or radioactive material the licensee shall also provide the individual a report on his or her exposure data included therein. This report must be transmitted at a time not later than the transmittal to the Commission.

58 FR 67657

(e) At the request of a worker who is terminating employment with the licensee that involved exposure to radiation or radioactive materials, during the current calendar quarter or the current year, each licensee shall provide at termination to each worker, or to the worker's designee, a written report regarding the radiation dose received by that worker from operations of the licensee during the current year or fraction thereof. If the most recent individual monitoring results are not available at that time, a written estimate of the dose must be provided together with a clear indication that this is an estimate.

38 FR 22217

§ 19.14 Presence of representatives of licensees and workers during inspections.

(a) Each licensee shall afford to the Commission at all reasonable times opportunity to inspect materials, activities, facilities, premises, and records pursuant to the regulations in this chapter.

(b) During an inspection, Commission inspectors may consult privately with workers as specified in § 19.15. The licensee or licensee's representative may accompany Commission inspectors during other phrases of an inspection.

(c) If, at the time of inspection, an individual has been authorized by the workers to represent them during Commission inspections, the licensee shall notify the inspectors of such authorization and shall give the workers' representative an opportunity to accompany the inspectors during the inspection of physical working conditions.

(d) Each workers' representative shall be routinely engaged in licensed activities under control of the licensee and shall have received instructions as specified in § 19.12.

(e) Different representatives of licensees and workers may accompany the inspectors during different phases of an inspection if there is no resulting interference with the conduct of the inspection. However, only one workers' representative at a time may accompany the inspectors.

(f) With the approval of the licensee and the workers' representative an individual who is not routinely engaged in licensed activities under control of the license, for example, a consultant to the licensee or to the workers' representative, shall be afforded the opportunity to accompany Commission inspectors during the inspection of physical working conditions.

(g) Notwithstanding the other provisions of this section, Commission inspectors are authorized to refuse to permit accompaniment by any individual who deliberately interferes with a fair and orderly inspection. With regard to areas containing information classified by an agency of the U.S. Government in the interest of national security, an individual who accompanies an inspector may have access to such information only if authorized to do so. With regard to any area containing proprietary information, the workers' representative for that area shall be an individual previously authorized by the licensee to enter that area.

38 FR 22217

§ 19.15 Consultation with workers during inspections.

(a) Commission inspectors may consult privately with workers concerning matters of occupational radiation protection and other matters related to applicable provisions of Commission regulations and licenses to the extent the inspectors deem necessary for the conduct of an effective and thorough inspection.

(b) During the course of an inspection any worker may bring privately to the attention of the inspectors, either orally or in writing, any past or present condition which he has reason to believe may have contributed to or caused any violation of the act, the regulations in this chapter, or license condition, or any unnecessary exposure of an individual to radiation from licensed radioactive material under the licensee's control. Any such notice in writing shall comply with the requirements of § 19.16(a).

(c) The provisions of paragraph (b) of this section shall not be interpreted as authorization to disregard instructions pursuant to § 19.12.

52 FR 31601

§ 19.16 Requests by workers for inspections.

(a) Any worker or representative of workers who believes that a violation of the Act, the regulations in this chapter, or license conditions exists or has occurred in license activities with regard to radiological working conditions in which the worker is engaged, may request an inspection by giving notice of the alleged violation to the Administrator of the appropriate Commission Regional Office, or to Commission inspectors. Any such notice shall be in writing, shall set forth the specific grounds for the notice, and shall be signed by the worker or representative of workers. A copy shall be provided the licensee by the Regional Office Administrator, or the inspector no later than at the time of inspection except that, upon the request of the worker giving such notice, his name and the name of individuals referred to therein shall not appear in such copy or on any record published, released or made available by the Commission, except for good cause shown.

(b) If, upon receipt of such notice, the Regional Office Administrator determines that the complaint meets the requirements set forth in paragraph (a) of this section, and that there are reasonable grounds to believe that the alleged violation exists or has occurred, he shall cause an inspection to be made as soon as practicable, to determine if such alleged violation exists or has occurred. Inspections pursuant to this section need not be limited to matters referred to in the complaint.

§ 19.17 Inspections not warranted; informal review.

(a) If the Administrator of the appropriate Regional Office determines, with respect to a complaint under § 19.16, that an inspection is not warranted because there are no reasonable grounds to believe that a violation exists or has occurred, he shall notify the complainant in writing of such determination. The complainant may obtain review of such determination by submitting a written statement of position with the Executive Director for Operation, U.S. Nuclear Regulatory Commission, Washington, D.C. 20555, who will provide the licensee with a copy of such statement by certified mail, excluding, at the request of the complainant, the name of the complainant. The licensee may submit an opposing written statement of position with the Executive Director for Operations who will provide the complainant with a copy of such statement by certified mail. Upon the request of the complainant, the Executive Director for Operations or his designee may hold an informal conference in which the complainant and the licensee may orally present their views. An informal conference may also be held at the request of the licensee, but disclosure of the identity of the complainant will be made only following receipt of written authorization from the complainant. After considering all written and oral views presented, the Executive Director for Operations shall affirm, modifying, or reverse the determination of the Administrator of the appropriate Regional Office and furnish the complainant and the licensee a written notification of his decision and the reason therefor.

(b) If the Administrator of the appropriate Regional Office determines that an inspection is not warranted because the requirements of § 19.16(a) have not been met, he shall notify the complainant in writing of such determination. Such determination shall be without prejudice to the filing of a new complaint meeting the requirements of § 19.16(a).

55 FR 243

§ 19.18 Sequestration of witnesses and exclusion of counsel in interviews conducted under subpoena.

(a) All witnesses compelled by subpoena to submit to agency interviews shall be sequestered unless the official conducting the interviews permits otherwise.

57 FR 61780

(b) Any witness compelled by subpoena to appear at an interview during an agency inquiry may be accompanied, represented, and advised by counsel of his or her choice. However, when the agency official conducting the inquiry determines, after consultation with the Office of the General Counsel, that the agency has concrete evidence that the presence of an attorney representing multiple interests would obstruct and impede the investigation or inspection, the agency official may prohibit that counsel from being present during the interview.

(c) The interviewing official is to provide a witness whose counsel has been excluded under paragraph (b) of this section and the witness's counsel a written statement of the reasons supporting the decision to exclude. This statement, which must be provided no later than five working days after exclusion, must explain the basis for the counsel's exclusion. This statement must also advise the witness of the witness' right to appeal the exclusion decision and obtain an automatic stay of the effectiveness of the subpoena by filing a motion to quash the subpoena with the Commission within five days of receipt of this written statement.

(d) Within five days after receipt of the written notification required in paragraph (c) of this section, a witness whose counsel has been excluded may appeal the exclusion decision by filing a motion to quash the subpoena with the Commission. The filing of the motion to quash will stay the effectiveness of the subpoena pending the Commission's decision on the motion.

(e) If a witness' counsel is excluded under paragraph (b) of this section, the interview may, at the witness' request, either proceed without counsel or be delayed for a reasonable period of time to permit the retention of new counsel. The interview may also be rescheduled to a subsequent date established by the NRC, although the interview shall not be rescheduled by the NRC to a date that precedes the expiration of the time provided under § 19.18(d) for appeal of the exclusion of counsel, unless the witness consents to an earlier date.

61 FR 6762

§ 19.20 Employee protection.

Employment discrimination by a licensee (or a holder of a certificate of compliance issued pursuant to Part 76) or a contractor or subcontractor of a licensee (or a holder of a certificate of compliance issued pursuant to Part 76) against an employee for engaging in protected activities under this part or Parts 30, 40, 50, 60, 61, 70, 72, 76, or 150 of this chapter is prohibited.

57 FR 55062

§ 19.30 Violations.

(a) The Commission may obtain an injunction or other court order to prevent a violation of the provisions of—

(1) The Atomic Energy Act of 1954, as amended;

(2) Title II of the Energy Reorganization Act of 1974, as amended; or

(3) A regulation or order issued pursuant to those Acts.

(b) The Commission may obtain a court order for the payment of a civil penalty imposed under section 234 of the Atomic Energy Act:

(1) For violations of—

(i) Sections 53, 57, 62, 63, 81, 82, 101, 103, 104, 107, or 109 of the Atomic Energy Act of 1954, as amended;

(ii) Section 206 of the Energy Reorganization Act;

(iii) Any rule, regulation, or order issued pursuant to the sections specified in paragraph (b)(1)(i) of this section;

(iv) Any term, condition, or limitation of any license issued under the sections specified in paragraph (b)(1)(i) of this section.

(2) For any violation for which a license may be revoked under section 186 of the Atomic Energy Act of 1954, as amended.

38 FR 22217

§ 19.31 Application for exemptions.

The Commission may upon application by any licensee or upon its own initiative, grant such exemptions from the requirements of the regulations in this part as it determines are authorized by law and will not result in undue hazard to life or property.

40 FR 8774

§ 19.32 Discrimination prohibited.

No person shall on the ground of sex be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity licensed by the Nuclear Regulatory Commission. This provision will be enforced through agency provisions and rules similar to those already established, with respect to racial and other discrimination, under Title VI of the Civil Rights Act of 1964. This remedy is not exclusive, however, and will not prejudice or cut off any other legal remedies available to a discriminatee.

57 FR 55062

§ 19.40 Criminal penalties.

(a) Section 223 of the Atomic Energy Act of 1954, as amended, provides for criminal sanctions for willful violation of, attempted violation of, or conspiracy to violate, any regulation issued under sections 161b, 161i, or 161o of the Act. For purposes of section 223, all the regulations in part 19 are issued under one or more of sections 161b, 161i, or 161o, except for the sections listed in paragraph (b) of this section.

(b) The regulations in part 19 that are not issued under sections 161b, 161i, or 161o for the purposes of section 223 are as follows: §§ 19.1, 19.2, 19.3, 19.4, 19.5, 19.8, 19.16, 19.17, 19.18, 19.30, 19.31, and 19.40.

Appendix 3-4

10 CFR Part 20

PART 20

STANDARDS FOR PROTECTION AGAINST RADIATION

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59 FR 48944

Authority: Secs. 53, 63, 65, 81, 103, 104, 161, 182, 186, 68 Stat. 930, 933, 935, 936, 937, 948, 953, 955, as amended, sec. 1701, 106 Stat. 2951, 2952, 2953 (42 U.S.C. 2073, 2093, 2095, 2111, 2133, 2134, 2201, 2232, 2236, 2297f), secs. 201, as amended, 202, 206, 88 Stat. 1242, as amended, 1244, 1246 (42 U.S.C. 5841, 5842, 5846).

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[Removed 59 FR 1900.]

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[Redesignated 59 FR 1900.]

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[Removed 59 FR 1900.]

Subpart A—General Provisions

56 FR 23360

§ 20.1001 Purpose.

(a) The regulations in this part establish standards for protection against ionizing radiation resulting from activities conducted under licenses issued by the Nuclear Regulatory Commission. These regulations are issued under the Atomic Energy Act of 1954, as amended, and the Energy Reorganization Act of 1974, as amended.

(b) It is the purpose of the regulations in this part to control the receipt, possession, use, transfer, and disposal of licensed material by any licensee in such a manner that the total dose to an individual (including doses resulting from licensed and unlicensed radioactive material and from radiation sources other than background radiation) does not exceed the standards for protection against radiation prescribed in the regulations in this part. However, nothing in this part shall be construed as limiting actions that may be necessary to protect health and safety.

62 FR 4120

§ 20.1002 Scope.

The regulations in this part apply to persons licensed by the Commission to receive, possess, use, transfer, or dispose of byproduct, source, or special nuclear material or to operate a production or utilization facility under parts 30 through 35, 39, 40, 50, 60, 61, 70, or 72 of this chapter. The limits in this part do not apply to doses due to background radiation, to exposure of patients to radiation for the purpose of medical diagnosis or therapy, to exposure from individuals administered radioactive material and released in accordance with § 35.75, or to exposure from voluntary participation in medical research programs.

§ 20.1003 Definitions.

As used in this part:

Absorbed dose means the energy imparted by ionizing radiation per unit mass of irradiated material. The units of absorbed dose are the rad and the gray (Gy).

Act means the Atomic Energy Act of 1954 (42 U.S.C. 2011 et seq.), as amended.

Activity is the rate of disintegration (transformation) or decay of radioactive material. The units of activity are the curie (Ci) and the becquerel (Bq).

Adult means an individual 18 or more years of age.

Airborne radioactive material means radioactive material dispersed in the air in the form of dusts, fumes, particulates, mists, vapors, or gases.

Airborne radioactivity area means a room, enclosure, or area in which airborne radioactive materials, composed wholly or partly of licensed material, exist in concentrations—

(1) In excess of the derived air concentrations (DACs) specified in appendix B, to §§ 20.1001–20.2401, or

(2) To such a degree that an individual present in the area without respiratory protective equipment could exceed, during the hours an individual is present in a week, an intake of 0.6 percent of the annual limit on intake (ALI) or 12 DAC-hours.

ALARA (acronym for "as low as is reasonably achievable") means making every reasonable effort to maintain exposures to radiation as far below the dose limits in this part as is practical consistent with the purpose for which the licensed activity is undertaken, taking into account the state of technology, the economics of improvements in relation to state of technology, the economics of improvements in relation to benefits to the public health and safety, and other societal and socioeconomic considerations, and in relation to utilization of nuclear energy and licensed materials in the public interest.

Annual limit on intake (ALI) means the derived limit for the amount of radioactive material taken into the body of an adult worker by inhalation or ingestion in a year. ALI is the smaller value of intake of a given radionuclide in a year by the reference man that would result in a committed effective dose equivalent of 5 rems (0.05 Sv) or a committed dose equivalent of 50 rems (0.5 Sv) to any individual organ or tissue. (ALI values for intake by ingestion and by inhalation of selected radionuclides are given in Table 1, Columns 1 and 2, of appendix B to §§ 20.1001–20.2401).

56 FR 23360

≫ *Background radiation* means radiation from cosmic sources; naturally occurring radioactive material, including radon (except as a decay product of source or special nuclear material); and global fallout as it exists in the environment from the testing of nuclear explosive devices or from past nuclear accidents such as Chernobyl that contribute to background radiation and are not under the control of the licensee. "*Background radiation*" does not include radiation from source, byproduct, or special nuclear materials regulated by the Commission.

62 FR 39058

Bioassay (radiobioassay) means the determination of kinds, quantities or concentrations, and, in some cases, the locations of radioactive material in the human body, whether by direct measurement (in vivo counting) or by analysis and evaluation of materials excreted or removed from the human body.

Byproduct material means—

(1) Any radioactive material (except special nuclear material) yielded in, or made radioactive by, exposure to the radiation incident to the process of producing or utilizing special nuclear material; and

(2) The tailings or wastes produced by the extraction or concentration of uranium or thorium from ore processed primarily for its source material content, including discrete surface wastes resulting from uranium solution extraction processes. Underground ore bodies depleted by these solution extraction operations do not constitute "byproduct material" within this definition.

56 FR 23360

56 FR 23360

Class (or *lung class* or *inhalation class*) means a classification scheme for inhaled material according to its rate of clearance from the pulmonary region of the lung. Materials are classified as D, W, or Y, which applies to a range of clearance half-times: for Class D (Days) of less than 10 days, for Class W (Weeks) from 10 to 100 days, and for Class Y (Years) of greater than 100 days.

Collective dose is the sum of the individual doses received in a given period of time by a specified population from exposure to a specified source of radiation.

Commission means the Nuclear Regulatory Commission or its duly authorized representatives.

Committed dose equivalent ($H_{T,50}$) means the dose equivalent to organs or tissues of reference (T) that will be received from an intake of radioactive material by an individual during the 50-year period following the intake.

Committed effective dose equivalent ($H_{E,50}$) is the sum of the products of the weighting factors applicable to each of the body organs or tissues that are irradiated and the committed dose equivalent to these organs or tissues ($H_{E,50} = \Sigma w_T H_{T,50}$).

61 FR 65120

Constraint (dose constraint) means a value above which specified licensee actions are required.

56 FR 23360

Controlled area means an area, outside of a restricted area but inside the site boundary, access to which can be limited by the licensee for any reason.

62 FR 39058

≫ *Critical Group* means the group of individuals reasonably expected to receive the greatest exposure to residual radioactivity for any applicable set of circumstances.

56 FR 23360

Declared pregnant woman means a woman who has voluntarily informed her employer, in writing, of her pregnancy and the estimated date of conception.

62 FR 39058

≫ *Decommission* means to remove a facility or site safely from service and reduce residual radioactivity to a level that permits—

(1) Release of the property for unrestricted use and termination of the license; or

(2) Release of the property under restricted conditions and termination of the license.

56 FR 23360

Deep-dose equivalent (H_d), which applies to external whole-body exposure, is the dose equivalent at a tissue depth of 1 cm (1000 mg/cm^2).

Department means the Department of Energy established by the Department of Energy Organization Act (Pub. L. 95–91, 91 Stat. 565, 42 U.S.C. 7101 et seq.) to the extent that the Department, or its duly authorized representatives, exercises functions formerly vested in the U.S. Atomic Energy Commission, its Chairman, members, officers, and components and transferred to the U.S. Energy Research and Development Administration and to the Administrator thereof pursuant to sections 104 (b), (c), and (d) of the Energy Reorganization Act of 1974 (Pub. L. 93–438, 88 Stat. 1233 at 1237, 42 U.S.C. 5814) and retransferred to the Secretary of Energy pursuant to section 301(a) of the Department of Energy Organization Act (Pub. L. 95–91, 91 Stat 565 at 577–578, 42 U.S.C. 7151).

Derived air concentration (DAC) means the concentration of a given radionuclide in air which, if breathed by the reference man for a working year of 2,000 hours under conditions of light work (inhalation rate 1.2 cubic meters of air per hour), results in an intake of one ALI. DAC values are given in Table 1, Column 3, of appendix B to §§ 20.1001–20.2401.

Derived air concentration-hour (DAC-hour) is the product of the concentration of radioactive material in air (expressed as a fraction or multiple of the derived air concentration for each radionuclide) and the time of exposure to that radionuclide, in hours. A licensee may take 2,000 DAC-hours to represent one ALI, equivalent to a committed effective dose equivalent of 5 rems (0.05 Sv).

62 FR 39058

≫ *Distinguishable from background* means that the detectable concentration of a radionuclide is statistically different from the background concentration of that radionuclide in the vicinity of the site or, in the case of structures, in similar materials using adequate measurement technology, survey, and statistical techniques.

56 FR 23360

Dose or *radiation dose* is a generic term that means absorbed dose, dose equivalent, effective dose equivalent, committed dose equivalent, committed effective dose equivalent, or total effective dose equivalent, as defined in other paragraphs of this section.

Dose equivalent (H_T) means the product of the absorbed dose in tissue, quality factor, and all other necessary modifying factors at the location of interest. The units of dose equivalent are the rem and sievert (Sv).

57 FR 57877

Dosimetry processor means an individual or organization that processes and evaluates individual monitoring equipment in order to determine the radiation dose delivered to the equipment.

56 FR 23360

Effective dose equivalent (H_E) is the sum of the products of the dose equivalent to the organ or tissue (H_T) and the weighting factors (w_T) applicable to each of the body organs or tissues that are irradiated ($H_E = \Sigma w_T H_T$).

Embryo/fetus means the developing human organism from conception until the time of birth.

Entrance or access point means any location through which an individual could gain access to radiation areas or to radioactive materials. This includes entry or exit portals of sufficient size to permit human entry, irrespective of their intended use.

Exposure means being exposed to ionizing radiation or to radioactive material.

External dose means that portion of the dose equivalent received from radiation sources outside the body.

Extremity means hand, elbow, arm below the elbow, foot, knee, or leg below the knee.

Eye dose equivalent applies to the external exposure of the lens of the eye and is taken as the dose equivalent at a tissue depth of 0.3 centimeter (300 mg/cm^2).

Generally applicable environmental radiation standards means standards issued by the Environmental Protection Agency (EPA) under the authority of the Atomic Energy Act of 1954, as amended, that impose limits on radiation exposures or levels, or concentrations or quantities of radioactive material, in the general environment outside the boundaries of locations under the control of persons possessing or using radioactive material.

Government agency means any executive department, commission, independent establishment, corporation wholly or partly owned by the United States of America, which is an instrumentality of the United States, or any board, bureau, division, service, office, officer, authority, administration, or other establishment in the executive branch of the Government.

Gray [See § 20.1004].

High radiation area means an area, accessible to individuals, in which radiation levels could result in an individual receiving a dose equivalent in excess of 0.1 rem (1 mSv) in 1 hour at 30

centimeters from the radiation source or from any surface that the radiation penetrates.

Individual means any human being.

Individual monitoring means—

(1) The assessment of dose equivalent by the use of devices designed to be worn by an individual;

(2) The assessment of committed effective dose equivalent by bioassay (see *Bioassay*) or by determination of the time-weighted air concentrations to which an individual has been exposed, i.e., DAC-hours; or

(3) The assessment of dose equivalent by the use of survey data.

Individual Monitoring Devices (individual monitoring equipment) means devices designed to be worn by a single individual for the assessment of dose equivalent such as film badges, thermoluminescent dosimeters (TLDs), pocket ionization chambers, and personal ("lapel") air sampling devices.

Internal dose means that portion of the dose equivalent received from radioactive material taken into the body.

56 FR 23360

License means a license issued under the regulations in parts 30 through 36, 39, 40, 50, 60, 61, 70, or 72 of this chapter.

58 FR 7715

Licensed material means source material, special nuclear material, or byproduct material received, possessed, used, transferred or disposed of under a general or specific license issued by the Commission.

Licensee means the holder of a license.

Limits (dose limits) means the permissible upper bounds of radiation doses.

Lost or missing licensed material means licensed material whose location is unknown. It includes material that has been shipped but has not reached its destination and whose location cannot be readily traced in the transportation system.

56 FR 23360

Member of the public means any individual except when that individual is receiving an occupational dose.

62 FR 4120

Minor means an individual less than 18 years of age.

Monitoring (radiation monitoring, radiation protection monitoring) means the measurement of radiation levels, concentrations, surface area concentrations or quantities of radioactive material and the use of the results of these measurements to evaluate potential exposures and doses.

Nonstochastic effect means health effects, the severity of which varies with the dose and for which a threshold is believed to exist. Radiation-induced cataract formation is an example of a nonstochastic effect (also called a deterministic effect).

NRC means the Nuclear Regulatory Commission or its duly authorized representatives.

56 FR 23360

Occupational dose means the dose received by an individual in the course of employment in which the individual's assigned duties involve exposure to radiation or to radioactive material from licensed and unlicensed sources of radiation, whether in the possession of the licensee or other person. Occupational dose does not include dose received from background radiation, from any medical administration the individual has received, from exposure to individuals administered radioactive material and released in accordance with § 35.75, from voluntary participation in medical research programs, or as a member of the public.

62 FR 4120

Person means—

(1) Any individual, corporation, partnership, firm, association, trust, estate, public or private institution, group, Government agency other than the Commission or the Department of Energy (except that the Department shall be considered a person within the meaning of the regulations in 10 CFR chapter I to the extent that its facilities and activities are subject to the licensing and related regulatory authority of the Commission under section 202 of the Energy Reorganization Act of 1974 (88 Stat. 1244), the Uranium Mill Tailings Radiation Control Act of 1978 (92 Stat. 3021), the Nuclear Waste Policy Act of 1982 (96 Stat. 2201), and section 3(b)(2) of the Low-Level Radioactive Waste Policy Amendments Act of 1985 (99 Stat. 1842)), any State or any political subdivision of or any political entity within a State, any foreign government or nation or any political subdivision of any such government or nation, or other entity; and

(2) Any legal successor, representative, agent, or agency of the foregoing.

Planned special exposure means an infrequent exposure to radiation, separate from and in addition to the annual dose limits.

56 FR 23360

Public dose means the dose received by a member of the public from exposure to radiation or radioactive material released by a licensee, or to any other source of radiation under the control of a licensee. Public dose does not include occupational dose or doses received from background radiation, from any medical administration the individual has received, from exposure to individuals administered radioactive material and released in accordance with § 35.75, or from voluntary participation in medical research programs.

62 FR 4120

Quality Factor (Q) means the modifying factor (listed in tables 1004(b).1 and 1004(b).2 of § 20.1004) that is used to derive dose equivalent from absorbed dose.

Quarter means a period of time equal to one-fourth of the year observed by the licensee (approximately 13 consecutive weeks), providing that the beginning of the first quarter in a year coincides with the starting date of the year and that no day is omitted or duplicated in consecutive quarters.

Rad (See § 20.1004).

Radiation (ionizing radiation) means alpha particles, beta particles, gamma rays, x-rays, neutrons, high-speed electrons, high-speed protons, and other particles capable of producing ions. Radiation, as used in this part, does not include non-ionizing radiation, such as radio- or microwaves, or visible, infrared, or ultraviolet light.

56 FR 23360

Radiation area means an area, accessible to individuals, in which radiation levels could result in an individual receiving a dose equivalent in excess of 0.005 rem (0.05 mSv) in 1 hour at 30 centimeters from the radiation source or from any surface that the radiation penetrates.

Reference man means a hypothetical aggregation of human physical and physiological characteristics arrived at by international consensus. These characteristics may be used by researchers and public health workers to standardize results of experiments and to relate biological insult to a common base.

Rem (See § 20.1004).

Residual radioactivity means radioactivity in structures, materials, soils, groundwater, and other media at a site resulting from activities under the licensee's control. This includes radioactivity from all licensed and unlicensed sources used by the licensee, but excludes background radiation. It also includes radioactive materials remaining at the site as a result of routine or accidental releases of radioactive material at the site and previous burials at the site, even if those burials were made in accordance with the provisions of 10 CFR part 20.

62 FR 39058

Respiratory protective device means an apparatus, such as a respirator, used to reduce the individual's intake of airborne radioactive materials.

Restricted area means an area, access to which is limited by the licensee for the purpose of protecting individuals against undue risks from exposure to radiation and radioactive materials. Restricted area does not include areas used as residential quarters, but separate rooms in a residential building may be set apart as a restricted area.

56 FR 23360

Sanitary sewerage means a system of public sewers for carrying off waste water and refuse, but excluding sewage treatment facilities, septic tanks, and leach fields owned or operated by the licensee.

Shallow-dose equivalent (H_s), which applies to the external exposure of the skin or an extremity, is taken as the dose equivalent at a tissue depth of 0.007 centimeter (7 mg/cm^2) averaged over an area of 1 square centimeter.

Sievert (See § 20.1004).

Site boundary means that line beyond which the land or property is not owned, leased, or otherwise controlled by the licensee.

Source material means—

(1) Uranium or thorium or any combination of uranium and thorium in any physical or chemical form; or

(2) Ores that contain, by weight, one-twentieth of 1 percent (0.05 percent), or more, of uranium, thorium, or any combination of uranium and thorium. Source material does not include special nuclear material.

Special nuclear material means—

(1) Plutonium, uranium-233, uranium enriched in the isotope 233 or in the isotope 235, and any other material that the Commission, pursuant to the provisions of section 51 of the Act, determines to be special nuclear material, but does not include source material; or

(2) Any material artificially enriched by any of the foregoing but does not include source material.

Stochastic effects means health effects that occur randomly and for which the probability of the effect occurring, rather than its severity, is assumed to be a linear function of dose without threshold. Hereditary effects and cancer incidence are examples of stochastic effects.

56 FR 23360

Survey means an evalulation of the radiological conditions and potential hazards incident to the production, use, transfer, release, disposal, or presence of radioactive material or other sources of radiation. When appropriate, such an evaluation includes a physical survey of the location of radioactive material and measurements or calculations of levels of radiation, or concentrations or quantities of radioactive material present.

Total Effective Dose Equivalent (TEDE) means the sum of the deep-dose equivalent (for external exposures) and the committed effective dose equivalent (for internal exposures).

Unrestricted area means an area, access to which is neither limited nor controlled by the licensee.

Uranium fuel cycle means the operations of milling of uranium ore, chemical conversion of uranium, isotopic enrichment of uranium, fabrication of uranium fuel, generation of electricity by a light-water-cooled nuclear power plant using uranium fuel, and reprocessing of spent uranium fuel to the extent that these activities directly support the production of electrical power for public use. Uranium fuel cycle does not include mining operations, operations at waste disposal sites, transportation of radioactive material in support of these operations, and the reuse of recovered non-uranium special nuclear and byproduct materials from the cycle.

Very high radiation area means an area, accessible to individuals, in which radiation levels could result in an individual receiving an absorbed dose in excess of 500 rads (5 grays) in 1 hour at 1 meter from a radiation source or from any surface that the radiation penetrates.

(Note: At very high doses received at high dose rates, units of absorbed dose (e g., rads and grays) are appropriate, rather than units of dose equivalent (e g., rems and sieverts)).

Week means 7 consecutive days starting on Sunday.

Weighting factor w_T, for an organ or tissue (T) is the proportion of the risk of stochastic effects resulting from irradiation of that organ or tissue to the total risk of stochastic effects when the whole body is irradiated uniformly. For calculating the effective dose equivalent, the values of w_T are:

ORGAN DOSE WEIGHTING FACTORS

Organ or tissue	w_T
Gonads	0.25
Breast	0.15
Red bone marrow	0 12
Lung	0 12
Thyroid	0 03
Bone surfaces	0 03
Remainder	[1] 0 30
Whole Body	[2] 1 00

[1] 0 30 results from 0 06 for each of 5 "remainder" organs (excluding the skin and the lens of the eye) that receive the highest doses.

[2] For the purpose of weighting the external whole body dose (for adding it to the internal dose), a single weighting factor, $w_T = 1.0$, has been specified. The use of other weighting factors for external exposure will be approved on a case-by-case basis until such time as specific guidance is issued.

Whole body means, for purposes of external exposure, head, trunk (including male gonads), arms above the elbow, or legs above the knee.

Working level (WL) is any combination of short-lived radon daughters (for radon-222: polonium-218, lead-214, bismuth-214, and polonium-214; and for radon-220: polonium-216, lead-212, bismuth-212, and polonium-212) in 1 liter of air that will result in the ultimate emission of 1.3×10^5 MeV of potential alpha particle energy.

Working level month (WLM) means an exposure to 1 working level for 170 hours (2,000 working hours per year/12 months per year = approximately 170 hours per month).

Year means the period of time beginning in January used to determine compliance with the provisions of this part. The licensee may change the starting date of the year used to determine compliance by the licensee provided that the change is made at the beginning of the year and that no day is omitted or duplicated in consecutive years.

§ 20.1004 Units of radiation dose.

(a) Definitions. As used in this part, the units of radiation dose are:

Gray (Gy) is the SI unit of absorbed dose. One gray is equal to an absorbed dose of 1 joule/kilogram (100 rads).

Rad is the special unit of absorbed dose. One rad is equal to an absorbed dose of 100 ergs/gram or 0.01 joule/kilogram (0.01 gray).

Rem is the special unit of any of the quantities expressed as dose equivalent. The dose equivalent in rems is equal to the absorbed dose in rads multiplied by the quality factor (1 rem = 0.01 sievert).

Sievert is the SI unit of any of the quantities expressed as dose equivalent. The dose equivalent in sieverts is equal to the absorbed dose in grays multiplied by the quality factor (1 Sv = 100 rems).

(b) As used in this part, the quality factors for converting absorbed dose to dose equivalent are shown in table 1004(b).1.

TABLE 1004(b).1.—QUALITY FACTORS AND ABSORBED DOSE EQUIVALENCIES

Type of radiation	Quality factor (Q)	Absorbed dose equal to a unit dose equivalent [a]
X-, gamma, or beta radiation	1	1
Alpha particles, multiple-charged particles, fission fragments and heavy particles of unknown charge	20	0 05
Neutrons of unknown energy	10	0 1
High-energy protons	10	0.1

[a] Absorbed dose in rad equal to 1 rem or the absorbed dose in gray equal to 1 sievert

(c) If it is more convenient to measure the neutron fluence rate than to determine the neutron dose equivalent rate in rems per hour or sieverts per hour, as provided in paragraph (b) of this section, 1 rem (0.01 Sv) of neutron radiation of unknown energies may, for purposes of the regulations in this part, be assumed to result from a total fluence of 25 million neutrons per square centimeter incident upon the body. If sufficient information exists to estimate the approximate energy distribution of the neutrons, the licensee may use the fluence rate per unit dose equivalent or the appropriate Q value from table 1004(b).2 to convert a measured tissue dose in rads to dose equivalent in rems.

TABLE 1004(b).2.—MEAN QUALITY FACTORS, Q, AND FLUENCE PER UNIT DOSE EQUIVALENT FOR MONOENERGETIC NEUTRONS

	Neutron energy (MeV)	Quality factor [a] (Q)	Fluence per unit dose equivalent [b] (neutrons cm^{-2} rem^{-1})
(thermal)	2.5×10^{-8}	2	980×10^6
	1×10^{-7}	2	980×10^6
	1×10^{-6}	2	810×10^6
	1×10^{-5}	2	810×10^6
	1×10^{-4}	2	840×10^6
	1×10^{-3}	2	980×10^6
	1×10^{-2}	2.5	1010×10^6
	1×10^{-1}	7 5	170×10^6
	5×10^{-1}	11	39×10^6
	1	11	27×10^6
	2 5	9	29×10^6
	5	8	23×10^6
	7	7	24×10^6
	10	6 5	24×10^6
	14	7 5	17×10^6
	20	8	16×10^6
	40	7	14×10^6
	60	5.5	16×10^6
	1×10^3	4	20×10^6
	2×10^3	3 5	19×10^6
	3×10^3	3 5	16×10^6
	4×10^3	3 5	14×10^6

[a] Value of quality factor (Q) at the point where the dose equivalent is maximum in a 30-cm diameter cylinder tissue-equivalent phantom.

[b] Monoenergetic neutrons incident normally on a 30-cm diameter cylinder tissue-equivalent phantom.

§ 20.1005 Units of radioactivity.

For the purposes of this part, activity is expressed in the special unit of curies (Ci) or in the SI unit of becquerels (Bq), or their multiples, or disintegrations (transformations) per unit of time:

(a) One becquerel = 1 disintegration per second (s^{-1}).

(b) One curie = 3.7×10^{10} disintegrations per second = 3.7×10^{10} becquerels = 2.22×10^{12} disintegrations per minute.

§ 20.1006 Interpretations.

Except as specifically authorized by the Commission in writing, no interpretation of the meaning of the regulations in this part by an officer or employee of the Commission other than a written interpretation by the General Counsel will be recognized to be binding upon the Commission.

§ 20.1007 Communications.

Unless otherwise specified, communications or reports concerning the regulations in this part should be addressed to the Executive Director for Operations, U.S. Nuclear Regulatory Commission, Washington, DC 20555. A communication, report, or application may be delivered in person to the Office of the Executive Director for Operations, 11555 Rockville Pike, Rockville, MD 20852.

§ 20.1008 Implementation.

(a) [Reserved].

(b) The applicable section of §§ 20.1001–20.2402 must be used in lieu of requirements in the standards for protection against radiation in effect prior to January 1, 1994[1] that are cited in license conditions or technical specifications, except as specified in paragraphs (c), (d), and (e) of this section. If the requirements of this part are more restrictive than the existing license condition, then the licensee shall comply with this part unless exempted by paragraph (d) of this section.

(c) Any existing license condition or technical specification that is more restrictive than a requirement in §§ 20.1001–20.2402 remains in force until there is a technical specification change, license amendment, or license renewal.

(d) If a license condition or technical specification exempted a licensee from a requirement in the standards for protection against radiation in effect prior to January 1, 1994,[1] it continues to exempt a licensee from the corresponding provision of §§ 20.1001–20.2402.

(e) If a license condition cites provisions in requirements in the standards for protection against radiation in effect prior to January 1, 1994[1] and there are no corresponding provisions in §§ 20.1001–20.2402, then the license condition remains in force until there is a technical specification change, license amendment, or license renewal that modifies or removes this condition.

59 FR 41641

§ 20.1009 Information collection requirements: OMB approval.

(a) The Nuclear Regulatory Commission has submitted the information collection requirements contained in this part to the Office of Management and Budget (OMB) for approval as required by the Paperwork Reduction Act of 1980 (44 U.S.C. 3501 et seq.). The OMB has approved the information collection requirements contained in this part under control number 3150–0014.

60 FR 15649

≫ (b) The approved information collection requirements contained in this part appear in §§ 20.1003, 20.1101, 20.1202, 20.1203, 20.1204, 20.1206, 20.1208, 20.1301, 20.1302, 20.1403, 20.1404, 20.1406, 20.1501, 20.1601, 20.1703, 20.1901, 20.1902, 20.1904, 20.1905, 20.1906, 20.2002, 20.2004, 20.2006, 20.2102, 20.2103, 20.2104, 20.2105, 20.2106, 20.2107, 20.2108, 20.2110, 20.2201, 20.2202, 20.2203, 20.2204, 20.2205, 20.2206, 20.2301, and Appendices F and G to 10 CFR Part 20.

62 FR 39058

(c) This part contains information collection requirements in addition to those approved under the control number specified in paragraph (a) of this section. These information collection requirements and the control numbers under which they are approved are as follows:

(1). In § 20.2104, NRC Form 4 is approved under control number 3150–0005.

(2). In §§ 20.2106 and 20.2206, NRC Form 5 is approved under control number 3150–0006.

(3). In § 20.2006 and appendix G to 10 CFR part 20, NRC Form 540 and 540A is approved under control number 3150–0164.

(4). In § 20.2006 and appendix G to 10 CFR part 20, NRC Form 541 and 541A is approved under control number 3150–0165.

(5). In § 20.2006 and appendix G to 10 CFR part 20, NRC Form 542 and 542A is approved under control number 3150–0166.

60 FR 15649

Subpart B—Radiation Protection Programs

§ 20.1101 Radiation protection programs.

(a) Each licensee shall develop, document, and implement a radiation protection program commensurate with the scope and extent of licensed activities and sufficient to ensure compliance with the provisions of this part. (See § 20.2102 for recordkeeping requirements relating to these programs.)

(b) The licensee shall use, to the extent practicable, procedures and engineering controls based upon sound radiation protection principles to achieve occupational doses and doses to members of the public that are as low as is reasonably achievable (ALARA).

(c) The licensee shall periodically (at least annually) review the radiation protection program content and implementation.

56 FR 23360

(d) To implement the ALARA requirements of § 20.1101 (b), and notwithstanding the requirements in § 20.1301 of this part, a constraint on air emissions of radioactive material to the environment, excluding Radon-222 and its daughters, shall be established by licensees other than those subject to § 50.34a, such that the individual member of the public likely to receive the highest dose will not be expected to receive a total effective dose equivalent in excess of 10 mrem (0.1 mSv) per year from these emissions. If a licensee subject to this requirement exceeds this dose constraint, the licensee shall report the exceedance as provided in § 20.2203 and promptly take appropriate corrective action to ensure against recurrence.

61 FR 65120

[1] See §§ 20.1–20.602 codified as of January 1, 1993.

Subpart C—Occupational Dose Limits

§ 20.1201 Occupational dose limits for adults.

56 FR 23360

(a) The licensee shall control the occupational dose to individual adults, except for planned special exposures under § 20.1206, to the following dose limits.

(1) An annual limit, which is the more limiting of—

(i) The total effective dose equivalent being equal to 5 rems (0.05 Sv); or

(ii) The sum of the deep-dose equivalent and the committed dose equivalent to any individual organ or tissue other than the lens of the eye being equal to 50 rems (0.5 Sv).

(2) The annual limits to the lens of the eye, to the skin, and to the extremities, which are:

(i) An eye dose equivalent of 15 rems (0.15 Sv), and

(ii) A shallow-dose equivalent of 50 rems (0.50 Sv) to the skin or to any extremity.

(b) Doses received in excess of the annual limits, including doses received during accidents, emergencies, and planned special exposures, must be subtracted from the limits for planned special exposures that the individual may receive during the current year (see § 20.1206(e)(1)) and during the individual's lifetime (see § 20.1206(e)(2)).

56 FR 23360

(c) The assigned deep-dose equivalent and shallow-dose equivalent must be for the part of the body receiving the highest exposure. The deep-dose equivalent, eye dose equivalent and shallow-dose equivalent may be assessed from surveys or other radiation measurements for the purpose of demonstrating compliance with the occupational dose limits, if the individual monitoring device was not in the region of highest potential exposure, or the results of individual monitoring are unavailable.

60 FR 20183

(d) Derived air concentration (DAC) and annual limit on intake (ALI) values are presented in table 1 of appendix B to part 20 and may be used to determine the individual's dose (see § 20.2106) and to demonstrate compliance with the occupational dose limits.

(e) In addition to the annual dose limits, the licensee shall limit the soluble uranium intake by an individual to 10 milligrams in a week in consideration of chemical toxicity (see footnote 3 of appendix B to part 20).

56 FR 23360

(f) The licensee shall reduce the dose that an individual may be allowed to receive in the current year by the amount of occupational dose received while employed by any other person (see § 20.2104(e)).

§ 20.1202 Compliance with requirements for summation of external and internal doses.

(a) If the licensee is required to monitor under both §§ 20.1502(a) and (b), the licensee shall demonstrate compliance with the dose limits by summing external and internal doses. If the licensee is required to monitor only under § 20.1502(a) or only under § 20.1502(b), then summation is not required to demonstrate compliance with the dose limits. The licensee may demonstrate compliance with the requirements for summation of external and internal doses by meeting one of the conditions specified in paragraph (b) of this section and the conditions in paragraphs (c) and (d) of this section.

(Note: The dose equivalents for the lens of the eye, the skin, and the extremities are not included in the summation, but are subject to separate limits.)

(b) *Intake by inhalation.* If the only intake of radionuclides is by inhalation, the total effective dose equivalent limit is not exceeded if the sum of the deep-dose equivalent divided by the total effective dose equivalent limit, and one of the following, does not exceed unity:

(1) The sum of the fractions of the inhalation ALI for each radionuclide, or

(2) The total number of derived air concentration-hours (DAC-hours) for all radionuclides divided by 2,000, or

57 FR 57877

(3) The sum of the calculated committed effective dose equivalents to all significantly irradiated[1] organs or tissues (T) calculated from bioassay data using appropriate biological models and expressed as a fraction of the annual limit.

56 FR 23360

(c) *Intake by oral ingestion.* If the occupationally exposed individual also receives an intake of radionuclides by oral ingestion greater than 10 percent of the applicable oral ALI, the licensee shall account for this intake and include it in demonstrating compliance with the limits.

(d) *Intake through wounds or absorption through skin.* The licensee shall evaluate and, to the extent practical, account for intakes through wounds or skin absorption.

Note: The intake through intact skin has been included in the calculation of DAC for hydrogen-3 and does not need to be further evaluated.

60 FR 20183

§ 20.1203 Determination of external dose from airborne radioactive material.

Licensees shall, when determining the dose from airborne radioactive material, include the contribution to the deep-dose equivalent, eye dose equivalent, and shallow-dose equivalent from external exposure to the radioactive cloud (see appendix B to part 20, footnotes 1 and 2).

Note: Airborne radioactivity measurements and DAC values should not be used as the primary means to assess the deep-dose equivalent when the airborne radioactive material includes radionuclides other than noble gases or if the cloud of airborne radioactive material is not relatively uniform. The determination of the deep-dose equivalent to an individual should be based upon measurements using instruments or individual monitoring devices.

56 FR 23360

§ 20.1204 Determination of internal exposure.

(a) For purposes of assessing dose used to determine compliance with occupational dose equivalent limits, the licensee shall, when required under § 20.1502, take suitable and timely measurements of—

(1) Concentrations of radioactive materials in air in work areas; or

(2) Quantities of radionuclides in the body; or

[1] An organ or tissue is deemed to be significantly irradiated if, for that organ or tissue the product of the weighting factor, w_T and the committed dose equivalent, $H_{T,50}$, per unit intake is greater than 10 percent of the maximum weighted value of $H_{T,50}$ (i.e., $w_T H_{T,50}$) per unit intake for any organ or tissue

(3) Quantities of radionuclides excreted from the body; or

(4) Combinations of these measurements.

(b) Unless respiratory protective equipment is used, as provided in § 20.1703, or the assessment of intake is based on bioassays, the licensee shall assume that an individual inhales radioactive material at the airborne concentration in which the individual is present.

(c) When specific information on the physical and biochemical properties of the radionuclides taken into the body or the behavior or the material in an individual is known, the licensee may—

(1) Use that information to calculate the committed effective dose equivalent, and, if used, the licensee shall document that information in the individual's record; and

(2) Upon prior approval of the Commission, adjust the DAC or ALI values to reflect the actual physical and chemical characteristics of airborne radioactive material (e.g., aerosol size distribution or density); and

56 FR 23360

(3) Separately assess the contribution of fractional intakes of Class D, W, or Y compounds of a given radionuclide (see appendix B to part 20) to the committed effective dose equivalent.

60 FR 20183

(d) If the licensee chooses to assess intakes of Class Y material using the measurements given in § 20.1204(a)(2) or (3), the licensee may delay the recording and reporting of the assessments for periods up to 7 months, unless otherwise required by §§ 20.2202 or 20.2203, in order to permit the licensee to make additional measurements basic to the assessments.

(e) If the identity and concentration of each radionuclide in a mixture are known, the fraction of the DAC applicable to the mixture for use in calculating DAC-hours must be either—

56 FR 23360

(1) The sum of the ratios of the concentration to the appropriate DAC value (e g., D, W, Y) from appendix B to part 20 for each radionuclide in the mixture; or

60 FR 20183

(2) The ratio of the total concentration for all radionuclides in the mixture to the most restrictive DAC value for any radionuclide in the mixture.

(f) If the identity of each radionuclide in a mixture is known, but the concentration of one or more of the radionuclides in the mixture is not known, the DAC for the mixture must be the most restrictive DAC of any radionuclide in the mixture.

(g) When a mixture of radionuclides in air exists, licensees may disregard certain radionuclides in the mixture if—

(1) The licensee uses the total activity of the mixture in demonstrating compliance with the dose limits in § 20.1201 and in complying with the monitoring requirements in § 20.1502(b), and

(2) The concentration of any radionuclide disregarded is less than 10 percent of its DAC, and

(3) The sum of these percentages for all of the radionuclides disregarded in the mixture does not exceed 30 percent.

56 FR 23360

(h)(1) In order to calculate the committed effective dose equivalent, the licensee may assume that the inhalation of one ALI, or an exposure of 2,000 DAC-hours, results in a committed effective dose equivalent of 5 rems (0.05 Sv) for radionuclides that have their ALIs or DACs based on the committed effective dose equivalent.

(2) When the ALI (and the associated DAC) is determined by the nonstochastic organ dose limit of 50 rems (0.5 Sv), the intake of radionuclides that would result in a committed effective dose equivalent of 5 rems (0.05 Sv) (the stochastic ALI) is listed in parentheses in table 1 of appendix B to part 20. In this case, the licensee may, as a simplifying assumption, use the stochastic ALIs to determine committed effective dose equivalent. However, if the licensee uses the stochastic ALIs, the licensee must also demonstrate that the limit in § 20.1201(a)(1)(ii) is met.

60 FR 20183

§ 20.1205 [Reserved]

§ 20.1206 Planned special exposures.

A licensee may authorize an adult worker to receive doses in addition to and accounted for separately from the doses received under the limits specified in § 20.1201 provided that each of the following conditions is satisfied—

(a) The licensee authorizes a planned special exposure only in an exceptional situation when alternatives that might avoid the higher exposure are unavailable or impractical.

(b) The licensee (and employer if the employer is not the licensee) specifically authorizes the planned special exposure, in writing, before the exposure occurs.

(c) Before a planned special exposure, the licensee ensures that the individuals involved are—

(1) Informed of the purpose of the planned operation;

(2) Informed of the estimated doses and associated potential risks and specific radiation levels or other conditions that might be involved in performing the task; and

(3) Instructed in the measures to be taken to keep the dose ALARA considering other risks that may be present.

56 FR 23360

(d) Prior to permitting an individual to participate in a planned special exposure, the licensee ascertains prior doses as required by § 20.2104(b) during the lifetime of the individual for each individual involved.

(e) Subject to § 20.1201(b), the licensee does not authorize a planned special exposure that would cause an individual to receive a dose from all planned special exposures and all doses in excess of the limits to exceed—

(1) The numerical values of any of the dose limits in § 20.1201(a) in any year, and

(2) Five times the annual dose limits in § 20.1201(a) during the individual's lifetime.

(f) The licensee maintains records of the conduct of a planned special exposure in accordance with § 20.2105 and submits a written report in accordance with § 20.2204.

(g) The licensee records the best estimate of the dose resulting from the planned special exposure in the individual's record and informs the individual, in writing, of the dose within 30 days from the date of the planned special exposure. The dose from planned special exposures is not to be considered in controlling future occupational dose of the individual under § 20.1201(a) but is to be included in evaluations required by § 20.1206 (d) and (e).

56 FR 23360

§ 20.1207 Occupational dose limits for minors.

The annual occupational dose limits for minors are 10 percent of the annual dose limits specified for adult workers in § 20.1201.

§ 20.1208 Dose to an embryo/fetus.

(a) The licensee shall ensure that the dose to an embryo/fetus during the entire pregnancy, due to occupational exposure of a declared pregnant woman, does not exceed 0.5 rem (5 mSv). (For recordkeeping requirements, see § 20.2106.)

(b) The licensee shall make efforts to avoid substantial variation above a uniform monthly exposure rate to a declared pregnant woman so as to satisfy the limit in paragraph (a) of this section.

(c) The dose to an embryo/fetus shall be taken as the sum of—

(1) The deep-dose equivalent to the declared pregnant woman; and

(2) The dose to the embryo/fetus from radionuclides in the embryo/fetus and radionuclides in the declared pregnant woman.

(d) If the dose to the embryo/fetus is found to have exceeded 0.5 rem (5 mSv),

56 FR 23360

or is within 0.05 rem (0.5 mSv) of this dose, by the time the woman declares the pregnancy to the licensee, the licensee shall be deemed to be in compliance with paragraph (a) of this section if the additional dose to the embryo/fetus does not exceed 0.05 rem (0.5 mSv) during the remainder of the pregnancy.

Subpart D—Radiation Dose Limits for Individual Members of the Public

62 FR 4120

§ 20.1301 Dose limits for individual members of the public.

(a) Each licensee shall conduct operations so that—

(1) The total effective dose equivalent to individual members of the public from the licensed operation does not exceed 0.1 rem (1 millisievert) in a year, exclusive of the dose contributions from background radiation, from any medical administration the individual has received, from exposure to individuals administered radioactive material and released in accordance with § 35.75, from voluntary participation in medical research programs, and from the licensee's disposal of radioactive material into sanitary sewerage in accordance with § 20.2003, and

(2) The dose in any unrestricted area from external sources, exclusive of the dose contributions from patients administered radioactive material and released in accordance with § 35.75, does not exceed 0.002 rem (0.02 millisievert) in any one hour.

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(b) If the licensee permits members of the public to have access to controlled areas, the limits for members of the public continue to apply to those individuals.

(c) A licensee or license applicant may apply for prior NRC authorization to operate up to an annual dose limit for an individual member of the public of 0.5 rem (5 mSv). The licensee or license applicant shall include the following information in this application:

(1) Demonstration of the need for and the expected duration of operations in excess of the limit in paragraph (a) of this section;

(2) The licensee's program to assess and control dose within the 0.5 rem (5 mSv) annual limit; and

(3) The procedures to be followed to maintain the dose as low as is reasonably achievable.

(d) In addition to the requirements of this part, a licensee subject to the provisions of EPA's generally applicable environmental radiation standards in 40 CFR Part 190 shall comply with those standards.

(e) The Commission may impose additional restrictions on radiation levels in unrestricted areas and on the total quantity of radionuclides that a licensee may release in effluents in order to restrict the collective dose.

56 FR 23360

§ 20.1302 Compliance with dose limits for individual members of the public.

(a) The licensee shall make or cause to be made, as appropriate, surveys of radiation levels in unrestricted and controlled areas and radioactive materials in effluents released to unrestricted and controlled areas to demonstrate compliance with the dose limits for individual members of the public in § 20.1301.

(b) A licensee shall show compliance with the annual dose limit in § 20.1301 by—

(1) Demonstrating by measurement or calculation that the total effective dose equivalent to the individual likely to receive the highest dose from the licensed operation does not exceed the annual dose limit; or

(2) Demonstrating that—

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(i) The annual average concentrations of radioactive material released in gaseous and liquid effluents at the boundary of the unrestricted area do not exceed the values specified in table 2 of appendix B to part 20; and

57 FR 57877

(ii) If an individual were continuously present in an unrestricted area, the dose from external sources would not exceed 0.002 rem (0.02 mSv) in an hour and 0.05 rem (0.5 mSv) in a year.

60 FR 20183

(c) Upon approval from the Commission, the licensee may adjust the effluent concentration values in appendix B to part 20, table 2, for members of the public, to take into account the actual physical and chemical characteristics of the effluents (e.g., aerosol size distribution, solubility, density, radioactive decay equilibrium, chemical form).

Subpart E—Radiological Criteria for License Termination

§ 20.1401 General provisions and scope.

≫ (a) The criteria in this subpart apply to the decommissioning of facilities licensed under parts 30, 40, 50, 60, 61, 70, and 72 of this chapter, as well as other facilities subject to the Commission's jurisdiction under the Atomic Energy Act of 1954, as amended, and the Energy Reorganization Act of 1974, as amended. For high-level and low-level waste disposal facilities (10 CFR parts 60 and 61), the criteria apply only to ancillary surface facilities that support radioactive waste disposal activities. The criteria do not apply to uranium and thorium recovery facilities already subject to appendix A to 10 CFR part 40 or to uranium solution extraction facilities.

(b) The criteria in this subpart do not apply to sites which:

(1) Have been decommissioned prior to the effective date of the rule in accordance with criteria identified in the Site Decommissioning Management Plan (SDMP) Action Plan of April 16, 1992 (57 FR 13389);

(2) Have previously submitted and received Commission approval on a license termination plan (LTP) or decommissioning plan that is compatible with the SDMP Action Plan criteria; or

(3) Submit a sufficient LTP or decommissioning plan before August 20, 1998 and such LTP or decommissioning plan is approved by the Commission before August 20, 1999 and in accordance with the criteria identified in the SDMP Action Plan, except that if an EIS is required in the submittal, there will be a provision for day-for-day extension.

(c) After a site has been decommissioned and the license terminated in accordance with the criteria in this subpart, the Commission will require additional cleanup only if, based on new information, it determines that the criteria of this subpart were not met and residual radioactivity remaining at the site could result in significant threat to public health and safety.

(d) When calculating TEDE to the average member of the critical group the licensee shall determine the peak annual TEDE dose expected within the first 1000 years after decommissioning.

§ 20.1402 Radiological criteria for unrestricted use.

A site will be considered acceptable for unrestricted use if the residual radioactivity that is distinguishable from background radiation results in a TEDE to an average member of the critical group that does not exceed 25 mrem (0.25 mSv) per year, including that from groundwater sources of drinking water, and the residual radioactivity has been reduced to levels that are as low as reasonably achievable (ALARA). Determination of the levels which are ALARA must take into account consideration of any detriments, such as deaths from transportation accidents, expected to potentially result from decontamination and waste disposal.

§ 20.1403 Criteria for license termination under restricted conditions.

A site will be considered acceptable for license termination under restricted conditions if:

(a) The licensee can demonstrate that further reductions in residual radioactivity necessary to comply with the provisions of § 20.1402 would result in net public or environmental harm or were not being made because the residual levels associated with restricted conditions are ALARA. Determination of the levels which are ALARA must take into account consideration of any detriments, such as traffic accidents, expected to potentially result from decontamination and waste disposal;

(b) The licensee has made provisions for legally enforceable institutional controls that provide reasonable assurance that the TEDE from residual radioactivity distinguishable from background to the average member of the critical group will not exceed 25 mrem (0.25 mSv) per year;

(c) The licensee has provided sufficient financial assurance to enable an independent third party, including a governmental custodian of a site, to assume and carry out responsibilities for any necessary control and maintenance of the site. Acceptable financial assurance mechanisms are—

(1) Funds placed into an account segregated from the licensee's assets and outside the licensee's administrative control as described in § 30.35(f)(1) of this chapter;

(2) Surety method, insurance, or other guarantee method as described in § 30.35(f)(2) of this chapter;

(3) A statement of intent in the case of Federal, State, or local Government licensees, as described in § 80.35(f)(4) of this chapter; or

(4) When a governmental entity is assuming custody and ownership of a site, an arrangement that is deemed acceptable by such governmental entity.

(d) The licensee has submitted a decommissioning plan or License Termination Plan (LTP) to the Commission indicating the licensee's intent to decommission in accordance with §§ 30.36(d), 40.42(d), 50.82 (a) and (b), 70.38(d), or 72.54 of this chapter, and specifying that the licensee intends to decommission by restricting use of the site. The licensee shall document in the LTP or decommissioning plan how the advice of individuals and institutions in the community who may be affected by the decommissioning has been sought and incorporated, as appropriate, following analysis of that advice.

(1) Licensees proposing to decommission by restricting use of the site shall seek advice from such affected parties regarding the following matters concerning the proposed decommissioning—

(i) Whether provisions for institutional controls proposed by the licensee:

(A) Will provide reasonable assurance that the TEDE from residual radioactivity distinguishable from background to the average member of the critical group will not exceed 25 mrem (0.25 mSv) TEDE per year;

(B) Will be enforceable; and

(C) Will not impose undue burdens on the local community or other affected parties.

(ii) Whether the licensee has provided sufficient financial assurance to enable an independent third party, including a governmental custodian of a site, to assume and carry out responsibilities for any necessary control and maintenance of the site;

(2) In seeking advice on the issues identified in § 20.1403(d)(1), the licensee shall provide for:

(i) Participation by representatives of a broad cross section of community interests who may be affected by the decommissioning;

(ii) An opportunity for a comprehensive, collective discussion on

62 FR 39058

the issues by the participants represented; and

(iii) A publicly available summary of the results of all such discussions, including a description of the individual viewpoints of the participants on the issues and the extent of agreement and disagreement among the participants on the issues; and

(e) Residual radioactivity at the site has been reduced so that if the institutional controls were no longer in effect, there is reasonable assurance that the TEDE from residual radioactivity distinguishable from background to the average member of the critical group is as low as reasonably achievable and would not exceed either—

(1) 100 mrem (1 mSv) per year; or

(2) 500 mrem (5 mSv) per year provided the licensee—

(i) Demonstrates that further reductions in residual radioactivity necessary to comply with the 100 mrem/y (1 mSv/y) value of paragraph (e)(1) of this section are not technically achievable, would be prohibitively expensive, or would result in net public or environmental harm;

(ii) Makes provisions for durable institutional controls;

(iii) Provides sufficient financial assurance to enable a responsible government entity or independent third party, including a governmental custodian of a site, both to carry out periodic rechecks of the site no less frequently than every 5 years to assure that the institutional controls remain in place as necessary to meet the criteria of § 20.1403(b) and to assume and carry out responsibilities for any necessary control and maintenance of those controls. Acceptable financial assurance mechanisms are those in paragraph (c) of this section.

62 FR 39058

§ 20.1404 Alternate criteria for license termination.

(a) The Commission may terminate a license using alternate criteria greater than the dose criterion of §§ 20.1402, 20.1403(b), and 20.1403(d)(1)(i)(A), if the licensee—

(1) Provides assurance that public health and safety would continue to be protected, and that it is unlikely that the dose from all man-made sources combined, other than medical, would be more than the 1 mSv/y (100 mrem/y) limit of subpart D, by submitting an analysis of possible sources of exposure;

(2) Has employed to the extent practical restrictions on site use according to the provisions of § 20.1403 in minimizing exposures at the site; and

(3) Reduces doses to ALARA levels, taking into consideration any detriments such as traffic accidents expected to potentially result from decontamination and waste disposal.

(4) Has submitted a decommissioning plan or License Termination Plan (LTP) to the Commission indicating the licensee's intent to decommission in accordance with §§ 30.36(d), 40.42(d), 50.82 (a) and (b), 70.38(d), or 72.54 of this chapter, and specifying that the licensee proposes to decommission by use of alternate criteria. The licensee shall document in the decommissioning plan or LTP how the advice of individuals and institutions in the community who may be affected by the decommissioning has been sought and addressed, as appropriate, following analysis of that advice. In seeking such advice, the licensee shall provide for:

(i) Participation by representatives of a broad cross section of community interests who may be affected by the decommissioning;

(ii) An opportunity for a comprehensive, collective discussion on the issues by the participants represented; and

(iii) A publicly available summary of the results of all such discussions, including a description of the individual viewpoints of the participants on the issues and the extent of agreement and disagreement among the participants on the issues.

(b) The use of alternate criteria to terminate a license requires the approval of the Commission after consideration of the NRC staff's recommendations that will address any comments provided by the Environmental Protection Agency and any public comments submitted pursuant to § 20.1405.

62 FR 39058

§ 20.1405 Public notification and public participation.

Upon the receipt of an LTP or decommissioning plan from the licensee, or a proposal by the licensee for release of a site pursuant to §§ 20.1403 or 20.1404, or whenever the Commission deems such notice to be in the public interest, the Commission shall:

(a) Notify and solicit comments from:

(1) local and State governments in the vicinity of the site and any Indian Nation or other indigenous people that have treaty or statutory rights that could be affected by the decommissioning; and

(2) the Environmental Protection Agency for cases where the licensee proposes to release a site pursuant to § 20.1404.

(b) Publish a notice in the **Federal Register** and in a forum, such as local newspapers, letters to State or local organizations, or other appropriate forum, that is readily accessible to individuals in the vicinity of the site, and solicit comments from affected parties.

62 FR 39058

§ 20.1406 Minimization of contamination.

Applicants for licenses, other than renewals, after August 20, 1997, shall describe in the application how facility design and procedures for operation will minimize, to the extent practicable, contamination of the facility and the environment, facilitate eventual decommissioning, and minimize, to the extent practicable, the generation of radioactive waste.

Subpart F—Surveys and Monitoring

56 FR 23360

§ 20.1501 General.

(a) Each licensee shall make or cause to be made, surveys that—

(1) May be necessary for the licensee to comply with the regulations in this part; and

(2) Are reasonable under the circumstances to evaluate—

(i) The extent of radiation levels; and

(ii) Concentrations or quantities of radioactive material; and

(iii) The potential radiological hazards that could be present.

(b) The licensee shall ensure that instruments and equipment used for quantitative radiation measurements (e.g., dose rate and effluent monitoring) are calibrated periodically for the radiation measured.

(c) All personnel dosimeters (except for direct and indirect reading pocket ionization chambers and those dosimeters used to measure the dose to the extremities) that require processing to determine the radiation dose and that are used by licensees to comply with § 20.1201, with other applicable provisions of this chapter, or with conditions specified in a license must be processed and evaluated by a dosimetry processor—

(1) Holding current personnel dosimetry accreditation from the National Voluntary Laboratory Accreditation Program (NVLAP) of the National Institute of Standards and Technology; and

(2) Approved in this accreditation process for the type of radiation or radiations included in the NVLAP program that most closely approximates the type of radiation or radiations for which the individual wearing the dosimeter is monitored.

56 FR 23360

§ 20.1502 Conditions requiring individual monitoring of external and internal occupational dose.

Each licensee shall monitor exposures to radiation and radioactive material at levels sufficient to demonstrate compliance with the occupational dose limits of this part. As a minimum—

(a) Each licensee shall monitor occupational exposure to radiation and shall supply and require the use of individual monitoring devices by—

(1) Adults likely to receive, in 1 year from sources external to the body, a dose in excess of 10 percent of the limits in § 20.1201(a),

(2) Minors and declared pregnant women likely to receive, in 1 year from sources external to the body, a dose in excess of 10 percent of any of the applicable limits in § 20.1207 or § 20.1208, and

(3) Individuals entering a high or very high radiation area.

(b) Each licensee shall monitor (see § 20.1204) the occupational intake of radioactive material by and assess the committed effective dose equivalent to—

60 FR 20183

(1) Adults likely to receive, in 1 year, an intake in excess of 10 percent of the applicable ALI(s) in table 1, Columns 1 and 2, of appendix B to part 20; and

(2) Minors and declared pregnant women likely to receive, in 1 year, a committed effective dose equivalent in excess of 0.05 rem (0.5 mSv).

Subpart G—Control of Exposure From External Sources in Restricted Areas

56 FR 23360

§ 20.1601 Control of access to high radiation areas.

(a) The licensee shall ensure that each entrance or access point to a high radiation area has one or more of the following features—

(1) A control device that, upon entry into the area, causes the level of radiation to be reduced below that level at which an individual might receive a

deep-dose equivalent of 0.1 rem (1 mSv) in 1 hour at 30 centimeters from the radiation source or from any surface that the radiation penetrates;

(2) A control device that energizes a conspicuous visible or audible alarm signal so that the individual entering the high radiation area and the supervisor of the activity are made aware of the entry; or

(3) Entryways that are locked, except during periods when access to the areas is required, with positive control over each individual entry.

(b) In place of the controls required by paragraph (a) of this section for a high radiation area, the licensee may substitute continuous direct or electronic surveillance that is capable of preventing unauthorized entry.

(c) A licensee may apply to the Commission for approval of alternative methods for controlling access to high radiation areas.

(d) The licensee shall establish the controls required by paragraphs (a) and (c) of this section in a way that does not prevent individuals from leaving a high radiation area.

56 FR 23360

(e) Control is not required for each entrance or access point to a room or other area that is a high radiation area solely because of the presence of radioactive materials prepared for transport and packaged and labeled in accordance with the regulations of the Department of Transportation provided that—

(1) The packages do not remain in the area longer than 3 days; and

(2) The dose rate at 1 meter from the external surface of any package does not exceed 0.01 rem (0.1 mSv) per hour.

(f) Control of entrance or access to rooms or other areas in hospitals is not required solely because of the presence of patients containing radioactive material, provided that there are personnel in attendance who will take the necessary precautions to prevent the exposure of individuals to radiation or radioactive material in excess of the limits established in this part and to operate within the ALARA provisions of the licensee's radiation protection program.

§ 20.1602 Control of access to very high radiation areas.

In addition to the requirements in § 20.1601, the licensee shall institute additional measures to ensure that an individual is not able to gain unauthorized or inadvertent access to areas in which radiation levels could be encountered at 500 rads (5 grays) or more in 1 hour at 1 meter from a radiation source or any surface through which the radiation penetrates.

Subpart H—Respiratory Protection and Controls to Restrict Internal Exposure in Restricted Areas

60 FR 20183

§ 20.1701 Use of process or other engineering controls.

The licensee shall use, to the extent practical, process or other engineering controls (e.g., containment or ventilation) to control the concentrations of radioactive material in air.

§ 20.1702 Use of other controls.

When it is not practical to apply process or other engineering controls to control the concentrations of radioactive material in air to values below those that define an airborne radioactivity area, the licensee shall, consistent with maintaining the total effective dose equivalent ALARA, increase monitoring and limit intakes by one or more of the following means:

56 FR 23360

(a) Control of access;
(b) Limitation of exposure times;
(c) Use of respiratory protection equipment; or
(d) Other controls.

56 FR 23360

§ 20.1703 Use of individual respiratory protection equipment.

(a) If the licensee uses respiratory protection equipment to limit intakes pursuant to § 20.1702—

(1) The licensee shall use only respiratory protection equipment that is tested and certified or had certification extended by the National Institute for Occupational Safety and Health/Mine Safety and Health Administration (NIOSH/MSHA).

(2) If the licensee wishes to use equipment that has not been tested or certified by NIOSH/MSHA, has not had certification extended by NIOSH/MSHA, or for which there is no schedule for testing or certification, the licensee shall submit an application for authorized use of that equipment, including a demonstration by testing, or a demonstration on the basis of reliable test information, that the material and performance characteristics of the equipment are capable of providing the proposed degree of protection under anticipated conditions of use.

(3) The licensee shall implement and maintain a respiratory protection program that includes—

(i) Air sampling sufficient to identify the potential hazard, permit proper equipment selection, and estimate exposures;

(ii) Surveys and bioassays, as appropriate, to evaluate actual intakes;

(iii) Testing of respirators for operability immediately prior to each use;

(iv) Written procedures regarding selection, fitting, issuance, maintenance, and testing of respirators, including testing for operability immediately prior to each use; supervision and training of personnel; monitoring, including air sampling and bioassays; and recordkeeping; and

60 FR 7900

(v) Determination by a physician prior to the initial fitting of respirators, and either every 12 months thereafter or periodically at a frequency determined by a physician, that the individual user is medically fit to use the respiratory protection equipment.

56 FR 23360

(4) The licensee shall issue a written policy statement on respirator usage covering—

(i) The use of process or other engineering controls, instead of respirators;

(ii) The routine, nonroutine, and emergency use of respirators; and

(iii) The periods of respirator use and relief from respirator use.

(5) The licensee shall advise each respirator user that the user may leave the area at any time for relief from respirator use in the event of equipment malfunction, physical or psychological distress, procedural or communication failure, significant deterioration of operating conditions, or any other conditions that might require such relief.

(6) The licensee shall use equipment within limitations for type and mode of use and shall provide proper visual, communication, and other special capabilities (such as adequate skin protection) when needed.

(b) In estimating exposure of individuals to airborne radioactive materials, the licensee may make allowance for respiratory protection equipment used to limit intakes pursuant to § 20.1702, provided that the following conditions, in addition to those in § 20.1703(a), are satisfied:

60 FR 20183

(1) The licensee selects respiratory protection equipment that provides a protection factor (see Appendix A, Part 20) greater than the multiple by which peak concentrations of airborne radioactive materials in the working area are expected to exceed the values specified in Appendix B to Part 20, Table 1, column 3. If the selection of a respiratory protection device with a protection factor greater than the multiple defined in the preceding sentence is inconsistent with the goal specified in § 20.1702 of keeping the total effective dose equivalent ALARA, the licensee may select respiratory protection equipment with a lower protection factor only if such a selection would result in keeping the total effective dose equivalent ALARA. The concentration of radioactive material in the air that is inhaled when respirators are worn may be initially estimated by dividing the average concentration in air, during each period of uninterrupted use, by the protection factor. If the exposure is later found to be greater than estimated, the corrected value must be used; if the exposure is later found to be less than estimated, the corrected value may be used.

(2) The licensee shall obtain authorization from the Commission before assigning respiratory protection factors in excess of those specified in Appendix A to Part 20. The Commission may authorize a licensee to use higher protection factors on receipt of an application that—

56 FR 23360

(i) Describes the situation for which a need exists for higher protection factors, and

(ii) Demonstrates that the respiratory protection equipment provides these higher protection factors under the proposed conditions of use.

57 FR 57877

(c) The licensee shall use as emergency devices only respiratory protection equipment that has been specifically certified or had certification extended for emergency use by NIOSH/MSHA.

60 FR 20183

(d) The licensee shall notify, in writing, the Regional Administrator of the appropriate NRC Regional Office listed in Appendix D to Part 20 at least 30 days before the date that respiratory protection equipment is first used under the provisions of either § 20.1703 (a) or (b).

60 FR 20183

§ 20.1704 Further restrictions on the use of respiratory protection equipment.

The Commission may impose restrictions in addition to those in §§ 20.1702, 20.1703, and appendix A to part 20 to —

(a) Ensure that the respiratory protection program of the licensee is adequate to limit exposures of individuals to airborne radioactive materials; and

(b) Limit the extent to which a licensee may use respiratory protection equipment instead of process or other engineering controls.

56 FR 23360

Subpart I—Storage and Control of Licensed Material

§ 20.1801 Security of stored material.

The licensee shall secure from unauthorized removal or access licensed materials that are stored in controlled or unrestricted areas.

§ 20.1802 Control of material not in storage.

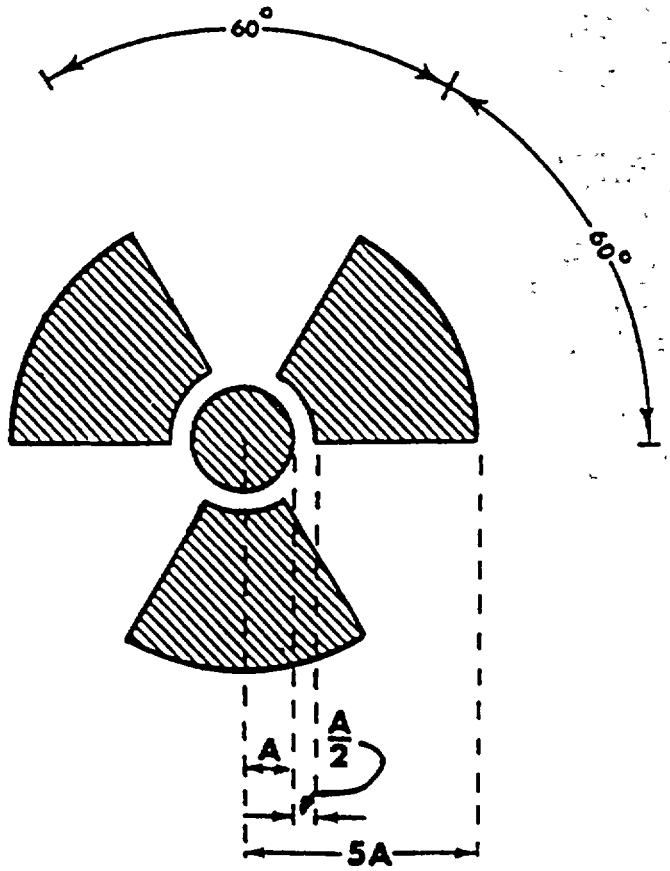
The licensee shall control and maintain constant surveillance of licensed material that is in a controlled or unrestricted area and that is not in storage.

56 FR 23360

Subpart J—Precautionary Procedures

§ 20.1901 Caution signs.

(a) *Standard radiation symbol.* Unless otherwise authorized by the Commission, the symbol prescribed by this part shall use the colors magenta, or purple, or black on yellow background. The symbol prescribed by this part is the three-bladed design:



RADIATION SYMBOL

(1) Cross-hatched area is to be magenta, or purple, or black, and

(2) The background is to be yellow.

(b) *Exception to color requirements for standard radiation symbol.* Notwithstanding the requirements of paragraph (a) of this section, licensees are authorized to label sources, source holders, or device components containing sources of licensed materials that are subjected to high temperatures, with conspicuously etched or stamped radiation caution symbols and without a color requirement.

(c) *Additional information on signs and labels.* In addition to the contents of signs and labels prescribed in this part, the licensee may provide, on or near the required signs and labels, additional information, as appropriate, to make individuals aware of potential radiation exposures and to minimize the exposures.

56 FR 23360

§ 20.1902 Posting requirements.

(a) *Posting of radiation areas.* The licensee shall post each radiation area with a conspicuous sign or signs bearing the radiation symbol and the words "CAUTION, RADIATION AREA."

(b) *Posting of high radiation areas.* The licensee shall post each high radiation area with a conspicuous sign or signs bearing the radiation symbol and the words "CAUTION, HIGH RADIATION AREA" or "DANGER, HIGH RADIATION AREA."

(c) *Posting of very high radiation areas.* The licensee shall post each very high radiation area with a conspicuous sign or signs bearing the radiation symbol and words "GRAVE DANGER, VERY HIGH RADIATION AREA."

(d) *Posting of airborne radioactivity areas.* The licensee shall post each airborne radioactivity area with a conspicuous sign or signs bearing the radiation symbol and the words "CAUTION, AIRBORNE RADIOACTIVITY AREA" or "DANGER, AIRBORNE RADIOACTIVITY AREA."

60 FR 20183

(e) *Posting of areas or rooms in which licensed material is used or stored.* The licensee shall post each area or room in which there is used or stored an amount of licensed material exceeding 10 times the quantity of such material specified in appendix C to part 20 with a conspicuous sign or signs bearing the radiation symbol and the words "CAUTION, RADIOACTIVE MATERIAL(S)" or "DANGER, RADIOACTIVE MATERIAL(S)."

56 FR 23360

§ 20.1903 Exceptions to posting requirements.

(a) A licensee is not required to post caution signs in areas or rooms containing radioactive materials for

56 FR 23360

periods of less than 8 hours, if each of the following conditions is met:

(1) The materials are constantly attended during these periods by an individual who takes the precautions necessary to prevent the exposure of individuals to radiation or radioactive materials in excess of the limits established in this part; and

(2) The area or room is subject to the licensee's control.

62 FR 4120

(b) Rooms or other areas in hospitals that are occupied by patients are not required to be posted with caution signs pursuant to § 20.1902 provided that the patient could be released from licensee control pursuant to § 35.75 of this chapter.

(c) A room or area is not required to be posted with a caution sign because of the presence of a sealed source provided the radiation level at 30 centimeters from the surface of the source container or housing does not exceed 0.005 rem (0.05 mSv) per hour.

§ 20.1904 Labeling containers.

56 FR 23360

(a) The licensee shall ensure that each container of licensed material bears a durable, clearly visible label bearing the radiation symbol and the words "CAUTION, RADIOACTIVE MATERIAL" or "DANGER, RADIOACTIVE MATERIAL." The label must also provide sufficient information (such as the radionuclide(s) present, an estimate of the quantity of radioactivity, the date for which the activity is estimated, radiation levels, kinds of materials, and mass enrichment) to permit individuals handling or using the containers, or working in the vicinity of the containers, to take precautions to avoid or minimize exposures.

(b) Each licensee shall, prior to removal or disposal of empty uncontaminated containers to unrestricted areas, remove or deface the radioactive material label or otherwise clearly indicate that the container no longer contains radioactive materials.

§ 20.1905 Exemptions to labeling requirements.

A licensee is not required to label—

60 FR 20183

(a) Containers holding licensed material in quantities less than the quantities listed in appendix C to part 20; or

(b) Containers holding licensed material in concentrations less than those specified in table 3 of appendix B to part 20; or

56 FR 23360

(c) Containers attended by an individual who takes the precautions necessary to prevent the exposure of individuals in excess of the limits established by this part; or

(d) Containers when they are in transport and packaged and labeled in accordance with the regulations of the Department of Transportation,[3] or

(e) Containers that are accessible only to individuals authorized to handle or use them, or to work in the vicinity of the containers, if the contents are identified to these individuals by a readily available written record (examples of containers of this type are containers in locations such as water-filled canals, storage vaults, or hot cells). The record must be retained as long as the containers are in use for the purpose indicated on the record; or

(f) Installed manufacturing or process equipment, such as reactor components, piping, and tanks.

§ 20.1906 Procedures for receiving and opening packages.

(a) Each licensee who expects to receive a package containing quantities of radioactive material in excess of a Type A quantity, as defined in § 71.4 and appendix A to part 71 of this chapter, shall make arrangements to receive—

(1) The package when the carrier offers it for delivery; or

(2) Notification of the arrival of the package at the carrier's terminal and to take possession of the package expeditiously.

[3] Labeling of packages containing radioactive materials is required by the Department of Transportation (DOT) if the amount and type of radioactive material exceeds the limits for an excepted quantity or article as defined and limited by DOT regulations 49 CFR 173 403 (m) and (w) and 173.421–424.

57 FR 39353

(b) Each licensee shall—

(1) Monitor the external surfaces of a labeled [36] package for radioactive contamination unless the package contains only radioactive material in the form of a gas or in special form as defined in 10 CFR 71.4;

(2) Monitor the external surfaces of a labeled [36] package for radiation levels unless the package contains quantities of radioactive material that are less than or equal to the Type A quantity, as defined in § 71.4 and appendix A to part 71 of this chapter; and

(3) Monitor all packages known to contain radioactive material for radioactive contamination and radiation levels if there is evidence of degradation of package integrity, such as packages that are crushed, wet, or damaged.

60 FR 20183

(c) The licensee shall perform the monitoring required by paragraph (b) of this section as soon as practical after receipt of the package, but not later than 3 hours after the package is received at the licensee's facility if it is received during the licensee's normal working hours, or not later than 3 hours from the beginning of the next working day if it is received after working hours.

(d) The licensee shall immediately notify the final delivery carrier and, by telephone and telegram, mailgram, or facsimile, the Administrator of the appropriate NRC Regional Office listed in appendix D to part 20 when—

(1) Removable radioactive surface contamination exceeds the limits of § 71.87(i) of this chapter; or

(2) External radiation levels exceed the limits of § 71.47 of this chapter.

56 FR 23360

(e) Each licensee shall—

(1) Establish, maintain, and retain written procedures for safely opening packages in which radioactive material is received; and

(2) Ensure that the procedures are followed and that due consideration is given to special instructions for the type of package being opened.

(f) Licensees transferring special form sources in licensee-owned or licensee-operated vehicles to and from a work site are exempt from the contamination monitoring requirements of paragraph (b) of this section, but are not exempt from the survey requirement in paragraph (b) of this section for measuring radiation levels that is required to ensure that the source is still properly lodged in its shield.

[36] Labeled with a Radioactive White I, Yellow II, or Yellow III label as specified in U.S. Department of Transportation regulations, 49 CFR 172.403 and 172.436–440.

Subpart K—Waste Disposal

§ 20.2001 General requirements.

(a) A licensee shall dispose of licensed material only—

(1) By transfer to an authorized recipient as provided in § 20.2006 or in the regulations in parts 30, 40, 60, 61, 70, or 72 of this chapter; or

(2) By decay in storage; or

(3) By release in effluents within the limits in § 20.1301; or

(4) As authorized under §§ 20.2002, 20 2003, 20.2004, or § 20 2005.

(b) A person must be specifically licensed to receive waste containing licensed material from other persons for:

(1) Treatment prior to disposal; or

(2) Treatment or disposal by incineration; or

(3) Decay in storage; or

(4) Disposal at a land disposal facility licensed under part 61 of this chapter; or

(5) Disposal at a geologic repository under part 60 of this chapter.

56 FR 23360

§ 20.2002 Method for obtaining approval of proposed disposal procedures.

A licensee or applicant for a license may apply to the Commission for approval of proposed procedures, not otherwise authorized in the regulations in this chapter, to dispose of licensed material generated in the licensee's activities Each application shall include:

(a) A description of the waste containing licensed material to be disposed of, including the physical and chemical properties important to risk evaluation, and the proposed manner and conditions of waste disposal; and

(b) An analysis and evaluation of pertinent information on the nature of the environment; and

(c) The nature and location of other potentially affected licensed and unlicensed facilities; and

(d) Analyses and procedures to ensure that doses are maintained ALARA and within the dose limits in this part.

§ 20.2003 Disposal by release into sanitary sewerage.

(a) A licensee may discharge licensed material into sanitary sewerage if each of the following conditions is satisfied:

(1) The material is readily soluble (or is readily dispersible biological material) in water; and

(2) The quantity of licensed or other radioactive material that the licensee releases into the sewer in 1 month divided by the average monthly volume of water released into the sewer by the licensee does not exceed the concentration listed in table 3 of appendix B to part 20; and

60 FR 20183

(3) If more than one radionuclide is released, the following conditions must also be satisfied:

56 FR 23360

(i) The licensee shall determine the fraction of the limit in table 3 of appendix B to part 20 represented by discharges into sanitary sewerage by dividing the actual monthly average concentration of each radionuclide released by the licensee into the sewer by the concentration of that radionuclide listed in table 3 of appendix B to part 20; and

60 FR 20183

(ii) The sum of the fractions for each radionuclide required by paragraph (a)(3)(i) of this section does not exceed unity; and

(4) The total quantity of licensed and other radioactive material that the licensee releases into the sanitary sewerage system in a year does not exceed 5 curies (185 GBq) of hydrogen-3, 1 curie (37 GBq) of carbon-14, and 1 curie (37 GBq) of all other radioactive materials combined.

56 FR 23360

(b) Excreta from individuals undergoing medical diagnosis or therapy with radioactive material are not subject to the limitations contained in paragraph (a) of this section.

§ 20.2004 Treatment or disposal by incineration.

(a) A licensee may treat or dispose of licensed material by incineration only:

(1) As authorized by paragraph (b) of this section; or

(2) If the material is in a form and concentration specified in § 20.2005; or

(3) As specifically approved by the Commission pursuant to § 20.2002.

(b) (1) Waste oils (petroleum derived or synthetic oils used principally as lubricants, coolants, hydraulic or insulating fluids, or metalworking oils) that have been radioactively contaminated in the course of the operation or maintenance of a nuclear power reactor licensed under part 50 of this chapter may be incinerated on the site where generated provided that the total radioactive effluents from the facility, including the effluents from such incineration, conform to the requirements of Appendix I to Part 50 of this chapter and the effluent release limits contained in applicable license conditions other than effluent limits specifically related to incineration of waste oil. The licensee shall report any changes or additions to the information supplied under §§ 50.34 and 50.34a of this chapter associated with this incineration pursuant to § 50.71 of this

57 FR 5749

chapter, as appropriate. The licensee shall also follow the procedures of § 50.59 of this chapter with respect to such changes to the facility or procedures.

(2) Solid residues produced in the process of incinerating waste oils must be disposed of as provided by § 20.2001.

(3) The provisions of this section authorize onsite waste oil incineration under the terms of this section and supersede any provision in an individual plant license or technical specification that may be inconsistent.

57 FR 57649

§ 20.2005 Disposal of specific wastes.

(a) A licensee may dispose of the following licensed material as if it were not radioactive:

(1) 0.05 microcurie (1.85 kBq), or less, of hydrogen-3 or carbon-14 per gram of medium used for liquid scintillation counting; and

(2) 0.05 microcurie (1.85 kBq), or less, of hydrogen-3 or carbon-14 per gram of animal tissue, averaged over the weight of the entire animal.

(b) A licensee may not dispose of tissue under paragraph (a)(2) of this section in a manner that would permit its use either as food for humans or as animal feed.

(c) The licensee shall maintain records in accordance with § 20.2108.

56 FR 23360

§ 20.2006 Transfer for disposal and manifests.

(a)(1) The requirements of this section and appendices F and G to 10 CFR part 20 are designed to

(i) Control transfers of low-level radioactive waste by any waste generator, waste collector, or waste processor licensee, as defined in this part, who ships low-level waste either directly, or indirectly through a waste collector or waste processor, to a licensed low-level waste land disposal facility (as defined in part 61 of this chapter);

(ii) Establish a manifest tracking system; and

(iii) Supplement existing requirements concerning transfers and recordkeeping for those wastes.

(2) Beginning March 1, 1998, all affected licensees must use Appendix G. Prior to March 1, 1998, a LLW disposal facility operator or its regulatory authority may require the shipper to use appendix F or appendix G. Licensees using appendix F shall comply with paragraph (b)(1) of this section. Licensees using appendix G shall comply with paragraph (b)(2) of this section.

(b)(1) Each shipment of radioactive waste intended for disposal at a licensed land disposal facility must be accompanied by a shipment manifest in accordance with section I of appendix F to 10 CFR part 20.

(2) Any licensee shipping radioactive waste intended for ultimate disposal at a licensed land disposal facility must document the information required on NRC's Uniform Low-Level Radioactive Waste Manifest and transfer this recorded manifest information to the intended consignee in accordance with appendix G to 10 CFR part 20.

(c) Each shipment manifest must include a certification by the waste generator as specified in section II of appendix F or appendix G to 10 CFR part 20, as appropriate. See paragraph (a)(2) of this section to determine the appropriate appendix.

(d) Each person involved in the transfer for disposal and disposal of waste, including the waste generator, waste collector, waste processor, and disposal facility operator, shall comply with the requirements specified in section III of appendix F or appendix G to 10 CFR part 20, as appropriate. See paragraph (a)(2) of this section to determine the appropriate appendix.

60 FR 15649

§ 20.2007 Compliance with environmental and health protection regulations.

Nothing in this subpart relieves the licensee from complying with other applicable Federal, State, and local regulations governing any other toxic or hazardous properties of materials that may be disposed of under this subpart.

56 FR 23360

Subpart L—Records

56 FR 23360

§ 20.2101 General provisions.

(a) Each licensee shall use the units: curie, rad, rem, including multiples and subdivisions, and shall clearly indicate the units of all quantities on records required by this part.

60 FR 15649

(b) Notwithstanding the requirements of paragraph (a) of this section, when recording information on shipment manifests, as required in § 20.2006(b), information must be recorded in the International System of Units (SI) or in SI and units as specified in paragraph (a) of this section.

(c) The licensee shall make a clear distinction among the quantities entered on the records required by this part (e.g., total effective dose equivalent, shallow-dose equivalent, eye dose equivalent, deep-dose equivalent, committed effective dose equivalent).

56 FR 23360

§ 20.2102 Records of radiation protection programs.

(a) Each licensee shall maintain records of the radiation protection program, including:

(1) The provisions of the program; and

(2) Audits and other reviews of program content and implementation.

(b) The licensee shall retain the records required by paragraph (a)(1) of this section until the Commission terminates each pertinent license requiring the record. The licensee shall retain the records required by paragraph (a)(2) of this section for 3 years after the record is made.

§ 20.2103 Records of surveys.

(a) Each licensee shall maintain records showing the results of surveys and calibrations required by §§ 20.1501 and 20.1906(b). The licensee shall retain these records for 3 years after the record is made.

(b) The licensee shall retain each of the following records until the Commission terminates each pertinent license requiring the record:

60 FR 20183

(1) Records of the results of surveys to determine the dose from external sources and used, in the absence of or in combination with individual monitoring data, in the assessment of individual dose equivalents. This includes those records of results of surveys to determine the dose from external sources and used, in the absence of or in combination with individual monitoring data, in the assessment of individual dose equivalents required under the standards for protection against radiation in effect prior to January 1, 1994; and

(2) Records of the results of measurements and calculations used to determine individual intakes of radioactive material and used in the assessment of internal dose. This includes those records of the results of measurements and calculations used to determine individual intakes of radioactive material and used in the assessment of internal dose required under the standards for protection against radiation in effect prior to January 1, 1994; and

(3) Records showing the results of air sampling, surveys, and bioassays required pursuant to § 20.1703(a)(3) (i) and (ii). This includes those records showing the results of air sampling, surveys, and bioassays required under the standards for protection against radiation in effect prior to January 1, 1994; and

(4) Records of the results of measurements and calculations used to evaluate the release of radioactive effluents to the environment. This includes those records of the results of measurements and calculations used to evaluate the release of radioactive effluents to the environment required under the standards for protection against radiation in effect prior to January 1, 1994.

60 FR 36038

§ 20.2104 Determination of prior occupational dose.

(a) For each individual who is likely to receive in a year, an occupational dose requiring monitoring pursuant to § 20.1502 the licensee shall—

56 FR 23360

(1) Determine the occupational radiation dose received during the current year; and

57 FR 57877

(2) Attempt to obtain the records of cumulative occupational radiation dose.

56 FR 23360

(b) Prior to permitting an individual to participate in a planned special exposure, the licensee shall determine—

(1) The internal and external doses from all previous planned special exposures; and

(2) All doses in excess of the limits (including doses received during accidents and emergencies) received during the lifetime of the individual.

(c) In complying with the requirements of paragraph (a) of this section, a licensee may—

(1) Accept, as a record of the occupational dose that the individual received during the current year, a written signed statement from the individual, or from the individual's most recent employer for work involving radiation exposure, that discloses the nature and the amount of any occupational dose that the individual may have received during the current year;

57 FR 57877

(2) Accept, as the record of cumulative radiation dose, an up-to-date NRC Form 4, or equivalent, signed by the individual and countersigned by an appropriate official of the most recent employer for work involving radiation exposure, or the individual's current employer (if the individual is not employed by the licensee); and

56 FR 23360

(3) Obtain reports of the individual's dose equivalent(s) from the most recent employer for work involving radiation exposure, or the individual's current employer (if the individual is not employed by the licensee) by telephone, telegram, electronic media, or letter. The licensee shall request a written verification of the dose data if the authenticity of the transmitted report cannot be established.

57 FR 57877

(d) The licensee shall record the exposure history of each individual, as required by paragraph (a) of this section, on NRC Form 4, or other clear and legible record, including all of the information required by NRC Form 4[4]. The form or record must show each period in which the individual received occupational exposure to radiation or radioactive material and must be signed by the individual who received the exposure. For each period for which the licensee obtains reports, the licensee shall use the dose shown in the report in preparing the NRC Form 4. For any period in which the licensee does not obtain a report, the licensee shall place a notation on the NRC Form 4 indicating the periods of time for which data are not available.

[4] Licensees are not required to partition historical dose between external dose equivalent(s) and internal committed dose equivalent(s). Further, occupational exposure histories obtained and recorded on NRC Form 4 before January 1, 1994, might not have included effective dose equivalent, but may be used in the absence of specific information on the intake of radionuclides by the individual.

56 FR 23360

(e) If the licensee is unable to obtain a complete record of an individual's current and previously accumulated occupational dose, the licensee shall assume—

(1) In establishing administrative controls under § 20.1201(f) for the current year, that the allowable dose limit for the individual is reduced by 1.25 rems (12.5 mSv) for each quarter for which records were unavailable and the individual was engaged in activities that could have resulted in occupational radiation exposure; and

(2) That the individual is not available for planned special exposures.

60 FR 20183

(f) The licensee shall retain the records on NRC Form 4 or equivalent until the Commission terminates each pertinent license requiring this record. The licensee shall retain records used in preparing NRC Form 4 for 3 years after the record is made. This includes records required under the standards for protection against radiation in effect prior to January 1, 1994.

56 FR 23360

§ 20.2105 Records of planned special exposures.

(a) For each use of the provisions of § 20.1206 for planned special exposures, the licensee shall maintain records that describe—

(1) The exceptional circumstances requiring the use of a planned special exposure; and

(2) The name of the management official who authorized the planned special exposure and a copy of the signed authorization; and

(3) What actions were necessary; and

(4) Why the actions were necessary; and

(5) How doses were maintained ALARA; and

(6) What individual and collective doses were expected to result, and the doses actually received in the planned special exposure.

(b) The licensee shall retain the records until the Commission terminates each pertinent license requiring these records.

§ 20.2106 Records of individual monitoring results.

(a) *Recordkeeping requirement.* Each licensee shall maintain records of doses received by all individuals for whom

monitoring was required pursuant to § 20.1502, and records of doses received during planned special exposures, accidents, and emergency conditions. These records [5] must include, when applicable—

(1) The deep-dose equivalent to the whole body, eye dose equivalent, shallow-dose equivalent to the skin, and shallow-dose equivalent to the extremities; and

(2) The estimated intake or body burden of radionuclides (see § 20.1202); and

(3) The committed effective dose equivalent assigned to the intake or body burden of radionuclides; and

(4) The specific information used to calculate the committed effective dose equivalent pursuant to § 20.1204(c); and

(5) The total effective dose equivalent when required by § 20.1202; and

(6) The total of the deep-dose equivalent and the committed dose to the organ receiving the highest total dose.

(b) *Recordkeeping frequency.* The licensee shall make entries of the records specified in paragraph (a) of this section at least annually.

(c) *Recordkeeping format.* The licensee shall maintain the records specified in paragraph (a) of this section on NRC Form 5, in accordance with the instructions for NRC Form 5, or in clear and legible records containing all the information required by NRC Form 5.

(d) *Privacy protection.* The records required under this section should be protected from public disclosure because of their personal privacy nature. These records are protected by most State privacy laws and, when transferred to the NRC, are protected by the Privacy Act of 1974, Public Law 93-579, 5 U.S.C. 552a, and the Commission's regulations in 10 CFR part 9.

(e) The licensee shall maintain the records of dose to an embryo/fetus with the records of dose to the declared pregnant woman. The declaration of pregnancy shall also be kept on file, but may be maintained separately from the dose records.

56 FR 23360

(f) The licensee shall retain the required form or record until the Commission terminates each pertinent license requiring this record. This includes records required under the standards for protection against radiation in effect prior to January 1, 1994.

60 FR 20183

§ 20.2107 Records of dose to individual members of the public.

(a) Each licensee shall maintain records sufficient to demonstrate compliance with the dose limit for individual members of the public (see § 20.1301).

(b) The licensee shall retain the records required by paragraph (a) of this section until the Commission terminates each pertinent license requiring the record.

56 FR 23360

[5] Assessments of dose equivalent and records made using units in effect before the licensee's adoption of this part need not be changed.

56 FR 23360

§ 20.2108 Records of waste disposal.

(a) Each licensee shall maintain records of the disposal of licensed materials made under §§ 20.2002, 20.2003, 20 2004, 20.2005, 10 CFR part 61 and disposal by burial in soil, including burials authorized before January 28, 1981.[6]

61 FR 24669

(b) The licensee shall retain the records required by paragraph (a) of this section until the Commission terminates each pertinent license requiring the record. Requirements for disposition of these records, prior to license termination, are located in §§ 30.51, 40.61, 70.51, and 72.80 for activities licensed under these parts.

56 FR 23360

§ 20.2110 Form of records.

Each record required by this part must be legible throughout the specified retention period. The record may be the original or a reproduced copy or a microform provided that the copy or microform is authenticated by authorized personnel and that the microform is capable of producing a clear copy throughout the required retention period. The record may also be stored in electronic media with the capability for producing legible, accurate, and complete records during the required retention period. Records, such as letters, drawings, and specifications, must include all pertinent information, such as stamps, initials, and signatures. The licensee shall maintain adequate safeguards against tampering with and loss of records.

Subpart M—Reports

§ 20.2201 Reports of theft or loss of licensed material.

(a) Telephone reports. (1) Each licensee shall report by telephone as follows:

60 FR 20183

(i) Immediately after its occurrence becomes known to the licensee, any lost, stolen, or missing licensed material in an aggregate quantity equal to or greater than 1,000 times the quantity specified in appendix C to part 20 under such circumstances that it appears to the licensee that an exposure could result to persons in unrestricted areas; or

(ii) Within 30 days after the occurrence of any lost, stolen, or missing licensed material becomes known to the licensee, all licensed material in a quantity greater than 10 times the quantity specified in appendix C to part 20 that is still missing at this time.

56 FR 23360

(2) Reports must be made as follows:

(i) Licensees having an installed Emergency Notification System shall make the reports to the NRC Operations Center in accordance with § 50.72 of this chapter, and

58 FR 69219

(ii) All other licensees shall make reports by telephone to the NRC Operations Center (301–951–0550).

[6] A previous § 20.304 permitted burial of small quantities of licensed materials in soil before January 28, 1981, without specific Commission authorization

56 FR 23360

(b) *Written reports.* (1) Each licensee required to make a report under paragraph (a) of this section shall, within 30 days after making the telephone report, make a written report setting forth the following information:

(i) A description of the licensed material involved, including kind, quantity, and chemical and physical form; and

(ii) A description of the circumstances under which the loss or theft occurred; and

(iii) A statement of disposition, or probable disposition, of the licensed material involved; and

(iv) Exposures of individuals to radiation, circumstances under which the exposures occurred, and the possible total effective dose equivalent to persons in unrestricted areas; and

(v) Actions that have been taken, or will be taken, to recover the material; and

(vi) Procedures or measures that have been, or will be, adopted to ensure against a recurrence of the loss or theft of licensed material.

(2) Reports must be made as follows:

(i) For holders of an operating license for a nuclear power plant, the events included in paragraph (b) of this section must be reported in accordance with the procedures described in § 50.73(b), (c), (d), (e), and (g) of this chapter and must include the information required in paragraph (b)(1) of this section, and

60 FR 20183

(ii) All other licensees shall make reports to the Administrator of the appropriate NRC Regional Office listed in appendix D to part 20.

56 FR 23360

(c) A duplicate report is not required under paragraph (b) of this section if the licensee is also required to submit a report pursuant to §§ 30.55(c), 40.64(c), 50.72, 50.73, 70.52, 73.27(b), 73.67(e)(3)(vi), 73.67(g)(3)(iii), 73.71, or § 150.19(c) of this chapter.

(d) Subsequent to filing the written report, the licensee shall also report any additional substantive information on the loss or theft within 30 days after the licensee learns of such information.

(e) The licensee shall prepare any report filed with the Commission pursuant to this section so that names of individuals who may have received exposure to radiation are stated in a separate and detachable part of the report.

§ 20.2202 Notification of incidents.

(a) Immediate notification. Notwithstanding any other requirements for notification, each licensee shall immediately report any event involving byproduct, source, or special nuclear material possessed by the licensee that may have caused or threatens to cause any of the following conditions—

(1) An individual to receive—

(i) A total effective dose equivalent of 25 rems (0.25 Sv) or more; or

(ii) An eye dose equivalent of 75 rems (0.75 Sv) or more; or

(iii) A shallow-dose equivalent to the skin or extremities of 250 rads (2.5 Gy) or more; or

57 FR 57877

(2) The release of radioactive material, inside or outside of a restricted area, so that, had an individual been present for 24 hours, the individual could have received an intake five times the annual limit on intake (the provisions of this paragraph do not apply to locations where personnel are not normally stationed during routine operations, such as hot-cells or process enclosures).

56 FR 23360

(b) Twenty-four hour notification. Each licensee shall, within 24 hours of discovery of the event, report any event involving loss of control of licensed material possessed by the licensee that may have caused, or threatens to cause, any of the following conditions:

(1) An individual to receive, in a period of 24 hours—

(i) A total effective dose equivalent exceeding 5 rems (0.05 Sv); or

(ii) An eye dose equivalent exceeding 15 rems (0.15 Sv); or

(iii) A shallow-dose equivalent to the skin or extremities exceeding 50 rems (0.5 Sv); or

(2) The release of radioactive material, inside or outside of a restricted area, so that, had an individual been present for 24 hours, the individual could have received an intake in excess of one occupational annual limit on intake (the provisions of this paragraph do not apply to locations where personnel are not normally stationed during routine operations, such as hot-cells or process enclosures.

(c) The licensee shall prepare any report filed with the Commission pursuant to this section so that names of individuals who have received exposure to radiation or radioactive material are stated in a separate and detachable part of the report.

(d) Reports made by licensees in response to the requirements of this section must be made as follows:

(1) Licensees having an installed Emergency Notification System shall make the reports required by paragraphs (a) and (b) of this section to the NRC Operations Center in accordance with 10 CFR 50.72; and

56 FR 23360

(2) All other licensees shall make the reports required by paragraph (a) and (b) of this section by telephone to the NRC Operations Center (301) 816-5100 and by telegram, mailgram, or facsimile to the Administrator of the appropriate NRC Regional Office listed in appendix D to 10 CFR part 20.

59 FR 14085

(e) The provisions of this section do not include doses that result from planned special exposures, that are within the limits for planned special exposures, and that are reported under § 20.2204.

56 FR 23360

61 FR 65120

§ 20.2203 Reports of exposures, radiation levels, and concentrations of radioactive material exceeding the constraints or limits.

(a) Reportable events. In addition to the notification required by § 20.2202, each licensee shall submit a written report within 30 days after learning of any of the following occurrences:

(1) Any incident for which notification is required by § 20.2202; or

(2) Doses in excess of any of the following:

(i) The occupational dose limits for adults in § 20.1201; or

(ii) The occupational dose limits for a minor in § 20.1207; or

(iii) The limits for an embryo/fetus of a declared pregnant woman in § 20.1208; or

(iv) The limits for an individual member of the public in § 20.1301; or

(v) Any applicable limit in the license; or

56 FR 23360

61 FR 65120

(vi) The ALARA constraints for air emissions established under § 20.1101(d); or

(3) Levels of radiation or concentrations of radioactive material in—

(i) A restricted area in excess of any applicable limit in the license; or

(ii) An unrestricted area in excess of 10 times any applicable limit set forth in this part or in the license (whether or not involving exposure of any individual in excess of the limits in § 20.1301); or

56 FR 23360

(4) For licensees subject to the provisions of EPA's generally applicable environmental radiation standards in 40 CFR part 190, levels of radiation or releases of radioactive material in excess of those standards, or of license conditions related to those standards.

(b) Contents of reports. (1) Each report required by paragraph (a) of this section must describe the extent of exposure of individuals to radiation and radioactive material, including, as appropriate:

(i) Estimates of each individual's dose; and

(ii) The levels of radiation and concentrations of radioactive material involved; and

(iii) The cause of the elevated exposures, dose rates, or concentrations; and

56 FR 23360

61 FR 65120

(iv) Corrective steps taken or planned to ensure against a recurrence, including the schedule for achieving conformance with applicable limits, ALARA constraints, generally applicable environmental standards, and associated license conditions.

(2) Each report filed pursuant to paragraph (a) of this section must include for each occupationally overexposed[7] individual: the name, Social Security account number, and date of birth. The report must be prepared so that this information is stated in a separate and detachable part of the report.

(c) For holders of an operating license for a nuclear power plant, the occurrences included in paragraph (a) of this section must be reported in accordance with the procedures described in § 50.73(b), (c), (d), (e), and (g) of this chapter and must also include the information required by paragraph (b) of this section. Occurrences reported in accordance with § 50.73 of this chapter need not be reported by a duplicate report under paragraph (a) of this section.

56 FR 23360

[7] With respect to the limit for the embryo-fetus (§ 20.1208), the identifiers should be those of the declared pregnant woman

(d) All licensees, other than those holding an operating license for a nuclear power plant, who make reports under paragraph (a) of this section shall submit the report in writing to the U.S. Nuclear Regulatory Commission, Document Control Desk, Washington, DC 20555, with a copy to the appropriate NRC Regional Office listed in appendix D to part 20.

60 FR 20183

§ 20.2204 Reports of planned special exposures.

The licensee shall submit a written report to the Administrator of the appropriate NRC Regional Office listed in appendix D to part 20 within 30 days following any planned special exposure conducted in accordance with § 20.1206, informing the Commission that a planned special exposure was conducted and indicating the date the planned special exposure occurred and the information required by § 20.2105.

60 FR 36038

§ 20.2205 Reports to individuals of exceeding dose limits.

When a licensee is required, pursuant to the provisions of §§ 20.2203, 20.2204, or 20.2206, to report to the Commission any exposure of an identified occupationally exposed individual, or an identified member of the public, to radiation or radioactive material, the licensee shall also provide a copy of the report submitted to the Commission to the individual. This report must be transmitted at a time no later than the transmittal to the Commission.

56 FR 23360

§ 20.2206 Reports of individual monitoring.

(a) This section applies to each person licensed by the Commission to—

(1) Operate a nuclear reactor designed to produce electrical or heat energy pursuant to § 50.21(b) or § 50.22 of this chapter or a testing facility as defined in § 50.2 of this chapter; or

(2) Possess or use byproduct material for purposes of radiography pursuant to Parts 30 and 34 of this chapter; or

(3) Possess or use at any one time, for purposes of fuel processing, fabricating, or reprocessing, special nuclear material in a quantity exceeding 5,000 grams of contained uranium-235, uranium-233, or plutonium, or any combination thereof pursuant to part 70 of this chapter; or

(4) Possess high-level radioactive waste at a geologic repository operations area pursuant to part 60 of this chapter; or

(5) Possess spent fuel in an independent spent fuel storage installation (ISFSI) pursuant to part 72 of this chapter; or

(6) Receive radioactive waste from other persons for disposal under part 61 of this chapter; or

(7) Possess or use at any time, for processing or manufacturing for distribution pursuant to parts 30, 32, 33 or 35 of this chapter, byproduct material in quantities exceeding any one of the following quantities:

Radionuclide	Quantity of radionuclide [1] in curies
Cesium-137	1
Cobalt 60	1
Gold-198	100
Iodine-131	1
Indium-192	10
Krypton-85	1,000
Promethium-147	10
Techetium-99m	1,000

[1] The Commission may require as a license condition, or by rule, regulation, or order pursuant to § 20.2302, reports from licensees who are licensed to use radionuclides not on this list, in quantities sufficient to cause comparable radiation levels

56 FR 23360

(b) Each licensee in a category listed in paragraph (a) of this section shall submit an annual report of the results of individual monitoring carried out by the licensee for each individual for whom monitoring was required by § 20.1502 during that year. The licensee may include additional data for individuals for whom monitoring was provided but not required. The licensee shall use Form NRC 5 or electronic media containing all the information required by Form NRC 5.

56 FR 32071

(c) The licensee shall file the report required by § 20.2206(b), covering the preceding year, on or before April 30 of each year. The licensee shall submit the report to the REIRS Project Manager, Office of Nuclear Regulatory Research, U.S. Nuclear Regulatory Commission, Washington, DC 20555.

Subpart N—Exemptions and Additional Requirements

56 FR 23360

§ 20.2301 Applications for exemptions.

The Commission may, upon application by a licensee or upon its own initiative, grant an exemption from the requirements of the regulations in this part if it determines the exemption is authorized by law and would not result in undue hazard to life or property.

§ 20.2302 Additional requirements.

The Commission may, by rule, regulation, or order, impose requirements on a licensee, in addition to those established in the regulations in this part, as it deems appropriate or necessary to protect health or to minimize danger to life or property.

Subpart O—Enforcement

§ 20.2401 Violations.

(a) The Commission may obtain an injunction or other court order to prevent a violation of the provisions of—

(1) The Atomic Energy Act of 1954, as amended;

(2) Title II of the Energy Reorganization Act of 1974, as amended; or

(3) A regulation or order issued pursuant to those Acts.

(b) The Commission may obtain a court order for the payment of a civil penalty imposed under section 234 of the Atomic Energy Act:

(1) For violations of—

(i) Sections 53, 57, 62, 63, 81, 82, 101, 103, 104, 107 or 109 of the Atomic Energy Act of 1954, as amended;

(ii) Section 206 of the Energy Reorganization Act;

(iii) Any rule, regulation, or order issued pursuant to the sections specified in paragraph (b)(1)(i) of this section;

(iv) Any term, condition, or limitation of any license issued under the sections specified in paragraph (b)(1)(i) of this section.

(2) For any violation for which a license may be revoked under Section 186 of the Atomic Energy Act of 1954, as amended.

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§ 20.2402 Criminal penalties.

(a) Section 223 of the Atomic Energy Act of 1954, as amended, provides for criminal sanctions for willful violation of, attempted violation of, or conspiracy to violate, any regulation issued under sections 161b, 161i, or 161o of the Act. For purposes of section 223, all the regulations in §§ 20.1001 through 20.2402 are issued under one or more of sections 161b, 161i, or 161o, except for the sections listed in paragraph (b) this section.

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≫ (b) The regulations in §§ 20.1001 through 20.2402 that are not issued under Sections 161b, 161i, or 161o for the purposes of Section 223 are as follows: §§ 20.1001, 20.1002, 20.1003, 20.1004, 20.1005, 20.1006, 20.1007, 20.1008, 20.1009, 20.1405, 20.1704, 20.1903, 20.1905, 20.2002, 20.2007, 20.2301, 20.2302, 20.2401, and 20.2402.

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APPENDIX A TO PART 20—PROTECTION FACTORS FOR RESPIRATORS[a]

Description[b]	Modes[c]	Protection Factors[d]		Tested & Certified Equipment
		Particulates only	Particulates, gases, & vapors[e]	National Institute for Occupational Safety and Health/Mine Safety and Health Administration tests for permissibility
I. Air-Purifying Respirators:[f]				
Facepiece, half-mask[g]	NP	10		30 CFR Part 11, Subpart K.
Facepiece, full	NP	50		
Facepiece, half-mask full, or hood	PP	1000		
II. Atmosphere-Supplying Respirators:				
1 Air-line respirator:				
Facepiece, half-mask	CF		1000	30 CFR Part 11, Subpart J
Facepiece, half-mask	D		5	
Facepiece, full	CF		2000	
Facepiece, full	D		5	
Facepiece, full	PD		2000	
Hood	CF		(h)	
Suit	CF		(i)	(i)
2. Self-contained breathing apparatus (SCBA):				
Facepiece, full	D		50	30 CFR Part 11, Subpart H.
Facepiece, full	PD		[k] 10,000	
Facepiece, full	RD		50	
Facepiece, full	RP		[l] 5,000	
III Combination Respirators:				
Any combination of air purifying and atmosphere-supplying respirators		Protection factor for type and mode of operation as listed above.		30 CFR Part 11, § 11 63(b).

Footnotes

a For use in the selection of respiratory protective devices to be used only where the contaminants have been identified and the concentrations (or possible concentrations) are known.

b. Only for shaven faces and where nothing interferes with the seal of tight-fitting facepieces against the skin. (Hoods and suits are excepted.)

c. The mode symbols are defined as follows.

CF = continuous flow
D = demand
NP = negative pressure (i e., negative phase during inhalation)
PD = pressure demand (i e, always positive pressure)

PP = positive pressure
RD = demand, recirculating (closed circuit)
RP = pressure demand, recirculating (closed circuit)

d 1. The protection factor is a measure of the degree of protection afforded by a respirator, defined as the ratio of the concentration of airborne radioactive material outside the respiratory protective equipment to that inside the equipment (usually inside the facepiece) under conditions of use It is applied to the ambient airborne concentration to estimate the concentrations inhaled by the wearer according to the following formula

$$\text{Concentration inhaled} = \frac{\text{Ambient airborne concentration}}{\text{Protection factor}}$$

2. The protection factors apply:

(a) Only for individuals trained in using respirators and wearing properly fitted respirators that are used and maintained under supervision in a well-planned respiratory protective program.

(b) For air-purifying respirators only when high efficiency particulate filters (above 99 97% removal efficiency by thermally generated 0 3 μm dioctyl phthalate (DOP) test or equivalent) are used in atmospheres not deficient in oxygen and not containing radioactive gas or vapor respiratory hazards

(c) No adjustment is to be made for the use of sorbents against radioactive material in the form of gases or vapors

(d) For atmosphere-supplying respirators only when supplied with adequate respirable air Respirable air shall be provided of the quality and quantity required in accordance with NIOSH/MSHA certification (described in 30 CFR part 11) Oxygen and air shall not be used in the same apparatus.

e. Excluding radioactive contaminants that present an absorption or submersion hazard For tritium oxide, approximately one-third of the intake occurs by absorption through the skin so that an overall protection factor of less than 2 is appropriate when atmosphere-supplying respirators are used to protect against tritium oxide. If the protection factor for a device is 5 the effective protection factor for tritium is about 1.4; for devices with protection factors of 10 the effective factor for tritium oxide is about 1.7, and for devices with protection factors of 100 or more the effective factor for tritium oxide is about 1.9. Air-purifying respirators are not suitable for protection against tritium oxide. See also footnote i concerning supplied-air suits

f. Canisters and cartridges shall not be used beyond service-life limitations

g. Under-chin type only. This type of respirator is not satisfactory for use where it might be possible (e.g., if an accident or emergency were to occur) for the ambient airborne concentrations to reach instantaneous values greater than 10 times the pertinent values in table 1, column 3 of appendix B to §§ 20 1001—20.2401 of this part. This type of respirator is not suitable for protection against plutonium or other high-toxicity materials. The mask is to be tested for fit prior to use, each time it is donned.

h 1. Equipment shall be operated in a manner that ensures that proper air flow-rates are maintained. A protection factor of no more than 1000 may be utilized for tested-and-certified supplied-air hoods when a minimum air flow of 6 cubic feet (0.17 cubic meters) per minute is maintained and calibrated air-line pressure gauges or flow measuring devices are used A protection factor of up to 2000 may be used for tested and certified hoods only when the air flow is maintained at the manufacturer's recommended maximum rate for the equipment, this rate is greater than 6 cubic feet (0.17 cubic meters) per minute, and calibrated air-line pressure gauges or flow measuring devices are used.

2. The design of the supplied-air hood or helmet (with a minimum flow of 6 cfm (0.17 m^3 per minute) of air) may determine its overall efficiency and the protection it provides. For example, some hoods aspirate contaminated air into the breathing zone when the wearer works with hands-overhead This aspiration may be overcome if a short cape-like extension to the hood is worn under a coat or overalls. Other limitations specified by the approval agency shall be considered before using a hood in certain types of atmospheres (see footnote i)

i. Appropriate protection factors shall be determined, taking into account the design of the suit and its permeability to the contaminant under conditions of use. There shall be a standby rescue person equipped with a respirator or other apparatus appropriate for the potential hazards and communications equipment whenever supplied-air suits are used.

j. No approval schedules are currently available for this equipment. Equipment is to be evaluated by testing or on the basis of reliable test information.

k. This type of respirator may provide greater protection and be used as an emergency device in unknown concentrations for protection against inhalation hazards. External radiation hazards and other limitations to permitted exposure, such as skin absorption, must be taken into account in such circumstances.

l. Quantitative fit testing shall be performed on each individual and no more than 0.02% leakage is allowed with this type of apparatus. Perceptible outward leakage of gas from this or any positive pressure self-contained breathing apparatus is unacceptable because service life will be reduced substantially. Special training in the use of this type of apparatus shall be provided to the wearer.

Note 1: Protection factors for respirators as may be approved by the U.S. Bureau of Mines/National Institute for Occupational Safety and Health (NIOSH), according to applicable approvals for respirators for type and mode of use to protect against airborne radionuclides, may be used to the extent that they do not exceed the protection factors listed in this table. The protection factors listed in this table may not be appropriate to circumstances where chemical or other respiratory hazards exist in addition to radioactive hazards. The selection and use of respirators for such circumstances should take into account applicable approvals of the U.S. Bureau of Mines/NIOSH.

Note 2: Radioactive contaminants for which the concentration values in Table 1, Column 3 of Appendix B to §§ 20.1001–20 2401 of this part are based on internal dose due to inhalation may, in addition, present external exposure hazards at higher concentrations. Under these circumstances, limitations on occupancy may have to be governed by external dose limits.

Appendix B to part 20 — Annual Limits on Intake (ALIs) and Derived Air Concentrations (DACs) of Radionuclides for Occupational Exposure; Effluent Concentrations; Concentrations for Release to Sewerage

Introduction

For each radionuclide Table 1 indicates the chemical form which is to be used for selecting the appropriate ALI or DAC value. The ALIs and DACs for inhalation are given for an aerosol with an activity median aerodynamic diameter (AMAD) of 1 μm and for three classes (D,W,Y) of radioactive material, which refer to their retention (approximately days, weeks or years) in the pulmonary region of the lung. This classification applies to a range of clearance half-times of less than 10 days for D, for W from 10 to 100 days, and for Y greater than 100 days. The class (D, W, or Y) given in the column headed "Class" applies only to the inhalation ALIs and DACs given in Table 1, columns 2 and 3.

Table 2 provides concentration limits for airborne and liquid effluents released to the general environment. Table 3 provides concentration limits for discharges to sanitary sewer systems.

Notation

The values in Tables 1, 2, and 3 are presented in the computer "E" notation. In this notation a value of 6E−02 represents a value of 6×10^{-2} or 0.06, 6E+2 represents 6×10^{2} or 600, and 6E+0 represents 6×10^{0} or 6.

Table 1 "Occupational"

Note that the columns in Table 1, of this appendix captioned "Oral Ingestion ALI," "Inhalation ALI," and "DAC," are applicable to occupational exposure to radioactive material.

The ALIs in this appendix are the annual intakes of a given radionuclide by "Reference Man" which would result in either (1) a committed effective dose equivalent of 5 rems (stochastic ALI) or (2) a committed dose equivalent of 50 rems to an organ or tissue (non-stochastic ALI). The stochastic ALIs were derived to result in a risk, due to irradiation of organs and tissues, comparable to the risk associated with deep dose equivalent to the whole body of 5 rems. The derivation includes multiplying the committed dose equivalent to an organ or tissue by a weighting factor, w_T. This weighting factor is the proportion of the risk of stochastic effects resulting from irradiation of the organ or tissue, T, to the total risk of stochastic effects when the whole body is irradiated uniformly. The values of w_T are listed under the definition of weighting factor in § 20.1003. The non-stochastic ALIs were derived to avoid non-stochastic effects, such as prompt damage to tissue or reduction in organ function.

A value of $w_T = 0.06$ is applicable to each of the five organs or tissues in the "remainder" category receiving the highest dose equivalents, and the dose equivalents of all other remaining tissues may be disregarded. The following parts of the GI tract—stomach, small intestine, upper large intestine, and lower large intestine—are to be treated as four separate organs.

Note that the dose equivalents for extremities (hands and forearms, feet and lower legs), skin, and lens of the eye are not considered in computing the committed effective dose equivalent, but are subject to limits that must be met separately.

When an ALI is defined by the stochastic dose limit, this value alone, is given. When an ALI is determined by the non-stochastic dose limit to an organ, the organ or tissue to which the limit applies is shown, and the ALI for the stochastic limit is shown in parentheses. (Abbreviated organ or tissue designations are used: LLI wall = lower large intestine wall; St. wall = stomach wall; Blad wall = bladder wall; and Bone surf = bone surface.)

The use of the ALIs listed first, the more limiting of the stochastic and non-stochastic ALIs, will ensure that non-stochastic effects are avoided and that the risk of stochastic effects is limited to an acceptably low value. If, in a particular situation involving a radionuclide for which the non-stochastic ALI is limiting, use of that non-stochastic ALI is considered unduly conservative, the licensee may use the stochastic ALI to determine the committed effective dose equivalent. However, the licensee shall also ensure that the 50-rem dose equivalent limit for any organ or tissue is not exceeded by the sum of the external deep dose equivalent plus the internal committed dose to that organ (not the effective dose). For the case where there is no external dose contribution, this would be demonstrated if the sum of the fractions of the nonstochastic ALIs (ALI_{ns}) that contribute to the committed dose equivalent to the organ receiving the highest dose does not exceed unity (i.e., Σ (intake (in μCi) of each radionuclide/ALI_{ns}) < 1.0). If there is an external deep dose equivalent contribution of H_d then this sum must be less than $1-(H_d/50)$ instead of being < 1.0.

The derived air concentration (DAC) values are derived limits intended to control chronic occupational exposures. The relationship between the DAC and the ALI is given by: DAC = ALI(in μCi)/(2000 hours per working year × 60 minutes/hour × 2×10^4 ml per minute) = [ALI/2.4×10^9] μCi/ml, where 2×10^4 ml is the volume of air breathed per minute at work by "Reference Man" under working conditions of "light work."

The DAC values relate to one of two modes of exposure: either external submersion or the internal committed dose equivalents resulting from inhalation of radioactive materials. Derived air concentrations based upon submersion are for immersion in a semi-infinite cloud of uniform concentration and apply to each radionuclide separately.

The ALI and DAC values relate to exposure to the single radionuclide named, but also include contributions from the in-growth of any daughter radionuclide produced in the body by the decay of the parent. However, intakes that include both the parent and daughter radionuclides should be treated by the general method appropriate for mixtures.

The value of ALI and DAC do not apply directly when the individual both ingests and inhales a radionuclide, when the individual is exposed to a mixture of radionuclides by either inhalation or ingestion or both, or when the individual is exposed to both internal and external radiation (see § 20.1202). When an individual is exposed to radioactive materials which fall under several of the translocation classifications (i.e., Class D, Class W, or Class Y) of the same radionuclide, the exposure may be evaluated as if it were a mixture of different radionuclides.

It should be noted that the classification of a compound as Class D, W, or Y is based on the chemical form of the compound and does not take into account the radiological half-life of different radioisotopes. For this reason, values are given for Class D, W, and Y compounds, even for very short-lived radionuclides.

Table 2

The columns in Table 2 of this appendix captioned "Effluents," "Air," and "Water," are applicable to the assessment and control of dose to the public, particularly in the implementation of the provisions of § 20.1302. The concentration values given in Columns 1 and 2 of Table 2 are equivalent to the radionuclide concentrations which, if inhaled or ingested continuously over the course of a year, would produce a total effective dose equivalent of 0.05 rem (50 millirem or 0.5 millisieverts).

Consideration of non-stochastic limits has not been included in deriving the air and water effluent concentration limits because non-stochastic effects are presumed not to occur at the dose levels established for individual members of the public. For radionuclides, where the non-stochastic limit was governing in deriving the occupational DAC, the stochastic ALI was used in deriving the corresponding airborne effluent limit in Table 2. For this reason, the DAC and airborne effluent limits are not always proportional as was the case in appendix B to §§ 20.1–20.601.

The air concentration values listed in Table 2, Column 1, were derived by one of two methods. For those radionuclides for which the stochastic limit is governing, the occupational stochastic inhalation ALI was divided by 2.4×10^9 ml, relating the inhalation ALI to the DAC, as explained above, and then divided by a factor of 300. The factor of 300 includes the following components: a factor of 50 to relate the 5-rem annual occupational dose limit to the 0.1-rem limit for members of the public, a factor of 3 to adjust for the difference in exposure time and the inhalation rate for a worker and that for members of the public; and a factor of 2 to adjust the occupational values (derived for adults) so that they are applicable to other age groups.

For those radionuclides for which submersion (external dose) is limiting, the occupational DAC in Table 1, Column 3, was divided by 219. The factor of 219 is composed of a factor of 50, as described above, and a factor of 4.38 relating occupational exposure for 2,000 hours per year to full-time exposure (8,760 hours per year). Note that an additional factor of 2 for age considerations is not warranted in the submersion case.

The water concentrations were derived by taking the most restrictive occupational stochastic oral ingestion ALI and dividing by 7.3×10^7. The factor of 7.3×10^7 (ml) includes the following components: the factors of 50 and 2 described above and a factor of 7.3×10^5 (ml) which is the annual water intake of "Reference Man."

Note 2 of this appendix provides groupings of radionuclides which are applicable to unknown mixtures of radionuclides. These groupings (including occupational inhalation ALIs and DACs, air and water effluent concentrations and sewerage) require demonstrating that the most limiting radionuclides in successive classes are absent. The limit for the unknown mixture is defined when the presence of one of the listed radionuclides cannot be definitely excluded either from knowledge of the radionuclide composition of the source or from actual measurements.

Table 3 "Sewer Disposal"

The monthly average concentrations for release to sanitary sewers are applicable to the provisions in § 20.2003. The concentration values were derived by taking the most restrictive occupational stochastic oral ingestion ALI and dividing by 7.3×10^9(ml). The factor of 7.3×10^9(ml) is composed of a factor of 7.3×10^5(ml), the annual water intake by "Reference Man," and a factor of 10, such that the concentrations, if the sewage released by the licensee were the only source of water ingested by a reference man during a year, would result in a

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committed effective dose equivalent of 0.5 rem.

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LIST OF ELEMENTS

Name	Atomic Symbol	Atomic No.
Actinium	Ac	89
Aluminum	Al	13
Americium	Am	95
Antimony	Sb	51
Argon	Ar	18
Arsenic	As	33
Astatine	At	85
Barium	Ba	56
Berkelium	Bk	97
Beryllium	Be	4
Bismuth	Bi	83
Bromine	Br	35
Cadmium	Cd	48
Calcium	Ca	20
Californium	Cf	98
Carbon	C	6
Cerium	Ce	58
Cesium	Cs	55
Chlorine	Cl	17
Chromium	Cr	24
Cobalt	Co	27
Copper	Cu	29
Curium	Cm	96
Dysprosium	Dy	66
Einsteinium	Es	99
Erbium	Er	68
Europium	Eu	63
Fermium	Fm	100
Fluorine	F	9
Francium	Fr	87
Gadolinium	Gd	64

LIST OF ELEMENTS—Continued

Name	Atomic Symbol	Atomic No
Gallium	Ga	31
Germanium	Ge	32
Gold	Au	79
Hafnium	Hf	72
Holmium	Ho	67
Hydrogen	H	1
Indium	In	49
Iodine	I	53
Indium	Ir	77
Iron	Fe	26
Krypton	Kr	36
Lanthanum	La	57
Lead	Pb	82
Lutetium	Lu	71
Magnesium	Mg	12
Manganese	Mn	25
Mendelevium	Md	101
Mercury	Hg	80
Molybdenum	Mo	42
Neodymium	Nd	60
Neptunium	Np	93
Nickel	Ni	28
Niobium	Nb	41
Osmium	Os	76
Palladium	Pd	46
Phosphorus	P	15
Platinum	Pt	78
Plutonium	Pu	94
Polonium	Po	84
Potassium	K	19
Praseodymium	Pr	59
Promethium	Pm	61
Protactinium	Pa	91
Radium	Ra	88

LIST OF ELEMENTS—Continued

Name	Atomic Symbol	Atomic No.
Radon	Rn	86
Rhenium	Re	75
Rhodium	Rh	45
Rubidium	Rb	37
Ruthenium	Ru	44
Samarium	Sm	62
Scandium	Sc	21
Selenium	Se	34
Silicon	Si	14
Silver	Ag	47
Sodium	Na	11
Strontium	Sr	38
Sulfur	S	16
Tantalum	Ta	73
Technetium	Tc	43
Tellurium	Te	52
Terbium	Tb	65
Thallium	Tl	81
Thorium	Th	90
Thulium	Tm	69
Tin	Sn	50
Titanium	Ti	22
Tungsten	W	74
Uranium	U	92
Vanadium	V	23
Xenon	Xe	54
Ytterbium	Yb	70
Yttrium	Y	39
Zinc	Zn	30
Zirconium	Zr	40

Atomic No.	Radionuclide	Class	Table 1 Occupational Values: Col. 1 Oral Ingestion ALI (µCi)	Col. 2 Inhalation ALI (µCi)	Col. 3 Inhalation DAC (µCi/ml)	Table 2 Effluent Concentrations: Col. 1 Air (µCi/ml)	Col. 2 Water (µCi/ml)	Table 3 Releases to Sewers: Monthly Average Concentration (µCi/ml)
1	Hydrogen-3	Water, DAC includes skin absorption	8E+4	8E+4	2E-5	1E-7	1E-3	1E-2
		Gas (HT or T_2)Submersion[1]	Use above values as HT and T_2 oxidize in air and in the body to HTO.					
4	Beryllium-7	W, all compounds except those given for Y	4E+4	2E+4	9E-6	3E-8	6E-4	6E-3
		Y, oxides, halides, and nitrates	-	2E+4	8E-6	3E-8	-	-
4	Beryllium-10	W, see ^{7}Be	1E+3	2E+2	6E-8	2E-10	-	-
			LLI wall (1E+3)	-	-	-	2E-5	2E-4
		Y, see ^{7}Be	-	1E+1	6E-9	2E-11	-	-
6	Carbon-11[2]	Monoxide	-	1E+6	5E-4	2E-6	-	-
		Dioxide	-	6E+5	3E-4	9E-7	-	-
		Compounds	4E+5	4E+5	2E-4	6E-7	6E-3	6E-2
6	Carbon-14	Monoxide	-	2E+6	7E-4	2E-6	-	-
		Dioxide	-	2E+5	9E-5	3E-7	-	-
		Compounds	2E+3	2E+3	1E-6	3E-9	3E-5	3E-4
9	Fluorine-18[2]	D, fluorides of H, Li, Na, K, Rb, Cs, and Fr	5E+4	7E+4	3E-5	1E-7	-	-
			St wall (5E+4)	-	-	-	7E-4	7E-3
		W, fluorides of Be, Mg, Ca, Sr, Ba, Ra, Al, Ga, In, Tl, As, Sb, Bi, Fe, Ru, Os, Co, Ni, Pd, Pt, Cu, Ag, Au, Zn, Cd, Hg, Sc, Y, Ti, Zr, V, Nb, Ta, Mn, Tc, and Re	-	9E+4	4E-5	1E-7	-	-
		Y, lanthanum fluoride	-	8E+4	3E-5	1E-7	-	-
11	Sodium-22	D, all compounds	4E+2	6E+2	3E-7	9E-10	6E-6	6E-5
11	Sodium-24	D, all compounds	4E+3	5E+3	2E-6	7E-9	5E-5	5E-4
12	Magnesium-28	D, all compounds except those given for W	7E+2	2E+3	7E-7	2E-9	9E-6	9E-5
		W, oxides, hydroxides, carbides, halides, and nitrates	-	1E+3	5E-7	2E-9	-	-
13	Aluminum-26	D, all compounds except those given for W	4E+2	6E+1	3E-8	9E-11	6E-6	6E-5
		W, oxides, hydroxides, carbides, halides, and nitrates	-	9E+1	4E-8	1E-10	-	-
14	Silicon-31	D, all compounds except those given for W and Y	9E+3	3E+4	1E-5	4E-8	1E-4	1E-3
		W, oxides, hydroxides, carbides, and nitrates	-	3E+4	1E-5	5E-8	-	-
		Y, aluminosilicate glass	-	3E+4	1E-5	4E-8	-	-
14	Silicon-32	D, see ^{31}Si	2E+3	2E+2	1E-7	3E-10	-	-
			LLI wall (3E+3)	-	-	-	4E-5	4E-4
		W, see ^{31}Si	-	1E+2	5E-8	2E-10	-	-
		Y, see ^{31}Si	-	5E+0	2E-9	7E-12	-	-
15	Phosphorus-32	D, all compounds except phosphates given for W	6E+2	9E+2	4E-7	1E-9	9E-6	9E-5
		W, phosphates of Zn^{2+}, S^{3+}, Mg^{2+}, Fe^{3+}, Bi^{3+}, and lanthanides	-	4E+2	2E-7	5E-10	-	-
15	Phosphorus-33	D, see ^{32}P	6E+3	8E+3	4E-6	1E-8	8E-5	8E-4
		W, see ^{32}P	-	3E+3	1E-6	4E-9	-	-

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Atomic No.	Radionuclide	Class	Table 1 Occupational Values: Col. 1 Oral Ingestion ALI (μCi)	Col. 2 Inhalation ALI (μCi)	Col. 3 Inhalation DAC (μCi/ml)	Table 2 Effluent Concentrations: Col. 1 Air (μCi/ml)	Col. 2 Water (μCi/ml)	Table 3 Releases to Sewers: Monthly Average Concentration (μCi/ml)
16	Sulfur-35	Vapor	-	1E+4	6E-6	2E-8	-	-
		D, sulfides and sulfates except those given for W	1E+4	2E+4	7E-6	2E-8	-	-
			LLI wall (8E+3)	-	-	-	1E-4	1E-3
		W, elemental sulfur, sulfides of Sr, Ba, Ge, Sn, Pb, As, Sb, Bi, Cu, Ag, Au, Zn, Cd, Hg, W, and Mo. Sulfates of Ca, Sr, Ba, Ra, As, Sb, and Bi	6E+3 -	2E+3	9E-7	3E-9	-	-
17	Chlorine-36	D, chlorides of H, Li, Na, K, Rb, Cs, and Fr	2E+3	2E+3	1E-6	3E-9	2E-5	2E-4
		W, chlorides of lanthanides, Be, Mg, Ca, Sr, Ba, Ra, Al, Ga, In, Tl, Ge, Sn, Pb, As, Sb, Bi, Fe, Ru, Os, Co, Rh, Ir, Ni, Pd, Pt, Cu, Ag, Au, Zn, Cd, Hg, Sc, Y, Ti, Zr, Hf, V, Nb, Ta, Cr, Mo, W, Mn, Tc, and Re	-	2E+2	1E-7	3E-10	-	-
17	Chlorine-38[2]	D, see ^{36}Cl	2E+4	4E+4	2E-5	6E-8	-	-
			St. wall (3E+4)	-	-	-	3E-4	3E-3
		W, see ^{36}Cl	-	5E+4	2E-5	6E-8	-	-
17	Chlorine-39[2]	D, see ^{36}Cl	2E+4	5E+4	2E-5	7E-8	-	-
			St. wall (4E+4)	-	-	-	5E-4	5E-3
		W, see ^{36}Cl	-	6E+4	2E-5	8E-8	-	-
18	Argon-37	Submersion[1]	-	-	1E+0	6E-3	-	-
18	Argon-39	Submersion[1]	-	-	2E-4	8E-7	-	-
18	Argon-41	Submersion[1]	-	-	3E-6	1E-8	-	-
19	Potassium-40	D, all compounds	3E+2	4E+2	2E-7	6E-10	4E-6	4E-5
19	Potassium-42	D, all compounds	5E+3	5E+3	2E-6	7E-9	6E-5	6E-4
19	Potassium-43	D, all compounds	6E+3	9E+3	4E-6	1E-8	9E-5	9E-4
19	Potassium-44[2]	D, all compounds	2E+4	7E+4	3E-5	9E-8	-	-
			St. wall (4E+4)	-	-	-	5E-4	5E-3
19	Potassium-45[2]	D, all compounds	3E+4	1E+5	5E-5	2E-7	-	-
			St. wall (5E+4)	-	-	-	7E-4	7E-3
20	Calcium-41	W, all compounds	3E+3	4E+3	2E-6	-	-	-
			Bone surf (4E+3)	Bone surf (4E+3)	-	5E-9	6E-5	6E-4
20	Calcium-45	W, all compounds	2E+3	8E+2	4E-7	1E-9	2E-5	2E-4
20	Calcium-47	W, all compounds	8E+2	9E+2	4E-7	1E-9	1E-5	1E-4
21	Scandium-43	Y, all compounds	7E+3	2E+4	9E-6	3E-8	1E-4	1E-3
21	Scandium-44m	Y, all compounds	5E+2	7E+2	3E-7	1E-9	7E-6	7E-5
21	Scandium-44	Y, all compounds	4E+3	1E+4	5E-6	2E-8	5E-5	5E-4
21	Scandium-46	Y, all compounds	9E+2	2E+2	1E-7	3E-10	1E-5	1E-4
21	Scandium-47	Y, all compounds	2E+3	3E+3	1E-6	4E-9	-	-
			LLI wall (3E+3)	-	-	-	4E-5	4E-4
21	Scandium-48	Y, all compounds	8E+2	1E+3	6E-7	2E-9	1E-5	1E-4
21	Scandium-49[2]	Y, all compounds	2E+4	5E+4	2E-5	8E-8	3E-4	3E-3
22	Titanium-44	D, all compounds except those given for W and Y	3E+2	1E+1	5E-9	2E-11	4E-6	4E-5
		W, oxides, hydroxides, carbides, halides, and nitrates	-	3E+1	1E-8	4E-11	-	-
		Y, $SrTiO_3$	-	6E+0	2E-9	8E-12	-	-

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Atomic No.	Radionuclide	Class	Table 1 Occupational Values Col. 1 Oral Ingestion ALI (μCi)	Col 2 Inhalation ALI (μCi)	Col. 3 Inhalation DAC (μCi/ml)	Table 2 Effluent Concentrations Col. 1 Air (μCi/ml)	Col. 2 Water (μCi/ml)	Table 3 Releases to Sewers Monthly Average Concentration (μCi/ml)
22	Titanium-45	D, see ^{44}Ti	9E+3	3E+4	1E-5	3E-8	1E-4	1E-3
		W, see ^{44}Ti	-	4E+4	1E-5	5E-8	-	-
		Y, see ^{44}Ti	-	3E+4	1E-5	4E-8	-	-
23	Vanadium-47[2]	D, all compounds except those given for W	3E+4	8E+4	3E-5	1E-7	-	-
			St. wall (3E+4)	-	-	-	4E-4	4E-3
		W, oxides, hydroxides, carbides, and halides	-	1E+5	4E-5	1E-7	-	-
23	Vanadium-48	D, see ^{47}V	6E+2	1E+3	5E-7	2E-9	9E-6	9E-5
		W, see ^{47}V	-	6E+2	3E-7	9E-10	-	-
23	Vanadium-49	D, see ^{47}V	7E+4	3E+4	1E-5	-	-	-
			LLI wall (9E+4)	Bone surf (3E+4)	-	5E-8	1E-3	1E-2
		W, see ^{47}V	-	2E+4	8E-6	2E-8	-	-
24	Chromium-48	D, all compounds except those given for W and Y	6E+3	1E+4	5E-6	2E-8	8E-5	8E-4
		W, halides and nitrates	-	7E+3	3E-6	1E-8	-	-
		Y, oxides and hydroxides	-	7E+3	3E-6	1E-8	-	-
24	Chromium-49[2]	D, see ^{48}Cr	3E+4	8E+4	4E-5	1E-7	4E-4	4E-3
		W, see ^{48}Cr	-	1E+5	4E-5	1E-7	-	-
		Y, see ^{48}Cr	-	9E+4	4E-5	1E-7	-	-
24	Chromium-51	D, see ^{48}Cr	4E+4	5E+4	2E-5	6E-8	5E-4	5E-3
		W, see ^{48}Cr	-	2E+4	1E-5	3E-8	-	-
		Y, see ^{48}Cr	-	2E+4	8E-6	3E-8	-	-
25	Manganese-51[2]	D, all compounds except those given for W	2E+4	5E+4	2E-5	7E-8	3E-4	3E-3
		W, oxides, hydroxides, halides, and nitrates	-	6E+4	3E-5	8E-8	-	-
25	Manganese-52m[2]	D, see ^{51}Mn	3E+4	9E+4	4E-5	1E-7	-	-
			St. wall (4E+4)	-	-	-	5E-4	5E-3
		W, see ^{51}Mn	-	1E+5	4E-5	1E-7	-	-
25	Manganese-52	D, see ^{51}Mn	7E+2	1E+3	5E-7	2E-9	1E-5	1E-4
		W, see ^{51}Mn	-	9E+2	4E-7	1E-9	-	-
25	Manganese-53	D, see ^{51}Mn	5E+4	1E+4	5E-6	-	7E-4	7E-3
			-	Bone surf (2E+4)	-	3E-8	-	-
		W, see ^{51}Mn	-	1E+4	5E-6	2E-8	-	-
25	Manganese-54	D, see ^{51}Mn	2E+3	9E+2	4E-7	1E-9	3E-5	3E-4
		W, see ^{51}Mn	-	8E+2	3E-7	1E-9	-	-
25	Manganese-56	D, see ^{51}Mn	5E+3	2E+4	6E-6	2E-8	7E-5	7E-4
		W, see ^{51}Mn	-	2E+4	9E-6	3E-8	-	-

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Atomic No.	Radionuclide	Class	Table 1 Occupational Values Col. 1 Oral Ingestion ALI (μCi)	Col. 2 Inhalation ALI (μCi)	Col. 3 Inhalation DAC (μCi/ml)	Table 2 Effluent Concentrations Col. 1 Air (μCi/ml)	Col. 2 Water (μCi/ml)	Table 3 Releases to Sewers Monthly Average Concentration (μCi/ml)
26	Iron-52	D, all compounds except those given for W	9E+2	3E+3	1E-6	4E-9	1E-5	1E-4
		W, oxides, hydroxides, and halides	-	2E+3	1E-6	3E-9	-	-
26	Iron-55	D, see ^{52}Fe	9E+3	2E+3	8E-7	3E-9	1E-4	1E-3
		W, see ^{52}Fe	-	4E+3	2E-6	6E-9	-	-
26	Iron-59	D, see ^{52}Fe	8E+2	3E+2	1E-7	5E-10	1E-5	1E-4
		W, see ^{52}Fe	-	5E+2	2E-7	7E-10	-	-
26	Iron-60	D, see ^{52}Fe	3E+1	6E+0	3E-9	9E-12	4E-7	4E-6
		W, see ^{52}Fe	-	2E+1	8E-9	3E-11	-	-
27	Cobalt-55	W, all compounds except those given for Y	1E+3	3E+3	1E-6	4E-9	2E-5	2E-4
		Y, oxides, hydroxides, halides, and nitrates	-	3E+3	1E-6	4E-9	-	-
27	Cobalt-56	W, see ^{55}Co	5E+2	3E+2	1E-7	4E-10	6E-6	6E-5
		Y, see ^{55}Co	4E+2	2E+2	8E-8	3E-10	-	-
27	Cobalt-57	W, see ^{55}Co	8E+3	3E+3	1E-6	4E-9	6E-5	6E-4
		Y, see ^{55}Co	4E+3	7E+2	3E-7	9E-10	-	-
27	Cobalt-58m	W, see ^{55}Co	6E+4	9E+4	4E-5	1E-7	8E-4	8E-3
		Y, see ^{55}Co	-	6E+4	3E-5	9E-8	-	-
27	Cobalt-58	W, see ^{55}Co	2E+3	1E+3	5E-7	2E-9	2E-5	2E-4
		Y, see ^{55}Co	1E+3	7E+2	3E-7	1E-9	-	-
27	Cobalt-60m[2]	W, see ^{55}Co	1E+6	4E+6	2E-3	6E-6	-	-
			St. wall (1E+6)	-	-	-	2E-2	2E-1
		Y, see ^{55}Co	-	3E+6	1E-3	4E-6	-	-
27	Cobalt-60	W, see ^{55}Co	5E+2	2E+2	7E-8	2E-10	3E-6	3E-5
		Y, see ^{55}Co	2E+2	3E+1	1E-8	5E-11	-	-
27	Cobalt-61[2]	W, see ^{55}Co	2E+4	6E+4	3E-5	9E-8	3E-4	3E-3
		Y, see ^{55}Co	2E+4	6E+4	2E-5	8E-8	-	-
27	Cobalt-62m[2]	W, see ^{55}Co	4E+4	2E+5	7E-5	2E-7	-	-
			St. wall (5E+4)	-	-	-	7E-4	7E-3
		Y, see ^{55}Co	-	2E+5	6E-5	2E-7	-	-
28	Nickel-56	D, all compounds except those given for W	1E+3	2E+3	8E-7	3E-9	2E-5	2E-4
		W, oxides, hydroxides, and carbides	-	1E+3	5E-7	2E-9	-	-
		Vapor	-	1E+3	5E-7	2E-9	-	-
28	Nickel-57	D, see ^{56}Ni	2E+3	5E+3	2E-6	7E-9	2E-5	2E-4
		W, see ^{56}Ni	-	3E+3	1E-6	4E-9	-	-
		Vapor	-	6E+3	3E-6	9E-9	-	-

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Atomic No.	Radionuclide	Class	Table 1 Occupational Values: Col. 1 Oral Ingestion ALI (μCi)	Table 1: Col. 2 Inhalation ALI (μCi)	Table 1: Col. 3 Inhalation DAC (μCi/ml)	Table 2 Effluent Concentrations: Col. 1 Air (μCi/ml)	Table 2: Col. 2 Water (μCi/ml)	Table 3 Releases to Sewers: Monthly Average Concentration (μCi/ml)
28	Nickel-59	D, see ^{56}Ni	2E+4	4E+3	2E-6	5E-9	3E-4	3E-3
		W, see ^{56}Ni	-	7E+3	3E-6	1E-8	-	-
		Vapor	-	2E+3	8E-7	3E-9	-	-
28	Nickel-63	D, see ^{56}Ni	9E+3	2E+3	7E-7	2E-9	1E-4	1E-3
		W, see ^{56}Ni	-	3E+3	1E-6	4E-9	-	-
		Vapor	-	8E+2	3E-7	1E-9	-	-
28	Nickel-65	D, see ^{56}Ni	8E+3	2E+4	1E-5	3E-8	1E-4	1E-3
		W, see ^{56}Ni	-	3E+4	1E-5	4E-8	-	-
		Vapor	-	2E+4	7E-6	2E-8	-	-
28	Nickel-66	D, see ^{56}Ni	4E+2	2E+3	7E-7	2E-9	-	-
			LLI wall (5E+2)	-	-	-	6E-6	6E-5
		W, see ^{56}Ni	-	6E+2	3E-7	9E-10	-	-
		Vapor	-	3E+3	1E-6	4E-9	-	-
29	Copper-60[2]	D, all compounds except those given for W and Y	3E+4	9E+4	4E-5	1E-7	-	-
			St. wall (3E+4)	-	-	-	4E-4	4E-3
		W, sulfides, halides, and nitrates	-	1E+5	5E-5	2E-7	-	-
		Y, oxides and hydroxides	-	1E+5	4E-5	1E-7	-	-
29	Copper-61	D, see ^{60}Cu	1E+4	3E+4	1E-5	4E-8	2E-4	2E-3
		W, see ^{60}Cu	-	4E+4	2E-5	6E-8	-	-
		Y, see ^{60}Cu	-	4E+4	1E-5	5E-8	-	-
29	Copper-64	D, see ^{60}Cu	1E+4	3E+4	1E-5	4E-8	2E-4	2E-3
		W, see ^{60}Cu	-	2E+4	1E-5	3E-8	-	-
		Y, see ^{60}Cu	-	2E+4	9E-6	3E-8	-	-
29	Copper-67	D, see ^{60}Cu	5E+3	8E+3	3E-6	1E-8	6E-5	6E-4
		W, see ^{60}Cu	-	5E+3	2E-6	7E-9	-	-
		Y, see ^{60}Cu	-	5E+3	2E-6	6E-9	-	-
30	Zinc-62	Y, all compounds	1E+3	3E+3	1E-6	4E-9	2E-5	2E-4
30	Zinc-63[2]	Y, all compounds	2E+4	7E+4	3E-5	9E-8	-	-
			St. wall (3E+4)	-	-	-	3E-4	3E-3
30	Zinc-65	Y, all compounds	4E+2	3E+2	1E-7	4E-10	5E-6	5E-5
30	Zinc-69m	Y, all compounds	4E+3	7E+3	3E-6	1E-8	6E-5	6E-4
30	Zinc-69[2]	Y, all compounds	6E+4	1E+5	6E-5	2E-7	8E-4	8E-3
30	Zinc-71m	Y, all compounds	6E+3	2E+4	7E-6	2E-8	8E-5	8E-4
30	Zinc-72	Y, all compounds	1E+3	1E+3	5E-7	2E-9	1E-5	1E-4
31	Gallium-65[2]	D, all compounds except those given for W	5E+4	2E+5	7E-5	2E-7	-	-
			St. wall (6E+4)	-	-	-	9E-4	9E-3
		W, oxides, hydroxides, carbides, halides, and nitrates	-	2E+5	8E-5	3E-7	-	-

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Atomic No.	Radionuclide	Class	Table 1 Occupational Values: Col. 1 Oral Ingestion ALI (μCi)	Col. 2 Inhalation ALI (μCi)	Col. 3 Inhalation DAC (μCi/ml)	Table 2 Effluent Concentrations: Col. 1 Air (μCi/ml)	Col. 2 Water (μCi/ml)	Table 3 Releases to Sewers: Monthly Average Concentration (μCi/ml)
31	Gallium-66	D, see ^{65}Ga	1E+3	4E+3	1E-6	5E-9	1E-5	1E-4
		W, see ^{65}Ga	-	3E+3	1E-6	4E-9	-	-
31	Gallium-67	D, see ^{65}Ga	7E+3	1E+4	6E-6	2E-8	1E-4	1E-3
		W, see ^{65}Ga	-	1E+4	4E-6	1E-8	-	-
31	Gallium-68[2]	D, see ^{65}Ga	2E+4	4E+4	2E-5	6E-8	2E-4	2E-3
		W, see ^{65}Ga	-	5E+4	2E-5	7E-8	-	-
31	Gallium-70[2]	D, see ^{65}Ga	5E+4	2E+5	7E-5	2E-7	-	-
			St. wall (7E+4)	-	-	-	1E-3	1E-2
		W, see ^{65}Ga	-	2E+5	8E-5	3E-7	-	-
31	Gallium-72	D, see ^{65}Ga	1E+3	4E+3	1E-6	5E-9	2E-5	2E-4
		W, see ^{65}Ga	-	3E+3	1E-6	4E-9	-	-
31	Gallium-73	D, see ^{65}Ga	5E+3	2E+4	6E-6	2E-8	7E-5	7E-4
		W, see ^{65}Ga	-	2E+4	6E-6	2E-8	-	-
32	Germanium-66	D, all compounds except those given for W	2E+4	3E+4	1E-5	4E-8	3E-4	3E-3
		W, oxides, sulfides, and halides	-	2E+4	8E-6	3E-8	-	-
32	Germanium-67[2]	D, see ^{66}Ge	3E+4	9E+4	4E-5	1E-7	-	-
			St. wall (4E+4)	-	-	-	6E-4	6E-3
		W, see ^{66}Ge	-	1E+5	4E-5	1E-7	-	-
32	Germanium-68	D, see ^{66}Ge	5E+3	4E+3	2E-6	5E-9	6E-5	6E-4
		W, see ^{66}Ge	-	1E+2	4E-8	1E-10	-	-
32	Germanium-69	D, see ^{66}Ge	1E+4	2E+4	6E-6	2E-8	2E-4	2E-3
		W, see ^{66}Ge	-	8E+3	3E-6	1E-8	-	-
32	Germanium-71	D, see ^{66}Ge	5E+5	4E+5	2E-4	6E-7	7E-3	7E-2
		W, see ^{66}Ge	-	4E+4	2E-5	6E-8	-	-
32	Germanium-75[2]	D, see ^{66}Ge	4E+4	8E+4	3E-5	1E-7	-	-
			St. wall (7E+4)	-	-	-	9E-4	9E-3
		W, see ^{66}Ge	-	8E+4	4E-5	1E-7	-	-
32	Germanium-77	D, see ^{66}Ge	9E+3	1E+4	4E-6	1E-8	1E-4	1E-3
		W, see ^{66}Ge	-	6E+3	2E-6	8E-9	-	-
32	Germanium-78[2]	D, see ^{66}Ge	2E+4	2E+4	9E-6	3E-8	-	-
			St. wall (2E+4)	-	-	-	3E-4	3E-3
		W, see ^{66}Ge	-	2E+4	9E-6	3E-8	-	-

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Atomic No.	Radionuclide	Class	Table 1 Occupational Values: Col. 1 Oral Ingestion ALI (µCi)	Col. 2 Inhalation ALI (µCi)	Col. 3 Inhalation DAC (µCi/ml)	Table 2 Effluent Concentrations: Col. 1 Air (µCi/ml)	Col. 2 Water (µCi/ml)	Table 3 Releases to Sewers: Monthly Average Concentration (µCi/ml)
33	Arsenic-69[2]	W, all compounds	3E+4	1E+5	5E-5	2E-7	-	-
			St. wall (4E+4)	-	-	-	6E-4	6E-3
33	Arsenic-70[2]	W, all compounds	1E+4	5E+4	2E-5	7E-8	2E-4	2E-3
33	Arsenic-71	W, all compounds	4E+3	5E+3	2E-6	6E-9	5E-5	5E-4
33	Arsenic-72	W, all compounds	9E+2	1E+3	6E-7	2E-9	1E-5	1E-4
33	Arsenic-73	W, all compounds	8E+3	2E+3	7E-7	2E-9	1E-4	1E-3
33	Arsenic-74	W, all compounds	1E+3	8E+2	3E-7	1E-9	2E-5	2E-4
33	Arsenic-76	W, all compounds	1E+3	1E+3	6E-7	2E-9	1E-5	1E-4
33	Arsenic-77	W, all compounds	4E+3	5E+3	2E-6	7E-9	-	-
			LLI wall (5E+3)	-	-	-	6E-5	6E-4
33	Arsenic-78[2]	W, all compounds	8E+3	2E+4	9E-6	3E-8	1E-4	1E-3
34	Selenium-70[2]	D, all compounds except those given for W	2E+4	4E+4	2E-5	5E-8	1E-4	1E-3
		W, oxides, hydroxides, carbides, and elemental Se	1E+4	4E+4	2E-5	6E-8	-	-
34	Selenium-73m[2]	D, see ^{70}Se	6E+4	2E+5	6E-5	2E-7	4E-4	4E-3
		W, see ^{70}Se	3E+4	1E+5	6E-5	2E-7	-	-
34	Selenium-73	D, see ^{70}Se	3E+3	1E+4	5E-6	2E-8	4E-5	4E-4
		W, see ^{70}Se	-	2E+4	7E-6	2E-8	-	-
34	Selenium-75	D, see ^{70}Se	5E+2	7E+2	3E-7	1E-9	7E-6	7E-5
		W, see ^{70}Se	-	6E+2	3E-7	8E-10	-	-
34	Selenium-79	D, see ^{70}Se	6E+2	8E+2	3E-7	1E-9	8E-6	8E-5
		W, see ^{70}Se	-	6E+2	2E-7	8E-10	-	-
34	Selenium-81m[2]	D, see ^{70}Se	4E+4	7E+4	3E-5	9E-8	3E-4	3E-3
		W, see ^{70}Se	2E+4	7E+4	3E-5	1E-7	-	-
34	Selenium-81[2]	D, see ^{70}Se	6E+4	2E+5	9E-5	3E-7	-	-
			St. wall (8E+4)	-	-	-	1E-3	1E-2
		W, see ^{70}Se	-	2E+5	1E-4	3E-7	-	-
34	Selenium-83[2]	D, see ^{70}Se	4E+4	1E+5	5E-5	2E-7	4E-4	4E-3
		W, see ^{70}Se	3E+4	1E+5	5E-5	2E-7	-	-

Atomic No	Radionuclide	Class	Table 1 Occupational Values: Col. 1 Oral Ingestion ALI (μCi)	Col. 2 Inhalation ALI (μCi)	Col. 3 Inhalation DAC (μCi/ml)	Table 2 Effluent Concentrations: Col. 1 Air (μCi/ml)	Col. 2 Water (μCi/ml)	Table 3 Releases to Sewers: Monthly Average Concentration (μCi/ml)
35	Bromine-74m[2]	D, bromides of H, Li, Na, K, Rb, Cs, and Fr	1E+4	4E+4	2E-5	5E-8	-	-
			St. wall (2E+4)	-	-	-	3E-4	3E-3
		W, bromides of lanthanides, Be, Mg, Ca, Sr, Ba, Ra, Al, Ga, In, Tl, Ge, Sn, Pb, As, Sb, Bi, Fe, Ru, Os, Co, Rh, Ir, Ni, Pd, Pt, Cu, Ag, Au, Zn, Cd, Hg, Sc, Y, Ti, Zr, Hf, V, Nb, Ta, Mn, Tc, and Re		4E+4	2E-5	6E-8	-	-
35	Bromine-74[2]	D, see ^{74m}Br	2E+4	7E+4	3E-5	1E-7	-	-
			St. wall (4E+4)	-	-	-	5E-4	5E-3
		W, see ^{74m}Br	-	8E+4	4E-5	1E-7	-	-
35	Bromine-75[2]	D, see ^{74m}Br	3E+4	5E+4	2E-5	7E-8	-	-
			St. wall (4E+4)	-	-	-	5E-4	5E-3
		W, see ^{74m}Br	-	5E+4	2E-5	7E-8	-	-
35	Bromine-76	D, see ^{74m}Br	4E+3	5E+3	2E-6	7E-9	5E-5	5E-4
		W, see ^{74m}Br	-	4E+3	2E-6	6E-9	-	-
35	Bromine-77	D, see ^{74m}Br	2E+4	2E+4	1E-5	3E-8	2E-4	2E-3
		W, see ^{74m}Br	-	2E+4	8E-6	3E-8	-	-
35	Bromine-80m	D, see ^{74m}Br	2E+4	2E+4	7E-6	2E-8	3E-4	3E-3
		W, see ^{74m}Br	-	1E+4	6E-6	2E-8	-	-
35	Bromine-80[2]	D, see ^{74m}Br	5E+4	2E+5	8E-5	3E-7	-	-
			St. wall (9E+4)	-	-	-	1E-3	1E-2
		W, see ^{74m}Br	-	2E+5	9E-5	3E-7	-	-
35	Bromine-82	D, see ^{74m}Br	3E+3	4E+3	2E-6	6E-9	4E-5	4E-4
		W, see ^{74m}Br	-	4E+3	2E-6	5E-9	-	-
35	Bromine-83	D, see ^{74m}Br	5E+4	6E+4	3E-5	9E-8	-	-
			St. wall (7E+4)	-	-	-	9E-4	9E-3
		W, see ^{74m}Br	-	6E+4	3E-5	9E-8	-	-
35	Bromine-84[2]	D, see ^{74m}Br	2E+4	6E+4	2E-5	8E-8	-	-
			St. wall (3E+4)	-	-	-	4E-4	4E-3
		W, see ^{74m}Br	-	6E+4	3E-5	9E-8	-	-
36	Krypton-74[2]	Submersion[1]	-	-	3E-6	1E-8	-	-
36	Krypton-76	Submersion[1]	-	-	9E-6	4E-8	-	-
36	Krypton-77[2]	Submersion[1]	-	-	4E-6	2E-8	-	-
36	Krypton-79	Submersion[1]	-	-	2E-5	7E-8	-	-
36	Krypton-81	Submersion[1]	-	-	7E-4	3E-6	-	-

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36	Krypton-83m[2]	Submersion[1]	-	-	1E-2	5E-5	-	-
36	Krypton-85m	Submersion[1]	-	-	2E-5	1E-7	-	-
36	Krypton-85	Submersion[1]	-	-	1E-4	7E-7	-	-
36	Krypton-87[2]	Submersion[1]	-	-	5E-6	2E-8	-	-
36	Krypton-88	Submersion[1]	-	-	2E-6	9E-9	-	-
37	Rubidium-79[2]	D, all compounds	4E+4	1E+5	5E-5	2E-7	-	-
			St. wall (6E+4)	-	-	-	8E-4	8E-3
37	Rubidium-81m[2]	D, all compounds	2E+5	3E+5	1E-4	5E-7	-	-
			St. wall (3E+5)	-	-	-	4E-3	4E-2
37	Rubidium-81	D, all compounds	4E+4	5E+4	2E-5	7E-8	5E-4	5E-3
37	Rubidium-82m	D, all compounds	1E+4	2E+4	7E-6	2E-8	2E-4	2E-3
37	Rubidium-83	D, all compounds	6E+2	1E+3	4E-7	1E-9	9E-6	9E-5
37	Rubidium-84	D, all compounds	5E+2	8E+2	3E-7	1E-9	7E-6	7E-5
37	Rubidium-86	D, all compounds	5E+2	8E+2	3E-7	1E-9	7E-6	7E-5
37	Rubidium-87	D, all compounds	1E+3	2E+3	6E-7	2E-9	1E-5	1E-4
37	Rubidium-88[2]	D, all compounds	2E+4	6E+4	3E-5	9E-8	-	-
			St. wall (3E+4)	-	-	-	4E-4	4E-3
37	Rubidium-89[2]	D, all compounds	4E+4	1E+5	6E-5	2E-7	-	-
			St. wall (6E+4)	-	-	-	9E-4	9E-3
38	Strontium-80[2]	D, all soluble compounds except $SrTiO_3$	4E+3	1E+4	5E-6	2E-8	6E-5	6E-4
		Y, all insoluble compounds and $SrTiO_3$	-	1E+4	5E-6	2E-8	-	-
38	Strontium-81[2]	D, see ^{80}Sr	3E+4	8E+4	3E-5	1E-7	3E-4	3E-3
		Y, see ^{80}Sr	2E+4	8E+4	3E-5	1E-7	-	-
38	Strontium-82	D, see ^{80}Sr	3E+2	4E+2	2E-7	6E-10	-	-
			LLI wall (2E+2)	-	-	-	3E-6	3E-5
		Y, see ^{80}Sr	2E+2	9E+1	4E-8	1E-10	-	-
38	Strontium-83	D, see ^{80}Sr	3E+3	7E+3	3E-6	1E-8	3E-5	3E-4
		Y, see ^{80}Sr	2E+3	4E+3	1E-6	5E-9	-	-
38	Strontium-85m[2]	D, see ^{80}Sr	2E+5	6E+5	3E-4	9E-7	3E-3	3E-2
		Y, see ^{80}Sr	-	8E+5	4E-4	1E-6	-	-
38	Strontium-85	D, see ^{80}Sr	3E+3	3E+3	1E-6	4E-9	4E-5	4E-4
		Y, see ^{80}Sr	-	2E+3	6E-7	2E-9	-	-
38	Strontium-87m	D, see ^{80}Sr	5E+4	1E+5	5E-5	2E-7	6E-4	6E-3
		Y, see ^{80}Sr	4E+4	2E+5	6E-5	2E-7	-	-

Atomic No.	Radionuclide	Class	Table 1 Occupational Values: Col. 1 Oral Ingestion ALI (μCi)	Col. 2 Inhalation ALI (μCi)	Col. 3 Inhalation DAC (μCi/ml)	Table 2 Effluent Concentrations: Col. 1 Air (μCi/ml)	Col. 2 Water (μCi/ml)	Table 3 Releases to Sewers: Monthly Average Concentration (μCi/ml)
38	Strontium-89	D, see ^{80}Sr	6E+2	8E+2	4E-7	1E-9	-	-
			LLI wall (6E+2)	-	-	-	8E-6	8E-5
		Y, see ^{80}Sr	5E+2	1E+2	6E-8	2E-10	-	-
38	Strontium-90	D, see ^{80}Sr	3E+1	2E+1	8E-9	-	-	-
			Bone surf (4E+1)	Bone surf (2E+1)	-	3E-11	5E-7	5E-6
		Y, see ^{80}Sr	-	4E+0	2E-9	6E-12	-	-
38	Strontium-91	D, see ^{80}Sr	2E+3	6E+3	2E-6	8E-9	2E-5	2E-4
		Y, see ^{80}Sr	-	4E+3	1E-6	5E-9	-	-
38	Strontium-92	D, see ^{80}Sr	3E+3	9E+3	4E-6	1E-8	4E-5	4E-4
		Y, see ^{80}Sr	-	7E+3	3E-6	9E-9	-	-
39	Yttrium-86m[2]	W, all compounds except those given for Y	2E+4	6E+4	2E-5	8E-8	3E-4	3E-3
		Y, oxides and hydroxides	-	5E+4	2E-5	8E-8	-	-
39	Yttrium-86	W, see ^{86m}Y	1E+3	3E+3	1E-6	5E-9	2E-5	2E-4
		Y, see ^{86m}Y	-	3E+3	1E-6	5E-9	-	-
39	Yttrium-87	W, see ^{86m}Y	2E+3	3E+3	1E-6	5E-9	3E-5	3E-4
		Y, see ^{86m}Y	-	3E+3	1E-6	5E-9	-	-
39	Yttrium-88	W, see ^{86m}Y	1E+3	3E+2	1E-7	3E-10	1E-5	1E-4
		Y, see ^{86m}Y	-	2E+2	1E-7	3E-10	-	-
39	Yttrium-90m	W, see ^{86m}Y	8E+3	1E+4	5E-6	2E-8	1E-4	1E-3
		Y, see ^{86m}Y	-	1E+4	5E-6	2E-8	-	-
39	Yttrium-90	W, see ^{86m}Y	4E+2	7E+2	3E-7	9E-10	-	-
			LLI wall (5E+2)	-	-	-	7E-6	7E-5
		Y, see ^{86m}Y	-	6E+2	3E-7	9E-10	-	-
39	Yttrium-91m[2]	W, see ^{86m}Y	1E+5	2E+5	1E-4	3E-7	2E-3	2E-2
		Y, see ^{86m}Y	-	2E+5	7E-5	2E-7	-	-
39	Yttrium-91	W, see ^{86m}Y	5E+2	2E+2	7E-8	2E-10	-	-
			LLI wall (6E+2)	-	-	-	8E-6	8E-5
		Y, see ^{86m}Y	-	1E+2	5E-8	2E-10	-	-
39	Yttrium-92	W, see ^{86m}Y	3E+3	9E+3	4E-6	1E-8	4E-5	4E-4
		Y, see ^{86m}Y	-	8E+3	3E-6	1E-8	-	-
39	Yttrium-93	W, see ^{86m}Y	1E+3	3E+3	1E-6	4E-9	2E-5	2E-4
		Y, see ^{86m}Y	-	2E+3	1E-6	3E-9	-	-
39	Yttrium-94[2]	W, see ^{86m}Y	2E+4	8E+4	3E-5	1E-7	-	-
			St. wall (3E+4)	-	-	-	4E-4	4E-3
		Y, see ^{86m}Y	-	8E+4	3E-5	1E-7	-	-
39	Yttrium-95[2]	W, see ^{86m}Y	4E+4	2E+5	6E-5	2E-7	-	-
			St. wall (5E+4)	-	-	-	7E-4	7E-3
		Y, see ^{86m}Y	-	1E+5	6E-5	2E-7	-	-

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40	Zirconium-86	D, all compounds except those given for W and Y	1E+3	4E+3	2E-6	6E-9	2E-5	2E-4
		W, oxides, hydroxides, halides, and nitrates	-	3E+3	1E-6	4E-9	-	-
		Y, carbide	-	2E+3	1E-6	3E-9	-	-
40	Zirconium-88	D, see ^{86}Zr	4E+3	2E+2	9E-8	3E-10	5E-5	5E-4
		W, see ^{86}Zr	-	5E+2	2E-7	7E-10	-	-
		Y, see ^{86}Zr	-	3E+2	1E-7	4E-10	-	-
40	Zirconium-89	D, see ^{86}Zr	2E+3	4E+3	1E-6	5E-9	2E-5	2E-4
		W, see ^{86}Zr	-	2E+3	1E-6	3E-9	-	-
		Y, see ^{86}Zr	-	2E+3	1E-6	3E-9	-	-
40	Zirconium-93	D, see ^{86}Zr	1E+3	6E+0	3E-9	-	-	-
			Bone surf (3E+3)	Bone surf (2E+1)	-	2E-11	4E-5	4E-4
		W, see ^{86}Zr	-	2E+1	1E-8	-	-	-
			-	Bone surf (6E+1)	-	9E-11	-	-
		Y, see ^{86}Zr	-	6E+1	2E-8	-	-	-
			-	Bone surf (7E+1)	-	9E-11	-	-
40	Zirconium-95	D, see ^{86}Zr	1E+3	1E+2	5E-8	-	2E-5	2E-4
			-	Bone surf (3E+2)	-	4E-10	-	-
		W, see ^{86}Zr	-	4E+2	2E-7	5E-10	-	-
		Y, see ^{86}Zr	-	3E+2	1E-7	4E-10	-	-
40	Zirconium-97	D, see ^{86}Zr	6E+2	2E+3	8E-7	3E-9	9E-6	9E-5
		W, see ^{86}Zr	-	1E+3	6E-7	2E-9	-	-
		Y, see ^{86}Zr	-	1E+3	5E-7	2E-9	-	-
41	Niobium-88[2]	W, all compounds except those given for Y	5E+4	2E+5	9E-5	3E-7	-	-
			St. wall (7E+4)	-	-	-	1E-3	1E-2
		Y, oxides and hydroxides	-	2E+5	9E-5	3E-7	-	-
41	Niobium-89m[2] (66 min)	W, see ^{88}Nb	1E+4	4E+4	2E-5	6E-8	1E-4	1E-3
		Y, see ^{88}Nb	-	4E+4	2E-5	5E-8	-	-
41	Niobium-89 (122 min)	W, see ^{88}Nb	5E+3	2E+4	8E-6	3E-8	7E-5	7E-4
		Y, see ^{88}Nb	-	2E+4	6E-6	2E-8	-	-
41	Niobium-90	W, see ^{88}Nb	1E+3	3E+3	1E-6	4E-9	1E-5	1E-4
		Y, see ^{88}Nb	-	2E+3	1E-6	3E-9	-	-
41	Niobium-93m	W, see ^{88}Nb	9E+3	2E+3	8E-7	3E-9	-	-
			LLI wall (1E+4)	-	-	-	2E-4	2E-3
		Y, see ^{88}Nb	-	2E+2	7E-8	2E-10	-	-
41	Niobium-94	W, see ^{88}Nb	9E+2	2E+2	8E-8	3E-10	1E-5	1E-4
		Y, see ^{88}Nb	-	2E+1	6E-9	2E-11	-	-
41	Niobium-95m	W, see ^{88}Nb	2E+3	3E+3	1E-6	4E-9	-	-
			LLI wall (2E+3)	-	-	-	3E-5	3E-4
		Y, see ^{88}Nb	-	2E+3	9E-7	3E-9	-	-

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41	Niobium-95	W, see ^{88}Nb	2E+3	1E+3	5E-7	2E-9	3E-5	3E-4
		Y, see ^{88}Nb	-	1E+3	5E-7	2E-9	-	-
41	Niobium-96	W, see ^{88}Nb	1E+3	3E+3	1E-6	4E-9	2E-5	2E-4
		Y, see ^{88}Nb	-	2E+3	1E-6	3E-9	-	-
41	Niobium-97[2]	W, see ^{88}Nb	2E+4	8E+4	3E-5	1E-7	3E-4	3E-3
		Y, see ^{88}Nb	-	7E+4	3E-5	1E-7	-	-
41	Niobium-98[2]	W, see ^{88}Nb	1E+4	5E+4	2E-5	8E-8	2E-4	2E-3
		Y, see ^{88}Nb	-	5E+4	2E-5	7E-8	-	-
42	Molybdenum-90	D, all compounds except those given for Y	4E+3	7E+3	3E-6	1E-8	3E-5	3E-4
		Y, oxides, hydroxides, and MoS_2	2E+3	5E+3	2E-6	6E-9	-	-
42	Molybdenum-93m	D, see ^{90}Mo	9E+3	2E+4	7E-6	2E-8	6E-5	6E-4
		Y, see ^{90}Mo	4E+3	1E+4	6E-6	2E-8	-	-
42	Molybdenum-93	D, see ^{90}Mo	4E+3	5E+3	2E-6	8E-9	5E-5	5E-4
		Y, see ^{90}Mo	2E+4	2E+2	8E-8	2E-10	-	-
42	Molybdenum-99	D, see ^{90}Mo	2E+3	3E+3	1E-6	4E-9	-	-
			LLI wall (1E+3)	-	-	-	2E-5	2E-4
		Y, see ^{90}Mo	1E+3	1E+3	6E-7	2E-9	-	-
42	Molybdenum-101[2]	D, see ^{90}Mo	4E+4	1E+5	6E-5	2E-7	-	-
			St. wall (5E+4)	-	-	-	7E-4	7E-3
		Y, see ^{90}Mo	-	1E+5	6E-5	2E-7	-	-
43	Technetium-93m[2]	D, all compounds except those given for W	7E+4	2E+5	6E-5	2E-7	1E-3	1E-2
		W, oxides, hydroxides, halides, and nitrates	-	3E+5	1E-4	4E-7	-	-
43	Technetium-93	D, see ^{93m}Tc	3E+4	7E+4	3E-5	1E-7	4E-4	4E-3
		W, see ^{93m}Tc	-	1E+5	4E-5	1E-7	-	-
43	Technetium-94m[2]	D, see ^{93m}Tc	2E+4	4E+4	2E-5	6E-8	3E-4	3E-3
		W, see ^{93m}Tc	-	6E+4	2E-5	8E-8	-	-
43	Technetium-94	D, see ^{93m}Tc	9E+3	2E+4	8E-6	3E-8	1E-4	1E-3
		W, see ^{93m}Tc	-	2E+4	1E-5	3E-8	-	-
43	Technetium-95m	D, see ^{93m}Tc	4E+3	5E+3	2E-6	8E-9	5E-5	5E-4
		W, see ^{93m}Tc	-	2E+3	8E-7	3E-9	-	-
43	Technetium-95	D, see ^{93m}Tc	1E+4	2E+4	9E-6	3E-8	1E-4	1E-3
		W, see ^{93m}Tc	-	2E+4	8E-6	3E-8	-	-
43	Technetium-96m[2]	D, see ^{93m}Tc	2E+5	3E+5	1E-4	4E-7	2E-3	2E-2
		W, see ^{93m}Tc	-	2E+5	1E-4	3E-7	-	-
43	Technetium-96	D, see ^{93m}Tc	2E+3	3E+3	1E-6	5E-9	3E-5	3E-4
		W, see ^{93m}Tc	-	2E+3	9E-7	3E-9	-	-
43	Technetium-97m	D, see ^{93m}Tc	5E+3	7E+3	3E-6	-	6E-5	6E-4
			-	St. wall (7E+3)	-	1E-8	-	-
		W, see ^{93m}Tc	-	1E+3	5E-7	2E-9	-	-

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Atomic No.	Radionuclide	Class	Table 1 Occupational Values Col. 1 Oral Ingestion ALI (μCi)	Col. 2 Inhalation ALI (μCi)	Col. 3 Inhalation DAC (μCi/ml)	Table 2 Effluent Concentrations Col. 1 Air (μCi/ml)	Col. 2 Water (μCi/ml)	Table 3 Releases to Sewers Monthly Average Concentration (μCi/ml)
43	Technetium-97	D, see ^{93m}Tc	4E+4	5E+4	2E-5	7E-8	5E-4	5E-3
		W, see ^{93m}Tc	-	6E+3	2E-6	8E-9	-	-
43	Technetium-98	D, see ^{93m}Tc	1E+3	2E+3	7E-7	2E-9	1E-5	1E-4
		W, see ^{93m}Tc	-	3E+2	1E-7	4E-10	-	-
43	Technetium-99m	D, see ^{93m}Tc	8E+4	2E+5	6E-5	2E-7	1E-3	1E-2
		W, see ^{93m}Tc	-	2E+5	1E-4	3E-7	-	-
43	Technetium-99	D, see ^{93m}Tc	4E+3	5E+3	2E-6	-	6E-5	6E-4
			-	St. wall (6E+3)	-	8E-9	-	-
		W, see ^{93m}Tc	-	7E+2	3E-7	9E-10	-	-
43	Technetium-101[2]	D, see ^{93m}Tc	9E+4	3E+5	1E-4	5E-7	-	-
			St. wall (1E+5)	-	-	-	2E-3	2E-2
		W, see ^{93m}Tc	-	4E+5	2E-4	5E-7	-	-
43	Technetium-104[2]	D, see ^{93m}Tc	2E+4	7E+4	3E-5	1E-7	-	-
			St. wall (3E+4)	-	-	-	4E-4	4E-3
		W, see ^{93m}Tc	-	9E+4	4E-5	1E-7	-	-
44	Ruthenium-94[2]	D, all compounds except those given for W and Y	2E+4	4E+4	2E-5	6E-8	2E-4	2E-3
		W, halides	-	6E+4	3E-5	9E-8	-	-
		Y, oxides and hydroxides	-	6E+4	2E-5	8E-8	-	-
44	Ruthenium-97	D, see ^{94}Ru	8E+3	2E+4	8E-6	3E-8	1E-4	1E-3
		W, see ^{94}Ru	-	1E+4	5E-6	2E-8	-	-
		Y, see ^{94}Ru	-	1E+4	5E-6	2E-8	-	-
44	Ruthenium-103	D, see ^{94}Ru	2E+3	2E+3	7E-7	2E-9	3E-5	3E-4
		W, see ^{94}Ru	-	1E+3	4E-7	1E-9	-	-
		Y, see ^{94}Ru	-	6E+2	3E-7	9E-10	-	-
44	Ruthenium-105	D, see ^{94}Ru	5E+3	1E+4	6E-6	2E-8	7E-5	7E-4
		W, see ^{94}Ru	-	1E+4	6E-6	2E-8	-	-
		Y, see ^{94}Ru	-	1E+4	5E-6	2E-8	-	-
44	Ruthenium-106	D, see ^{94}Ru	2E+2	9E+1	4E-8	1E-10	-	-
			LLI wall (2E+2)	-	-	-	3E-6	3E-5
		W, see ^{94}Ru	-	5E+1	2E-8	8E-11	-	-
		Y, see ^{94}Ru	-	1E+1	5E-9	2E-11	-	-
45	Rhodium-99m	D, all compounds except those given for W and Y	2E+4	6E+4	2E-5	8E-8	2E-4	2E-3
		W, halides	-	8E+4	3E-5	1E-7	-	-
		Y, oxides and hydroxides	-	7E+4	3E-5	9E-8	-	-
45	Rhodium-99	D, see ^{99m}Rh	2E+3	3E+3	1E-6	4E-9	3E-5	3E-4
		W, see ^{99m}Rh	-	2E+3	9E-7	3E-9	-	-
		Y, see ^{99m}Rh	-	2E+3	8E-7	3E-9	-	-

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Atomic No.	Radionuclide	Class	Table 1 Occupational Values: Col. 1 Oral Ingestion ALI (μCi)	Table 1 Occupational Values: Col. 2 Inhalation ALI (μCi)	Table 1 Occupational Values: Col. 3 Inhalation DAC (μCi/ml)	Table 2 Effluent Concentrations: Col. 1 Air (μCi/ml)	Table 2 Effluent Concentrations: Col. 2 Water (μCi/ml)	Table 3 Releases to Sewers: Monthly Average Concentration (μCi/ml)
45	Rhodium-100	D, see ^{99m}Rh	2E+3	5E+3	2E-6	7E-9	2E-5	2E-4
		W, see ^{99m}Rh	-	4E+3	2E-6	6E-9	-	-
		Y, see ^{99m}Rh	-	4E+3	2E-6	5E-9	-	-
45	Rhodium-101m	D, see ^{99m}Rh	6E+3	1E+4	5E-6	2E-8	8E-5	8E-4
		W, see ^{99m}Rh	-	8E+3	4E-6	1E-8	-	-
		Y, see ^{99m}Rh	-	8E+3	3E-6	1E-8	-	-
45	Rhodium-101	D, see ^{99m}Rh	2E+3	5E+2	2E-7	7E-10	3E-5	3E-4
		W, see ^{99m}Rh	-	8E+2	3E-7	1E-9	-	-
		Y, see ^{99m}Rh	-	2E+2	6E-8	2E-10	-	-
45	Rhodium-102m	D, see ^{99m}Rh	1E+3	5E+2	2E-7	7E-10	-	-
			LLI wall (1E+3)	-	-	-	2E-5	2E-4
		W, see ^{99m}Rh	-	4E+2	2E-7	5E-10	-	-
		Y, see ^{99m}Rh	-	1E+2	5E-8	2E-10	-	-
45	Rhodium-102	D, see ^{99m}Rh	6E+2	9E+1	4E-8	1E-10	8E-6	8E-5
		W, see ^{99m}Rh	-	2E+2	7E-8	2E-10	-	-
		Y, see ^{99m}Rh	-	6E+1	2E-8	8E-11	-	-
45	Rhodium-103m[2]	D, see ^{99m}Rh	4E+5	1E+6	5E-4	2E-6	6E-3	6E-2
		W, see ^{99m}Rh	-	1E+6	5E-4	2E-6	-	-
		Y, see ^{99m}Rh	-	1E+6	5E-4	2E-6	-	-
45	Rhodium-105	D, see ^{99m}Rh	4E+3	1E+4	5E-6	2E-8	-	-
			LLI wall (4E+3)	-	-	-	5E-5	5E-4
		W, see ^{99m}Rh	-	6E+3	3E-6	9E-9	-	-
		Y, see ^{99m}Rh	-	6E+3	2E-6	8E-9	-	-
45	Rhodium-106m	D, see ^{99m}Rh	8E+3	3E+4	1E-5	4E-8	1E-4	1E-3
		W, see ^{99m}Rh	-	4E+4	2E-5	5E-8	-	-
		Y, see ^{99m}Rh	-	4E+4	1E-5	5E-8	-	-
45	Rhodium-107[2]	D, see ^{99m}Rh	7E+4	2E+5	1E-4	3E-7	-	-
			St. wall (9E+4)	-	-	-	1E-3	1E-2
		W, see ^{99m}Rh	-	3E+5	1E-4	4E-7	-	-
		Y, see ^{99m}Rh	-	3E+5	1E-4	3E-7	-	-
46	Palladium-100	D, all compounds except those given for W and Y	1E+3	1E+3	6E-7	2E-9	2E-5	2E-4
		W, nitrates	-	1E+3	5E-7	2E-9	-	-
		Y, oxides and hydroxides	-	1E+3	6E-7	2E-9	-	-
46	Palladium-101	D, see ^{100}Pd	1E+4	3E+4	1E-5	5E-8	2E-4	2E-3
		W, see ^{100}Pd	-	3E+4	1E-5	5E-8	-	-
		Y, see ^{100}Pd	-	3E+4	1E-5	4E-8	-	-
46	Palladium-103	D, see ^{100}Pd	6E+3	6E+3	3E-6	9E-9	-	-
			LLI wall (7E+3)	-	-	-	1E-4	1E-3
		W, see ^{100}Pd	-	4E+3	2E-6	6E-9	-	-
		Y, see ^{100}Pd	-	4E+3	1E-6	5E-9	-	-
46	Palladium-107	D, see ^{100}Pd	3E+4	2E+4	9E-6	-	-	-
			LLI wall (4E+4)	Kidneys (2E+4)	-	3E-8	5E-4	5E-3
		W, see ^{100}Pd	-	7E+3	3E-6	1E-8	-	-
		Y, see ^{100}Pd	-	4E+2	2E-7	6E-10	-	-

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Atomic No.	Radionuclide	Class	Table 1 Occupational Values: Col. 1 Oral Ingestion ALI (μCi)	Col. 2 Inhalation ALI (μCi)	Col. 3 Inhalation DAC (μCi/ml)	Table 2 Effluent Concentrations: Col. 1 Air (μCi/ml)	Col. 2 Water (μCi/ml)	Table 3 Releases to Sewers: Monthly Average Concentration (μCi/ml)
46	Palladium-109	D, see ^{100}Pd	2E+3	6E+3	3E-6	9E-9	3E-5	3E-4
		W, see ^{100}Pd	-	5E+3	2E-6	8E-9	-	-
		Y, see ^{100}Pd	-	5E+3	2E-6	6E-9	-	-
47	Silver-102[2]	D, all compounds except those given for W and Y	5E+4	2E+5	8E-5	2E-7	-	-
			St. wall (6E+4)	-	-	-	9E-4	9E-3
		W, nitrates and sulfides	-	2E+5	9E-5	3E-7	-	-
		Y, oxides and hydroxides	-	2E+5	8E-5	3E-7	-	-
47	Silver-103[2]	D, see ^{102}Ag	4E+4	1E+5	4E-5	1E-7	5E-4	5E-3
		W, see ^{102}Ag	-	1E+5	5E-5	2E-7	-	-
		Y, see ^{102}Ag	-	1E+5	5E-5	2E-7	-	-
47	Silver-104m[2]	D, see ^{102}Ag	3E+4	9E+4	4E-5	1E-7	4E-4	4E-3
		W, see ^{102}Ag	-	1E+5	5E-5	2E-7	-	-
		Y, see ^{102}Ag	-	1E+5	5E-5	2E-7	-	-
47	Silver-104[2]	D, see ^{102}Ag	2E+4	7E+4	3E-5	1E-7	3E-4	3E-3
		W, see ^{102}Ag	-	1E+5	6E-5	2E-7	-	-
		Y, see ^{102}Ag	-	1E+5	6E-5	2E-7	-	-
47	Silver-105	D, see ^{102}Ag	3E+3	1E+3	4E-7	1E-9	4E-5	4E-4
		W, see ^{102}Ag	-	2E+3	7E-7	2E-9	-	-
		Y, see ^{102}Ag	-	2E+3	7E-7	2E-9	-	-
47	Silver-106m	D, see ^{102}Ag	8E+2	7E+2	3E-7	1E-9	1E-5	1E-4
		W, see ^{102}Ag	-	9E+2	4E-7	1E-9	-	-
		Y, see ^{102}Ag	-	9E+2	4E-7	1E-9	-	-
47	Silver-106[2]	D, see ^{102}Ag	6E+4	2E+5	8E-5	3E-7	-	-
			St. wall (6E+4)	-	-	-	9E-4	9E-3
		W, see ^{102}Ag	-	2E+5	9E-5	3E-7	-	-
		Y, see ^{102}Ag	-	2E+5	8E-5	3E-7	-	-
47	Silver-108m	D, see ^{102}Ag	6E+2	2E+2	8E-8	3E-10	9E-6	9E-5
		W, see ^{102}Ag	-	3E+2	1E-7	4E-10	-	-
		Y, see ^{102}Ag	-	2E+1	1E-8	3E-11	-	-
47	Silver-110m	D, see ^{102}Ag	5E+2	1E+2	5E-8	2E-10	6E-6	6E-5
		W, see ^{102}Ag	-	2E+2	8E-8	3E-10	-	-
		Y, see ^{102}Ag	-	9E+1	4E-8	1E-10	-	-
47	Silver-111	D, see ^{102}Ag	9E+2	2E+3	6E-7	-	-	-
			LLI wall (1E+3)	Liver (2E+3)	-	2E-9	2E-5	2E-4
		W, see ^{102}Ag	-	9E+2	4E-7	1E-9	-	-
		Y, see ^{102}Ag	-	9E+2	4E-7	1E-9	-	-
47	Silver-112	D, see ^{102}Ag	3E+3	8E+3	3E-6	1E-8	4E-5	4E-4
		W, see ^{102}Ag	-	1E+4	4E-6	1E-8	-	-
		Y, see ^{102}Ag	-	9E+3	4E-6	1E-8	-	-

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47	Silver-115[2]	D, see ^{102}Ag	3E+4	9E+4	4E-5	1E-7	-	-
			St. wall (3E+4)	-	-	-	4E-4	4E-3
		W, see ^{102}Ag	-	9E+4	4E-5	1E-7	-	-
		Y, see ^{102}Ag	-	8E+4	3E-5	1E-7	-	-
48	Cadmium-104[2]	D, all compounds except those given for W and Y	2E+4	7E+4	3E-5	9E-8	3E-4	3E-3
		W, sulfides, halides, and nitrates	-	1E+5	5E-5	2E-7	-	-
		Y, oxides and hydroxides	-	1E+5	5E-5	2E-7	-	-
48	Cadmium-107	D, see ^{104}Cd	2E+4	5E+4	2E-5	8E-8	3E-4	3E-3
		W, see ^{104}Cd	-	6E+4	2E-5	8E-8	-	-
		Y, see ^{104}Cd	-	5E+4	2E-5	7E-8	-	-
48	Cadmium-109	D, see ^{104}Cd	3E+2	4E+1	1E-8	-	-	-
			Kidneys (4E+2)	Kidneys (5E+1)	-	7E-11	6E-6	6E-5
		W, see ^{104}Cd	-	1E+2	5E-8	-	-	-
			-	Kidneys (1E+2)	-	2E-10	-	-
		Y, see ^{104}Cd	-	1E+2	5E-8	2E-10	-	-
48	Cadmium-113m	D, see ^{104}Cd	2E+1	2E+0	1E-9	-	-	-
			Kidneys (4E+1)	Kidneys (4E+0)	-	5E-12	5E-7	5E-6
		W, see ^{104}Cd	-	8E+0	4E-9	-	-	-
			-	Kidneys (1E+1)	-	2E-11	-	-
		Y, see ^{104}Cd	-	1E+1	5E-9	2E-11	-	-
48	Cadmium-113	D, see ^{104}Cd	2E+1	2E+0	9E-10	-	-	-
			Kidneys (3E+1)	Kidneys (3E+0)	-	5E-12	4E-7	4E-6
		W, see ^{104}Cd	-	8E+0	3E-9	-	-	-
			-	Kidneys (1E+1)	-	2E-11	-	-
		Y, see ^{104}Cd	-	1E+1	6E-9	2E-11	-	-
48	Cadmium-115m	D, see ^{104}Cd	3E+2	5E+1	2E-8	-	4E-6	4E-5
			-	Kidneys (8E+1)	-	1E-10	-	-
		W, see ^{104}Cd	-	1E+2	5E-8	2E-10	-	-
		Y, see ^{104}Cd	-	1E+2	6E-8	2E-10	-	-
48	Cadmium-115	D, see ^{104}Cd	9E+2	1E+3	6E-7	2E-9	-	-
			LLI wall (1E+3)	-	-	-	1E-5	1E-4
		W, see ^{104}Cd	-	1E+3	5E-7	2E-9	-	-
		Y, see ^{104}Cd	-	1E+3	6E-7	2E-9	-	-
48	Cadmium-117m	D, see ^{104}Cd	5E+3	1E+4	5E-6	2E-8	6E-5	6E-4
		W, see ^{104}Cd	-	2E+4	7E-6	2E-8	-	-
		Y, see ^{104}Cd	-	1E+4	6E-6	2E-8	-	-

Atomic No.	Radionuclide	Class	Table 1 Occupational Values Col. 1 Oral Ingestion ALI (μCi)	Col. 2 Inhalation ALI (μCi)	Col. 3 Inhalation DAC (μCi/ml)	Table 2 Effluent Concentrations Col. 1 Air (μCi/ml)	Col. 2 Water (μCi/ml)	Table 3 Releases to Sewers Monthly Average Concentration (μCi/ml)
48	Cadmium-117	D, see ^{104}Cd	5E+3	1E+4	5E-6	2E-8	6E-5	6E-4
		W, see ^{104}Cd	-	2E+4	7E-6	2E-8	-	-
		Y, see ^{104}Cd	-	1E+4	6E-6	2E-8	-	-
49	Indium-109	D, all compounds except those given for W	2E+4	4E+4	2E-5	6E-8	3E-4	3E-3
		W, oxides, hydroxides, halides, and nitrates	-	6E+4	3E-5	9E-8	-	-
49	Indium-110[2] (69.1 min)	D, see ^{109}In	2E+4	4E+4	2E-5	6E-8	2E-4	2E-3
		W, see ^{109}In	-	6E+4	2E-5	8E-8	-	-
49	Indium-110 (4.9 h)	D, see ^{109}In	5E+3	2E+4	7E-6	2E-8	7E-5	7E-4
		W, see ^{109}In	-	2E+4	8E-6	3E-8	-	-
49	Indium-111	D, see ^{109}In	4E+3	6E+3	3E-6	9E-9	6E-5	6E-4
		W, see ^{109}In	-	6E+3	3E-6	9E-9	-	-
49	Indium-112[2]	D, see ^{109}In	2E+5	6E+5	3E-4	9E-7	2E-3	2E-2
		W, see ^{109}In	-	7E+5	3E-4	1E-6	-	-
49	Indium-113m[2]	D, see ^{109}In	5E+4	1E+5	6E-5	2E-7	7E-4	7E-3
		W, see ^{109}In	-	2E+5	8E-5	3E-7	-	-
49	Indium-114m	D, see ^{109}In	3E+2	6E+1	3E-8	9E-11	-	-
			LLI wall (4E+2)	-	-	-	5E-6	5E-5
		W, see ^{109}In	-	1E+2	4E-8	1E-10	-	-
49	Indium-115m	D, see ^{109}In	1E+4	4E+4	2E-5	6E-8	2E-4	2E-3
		W, see ^{109}In	-	5E+4	2E-5	7E-8	-	-
49	Indium-115	D, see ^{109}In	4E+1	1E+0	6E-10	2E-12	5E-7	5E-6
		W, see ^{109}In	-	5E+0	2E-9	8E-12	-	-
49	Indium-116m[2]	D, see ^{109}In	2E+4	8E+4	3E-5	1E-7	3E-4	3E-3
		W, see ^{109}In	-	1E+5	5E-5	2E-7	-	-
49	Indium-117m[2]	D, see ^{109}In	1E+4	3E+4	1E-5	5E-8	2E-4	2E-3
		W, see ^{109}In	-	4E+4	2E-5	6E-8	-	-
49	Indium-117[2]	D, see ^{109}In	6E+4	2E+5	7E-5	2E-7	8E-4	8E-3
		W, see ^{109}In	-	2E+5	9E-5	3E-7	-	-
49	Indium-119m[2]	D, see ^{109}In	4E+4	1E+5	5E-5	2E-7	-	-
			St. wall (5E+4)	-	-	-	7E-4	7E-3
		W, see ^{109}In	-	1E+5	6E-5	2E-7	-	-
50	Tin-110	D, all compounds except those given for W	4E+3	1E+4	5E-6	2E-8	5E-5	5E-4
		W, sulfides, oxides, hydroxides, halides, nitrates, and stannic phosphate	-	1E+4	5E-6	2E-8	-	-
50	Tin-111[2]	D, see ^{110}Sn	7E+4	2E+5	9E-5	3E-7	1E-3	1E-2
		W, see ^{110}Sn	-	3E+5	1E-4	4E-7	-	-

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50	Tin-113	D, see ^{110}Sn	2E+3 LLI wall (2E+3)	1E+3 -	5E-7 -	2E-9 -	- 3E-5	- 3E-4
		W, see ^{110}Sn	-	5E+2	2E-7	8E-10	-	-
50	Tin-117m	D, see ^{110}Sn	2E+3 LLI wall (2E+3)	1E+3 Bone surf (2E+3)	5E-7 -	- 3E-9	- 3E-5	- 3E-4
		W, see ^{110}Sn	-	1E+3	6E-7	2E-9	-	-
50	Tin-119m	D, see ^{110}Sn	3E+3 LLI wall (4E+3)	2E+3 -	1E-6 -	3E-9 -	- 6E-5	- 6E-4
		W, see ^{110}Sn	-	1E+3	4E-7	1E-9	-	-
50	Tin-121m	D, see ^{110}Sn	3E+3 LLI wall (4E+3)	9E+2 -	4E-7 -	1E-9 -	- 5E-5	- 5E-4
		W, see ^{110}Sn	-	5E+2	2E-7	8E-10	-	-
50	Tin-121	D, see ^{110}Sn	6E+3 LLI wall (6E+3)	2E+4 -	6E-6 -	2E-8 -	- 8E-5	- 8E-4
		W, see ^{110}Sn	-	1E+4	5E-6	2E-8	-	-
50	Tin-123m[2]	D, see ^{110}Sn W, see ^{110}Sn	5E+4 -	1E+5 1E+5	5E-5 6E-5	2E-7 2E-7	7E-4 -	7E-3 -
50	Tin-123	D, see ^{110}Sn	5E+2 LLI wall (6E+2)	6E+2 -	3E-7 -	9E-10 -	- 9E-6	- 9E-5
		W, see ^{110}Sn	-	2E+2	7E-8	2E-10	-	-
50	Tin-125	D, see ^{110}Sn	4E+2 LLI wall (5E+2)	9E+2 -	4E-7 -	1E-9 -	- 6E-6	- 6E-5
		W, see ^{110}Sn	-	4E+2	1E-7	5E-10	-	-
50	Tin-126	D, see ^{110}Sn W, see ^{110}Sn	3E+2 -	6E+1 7E+1	2E-8 3E-8	8E-11 9E-11	4E-6 -	4E-5 -
50	Tin-127	D, see ^{110}Sn W, see ^{110}Sn	7E+3 -	2E+4 2E+4	8E-6 8E-6	3E-8 3E-8	9E-5 -	9E-4 -
50	Tin-128[2]	D, see ^{110}Sn W, see ^{110}Sn	9E+3 -	3E+4 4E+4	1E-5 1E-5	4E-8 5E-8	1E-4 -	1E-3 -
51	Antimony-115[2]	D, all compounds except those given for W	8E+4	2E+5	1E-4	3E-7	1E-3	1E-2
		W, oxides, hydroxides, halides, sulfides, sulfates, and nitrates	-	3E+5	1E-4	4E-7	-	-
51	Antimony-116m[2]	D, see ^{115}Sb W, see ^{115}Sb	2E+4 -	7E+4 1E+5	3E-5 6E-5	1E-7 2E-7	3E-4 -	3E-3 -
51	Antimony-116[2]	D, see ^{115}Sb	7E+4 St. wall (9E+4)	3E+5 -	1E-4 -	4E-7 -	- 1E-3	- 1E-2
		W, see ^{115}Sb	-	3E+5	1E-4	5E-7	-	-
51	Antimony-117	D, see ^{115}Sb W, see ^{115}Sb	7E+4 -	2E+5 3E+5	9E-5 1E-4	3E-7 4E-7	9E-4 -	9E-3 -

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Atomic No.	Radionuclide	Class	Table 1 Occupational Values: Col. 1 Oral Ingestion ALI (μCi)	Col. 2 Inhalation ALI (μCi)	Col. 3 Inhalation DAC (μCi/ml)	Table 2 Effluent Concentrations: Col. 1 Air (μCi/ml)	Col. 2 Water (μCi/ml)	Table 3 Releases to Sewers: Monthly Average Concentration (μCi/ml)
51	Antimony-118m	D, see ^{115}Sb	6E+3	2E+4	8E-6	3E-8	7E-5	7E-4
		W, see ^{115}Sb	5E+3	2E+4	9E-6	3E-8	-	-
51	Antimony-119	D, see ^{115}Sb	2E+4	5E+4	2E-5	6E-8	2E-4	2E-3
		W, see ^{115}Sb	2E+4	3E+4	1E-5	4E-8	-	-
51	Antimony-120[2] (16 min)	D, see ^{115}Sb	1E+5	4E+5	2E-4	6E-7	-	-
			St. wall (2E+5)	-	-	-	2E-3	2E-2
		W, see ^{115}Sb	-	5E+5	2E-4	7E-7	-	-
51	Antimony-120 (5.76 d)	D, see ^{115}Sb	1E+3	2E+3	9E-7	3E-9	1E-5	1E-4
		W, see ^{115}Sb	9E+2	1E+3	5E-7	2E-9	-	-
51	Antimony-122	D, see ^{115}Sb	8E+2	2E+3	1E-6	3E-9	-	-
			LLI wall (8E+2)	-	-	-	1E-5	1E-4
		W, see ^{115}Sb	7E+2	1E+3	4E-7	2E-9	-	-
51	Antimony-124m[2]	D, see ^{115}Sb	3E+5	8E+5	4E-4	1E-6	3E-3	3E-2
		W, see ^{115}Sb	2E+5	6E+5	2E-4	8E-7	-	-
51	Antimony-124	D, see ^{115}Sb	6E+2	9E+2	4E-7	1E-9	7E-6	7E-5
		W, see ^{115}Sb	5E+2	2E+2	1E-7	3E-10	-	-
51	Antimony-125	D, see ^{115}Sb	2E+3	2E+3	1E-6	3E-9	3E-5	3E-4
		W, see ^{115}Sb	-	5E+2	2E-7	7E-10	-	-
51	Antimony-126m[2]	D, see ^{115}Sb	5E+4	2E+5	8E-5	3E-7	-	-
			St. wall (7E+4)	-	-	-	9E-4	9E-3
		W, see ^{115}Sb	-	2E+5	8E-5	3E-7	-	-
51	Antimony-126	D, see ^{115}Sb	6E+2	1E+3	5E-7	2E-9	7E-6	7E-5
		W, see ^{115}Sb	5E+2	5E+2	2E-7	7E-10	-	-
51	Antimony-127	D, see ^{115}Sb	8E+2	2E+3	9E-7	3E-9	-	-
			LLI wall (8E+2)	-	-	-	1E-5	1E-4
		W, see ^{115}Sb	7E+2	9E+2	4E-7	1E-9	-	-
51	Antimony-128[2] (10.4 min)	D, see ^{115}Sb	8E+4	4E+5	2E-4	5E-7	-	-
			St. wall (1E+5)	-	-	-	1E-3	1E-2
		W, see ^{115}Sb	-	4E+5	2E-4	6E-7	-	-
51	Antimony-128 (9.01 h)	D, see ^{115}Sb	1E+3	4E+3	2E-6	6E-9	2E-5	2E-4
		W, see ^{115}Sb	-	3E+3	1E-6	5E-9	-	-
51	Antimony-129	D, see ^{115}Sb	3E+3	9E+3	4E-6	1E-8	4E-5	4E-4
		W, see ^{115}Sb	-	9E+3	4E-6	1E-8	-	-
51	Antimony-130[2]	D, see ^{115}Sb	2E+4	6E+4	3E-5	9E-8	3E-4	3E-3
		W, see ^{115}Sb	-	8E+4	3E-5	1E-7	-	-
51	Antimony-131[2]	D, see ^{115}Sb	1E+4	2E+4	1E-5	-	-	-
			Thyroid (2E+4)	Thyroid (4E+4)	-	6E-8	2E-4	2E-3
		W, see ^{115}Sb	-	2E+4	1E-5		-	-
				Thyroid (4E+4)	-	6E-8	-	-

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Atomic No.	Radionuclide	Class	Table 1 Occupational Values: Col. 1 Oral Ingestion ALI (μCi)	Col. 2 Inhalation ALI (μCi)	Col. 3 Inhalation DAC (μCi/ml)	Table 2 Effluent Concentrations: Col. 1 Air (μCi/ml)	Col. 2 Water (μCi/ml)	Table 3 Releases to Sewers: Monthly Average Concentration (μCi/ml)
52	Tellurium-116	D, all compounds except those given for W	8E+3	2E+4	9E-6	3E-8	1E-4	1E-3
		W, oxides, hydroxides, and nitrates	-	3E+4	1E-5	4E-8	-	-
52	Tellurium-121m	D, see ^{116}Te	5E+2	2E+2	8E-8	-	-	-
			Bone surf (7E+2)	Bone surf (4E+2)	-	5E-10	1E-5	1E-4
		W, see ^{116}Te	-	4E+2	2E-7	6E-10	-	-
52	Tellurium-121	D, see ^{116}Te	3E+3	4E+3	2E-6	6E-9	4E-5	4E-4
		W, see ^{116}Te	-	3E+3	1E-6	4E-9	-	-
52	Tellurium-123m	D, see ^{116}Te	6E+2	2E+2	9E-8	-	-	-
			Bone surf (1E+3)	Bone surf (5E+2)	-	8E-10	1E-5	1E-4
		W, see ^{116}Te	-	5E+2	2E-7	8E-10	-	-
52	Tellurium-123	D, see ^{116}Te	5E+2	2E+2	8E-8	-	-	-
			Bone surf (1E+3)	Bone surf (5E+2)	-	7E-10	2E-5	2E-4
		W, see ^{116}Te	-	4E+2	2E-7	-	-	-
			-	Bone surf (1E+3)	-	2E-9	-	-
52	Tellurium-125m	D, see ^{116}Te	1E+3	4E+2	2E-7	-	-	-
			Bone surf (1E+3)	Bone surf (1E+3)	-	1E-9	2E-5	2E-4
		W, see ^{116}Te	-	7E+2	3E-7	1E-9	-	-
52	Tellurium-127m	D, see ^{116}Te	6E+2	3E+2	1E-7	-	9E-6	9E-5
			-	Bone surf (4E+2)	-	6E-10	-	-
		W, see ^{116}Te	-	3E+2	1E-7	4E-10	-	-
52	Tellurium-127	D, see ^{116}Te	7E+3	2E+4	9E-6	3E-8	1E-4	1E-3
		W, see ^{116}Te	-	2E+4	7E-6	2E-8	-	-
52	Tellurium-129m	D, see ^{116}Te	5E+2	6E+2	3E-7	9E-10	7E-6	7E-5
		W, see ^{116}Te	-	2E+2	1E-7	3E-10	-	-
52	Tellurium-129[2]	D, see ^{116}Te	3E+4	6E+4	3E-5	9E-8	4E-4	4E-3
		W, see ^{116}Te	-	7E+4	3E-5	1E-7	-	-
52	Tellurium-131m	D, see ^{116}Te	3E+2	4E+2	2E-7	-	-	-
			Thyroid (6E+2)	Thyroid (1E+3)	-	2E-9	8E-6	8E-5
		W, see ^{116}Te	-	4E+2	2E-7	-	-	-
			-	Thyroid (9E+2)	-	1E-9	-	-
52	Tellurium-131[2]	D, see ^{116}Te	3E+3	5E+3	2E-6	-	-	-
			Thyroid (6E+3)	Thyroid (1E+4)	-	2E-8	8E-5	8E-4
		W, see ^{116}Te	-	5E+3	2E-6	-	-	-
			-	Thyroid (1E+4)	-	2E-8	-	-

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Atomic No.	Radionuclide	Class	Table 1 Occupational Values Col. 1 Oral Ingestion ALI (µCi)	Col. 2 Inhalation ALI (µCi)	Col. 3 Inhalation DAC (µCi/ml)	Table 2 Effluent Concentrations Col. 1 Air (µCi/ml)	Col. 2 Water (µCi/ml)	Table 3 Releases to Sewers Monthly Average Concentration (µCi/ml)
52	Tellurium-132	D, see ^{116}Te	2E+2 Thyroid (7E+2)	2E+2 Thyroid (8E+2)	9E-8 -	- 1E-9	- 9E-6	- 9E-5
		W, see ^{116}Te	- -	2E+2 Thyroid (6E+2)	9E-8 -	- 9E-10	- -	- -
52	Tellurium-133m[2]	D, see ^{116}Te	3E+3 Thyroid (6E+3)	5E+3 Thyroid (1E+4)	2E-6 -	- 2E-8	- 9E-5	- 9E-4
		W, see ^{116}Te	- -	5E+3 Thyroid (1E+4)	2E-6 -	- 2E-8	- -	- -
52	Tellurium-133[2]	D, see ^{116}Te	1E+4 Thyroid (3E+4)	2E+4 Thyroid (6E+4)	9E-6 -	- 8E-8	- 4E-4	- 4E-3
		W, see ^{116}Te	- -	2E+4 Thyroid (6E+4)	9E-6 -	- 8E-8	- -	- -
52	Tellurium-134[2]	D, see ^{116}Te	2E+4 Thyroid (2E+4)	2E+4 Thyroid (5E+4)	1E-5 -	- 7E-8	- 3E-4	- 3E-3
		W, see ^{116}Te	- -	2E+4 Thyroid (5E+4)	1E-5 -	- 7E-8	- -	- -
53	Iodine-120m[2]	D, all compounds	1E+4 Thyroid (1E+4)	2E+4 -	9E-6 -	3E-8 -	- 2E-4	- 2E-3
53	Iodine-120[2]	D, all compounds	4E+3 Thyroid (8E+3)	9E+3 Thyroid (1E+4)	4E-6 -	- 2E-8	- 1E-4	- 1E-3
53	Iodine-121	D, all compounds	1E+4 Thyroid (3E+4)	2E+4 Thyroid (5E+4)	8E-6 -	- 7E-8	- 4E-4	- 4E-3
53	Iodine-123	D, all compounds	3E+3 Thyroid (1E+4)	6E+3 Thyroid (2E+4)	3E-6 -	- 2E-8	- 1E-4	- 1E-3
53	Iodine-124	D, all compounds	5E+1 Thyroid (2E+2)	8E+1 Thyroid (3E+2)	3E-8 -	- 4E-10	- 2E-6	- 2E-5
53	Iodine-125	D, all compounds	4E+1 Thyroid (1E+2)	6E+1 Thyroid (2E+2)	3E-8 -	- 3E-10	- 2E-6	- 2E-5
53	Iodine-126	D, all compounds	2E+1 Thyroid (7E+1)	4E+1 Thyroid (1E+2)	1E-8 -	- 2E-10	- 1E-6	- 1E-5
53	Iodine-128[2]	D, all compounds	4E+4 St. wall (6E+4)	1E+5 -	5E-5 -	2E-7 -	- 8E-4	- 8E-3
53	Iodine-129	D, all compounds	5E+0 Thyroid (2E+1)	9E+0 Thyroid (3E+1)	4E-9 -	- 4E-11	- 2E-7	- 2E-6

Atomic No.	Radionuclide	Class	Table 1 Occupational Values: Col. 1 Oral Ingestion ALI (µCi)	Col. 2 Inhalation ALI (µCi)	Col. 3 Inhalation DAC (µCi/ml)	Table 2 Effluent Concentrations: Col. 1 Air (µCi/ml)	Col. 2 Water (µCi/ml)	Table 3 Releases to Sewers: Monthly Average Concentration (µCi/ml)
53	Iodine-130	D, all compounds	4E+2 Thyroid (1E+3)	7E+2 Thyroid (2E+3)	3E-7 -	- 3E-9	- 2E-5	- 2E-4
53	Iodine-131	D, all compounds	3E+1 Thyroid (9E+1)	5E+1 Thyroid (2E+2)	2E-8 -	- 2E-10	- 1E-6	- 1E-5
53	Iodine-132m[2]	D, all compounds	4E+3 Thyroid (1E+4)	8E+3 Thyroid (2E+4)	4E-6 -	- 3E-8	- 1E-4	- 1E-3
53	Iodine-132	D, all compounds	4E+3 Thyroid (9E+3)	8E+3 Thyroid (1E+4)	3E-6 -	- 2E-8	- 1E-4	- 1E-3
53	Iodine-133	D, all compounds	1E+2 Thyroid (5E+2)	3E+2 Thyroid (9E+2)	1E-7 -	- 1E-9	- 7E-6	- 7E-5
53	Iodine-134[2]	D, all compounds	2E+4 Thyroid (3E+4)	5E+4 -	2E-5 -	6E-8 -	- 4E-4	- 4E-3
53	Iodine-135	D, all compounds	8E+2 Thyroid (3E+3)	2E+3 Thyroid (4E+3)	7E-7 -	- 6E-9	- 3E-5	- 3E-4
54	Xenon-120[2]	Submersion[1]	-	-	1E-5	4E-8	-	-
54	Xenon-121[2]	Submersion[1]	-	-	2E-6	1E-8	-	-
54	Xenon-122	Submersion[1]	-	-	7E-5	3E-7	-	-
54	Xenon-123	Submersion[1]	-	-	6E-6	3E-8	-	-
54	Xenon-125	Submersion[1]	-	-	2E-5	7E-8	-	-
54	Xenon-127	Submersion[1]	-	-	1E-5	6E-8	-	-
54	Xenon-129m	Submersion[1]	-	-	2E-4	9E-7	-	-
54	Xenon-131m	Submersion[1]	-	-	4E-4	2E-6	-	-
54	Xenon-133m	Submersion[1]	-	-	1E-4	6E-7	-	-
54	Xenon-133	Submersion[1]	-	-	1E-4	5E-7	-	-
54	Xenon-135m[2]	Submersion[1]	-	-	9E-6	4E-8	-	-
54	Xenon-135	Submersion[1]	-	-	1E-5	7E-8	-	-
54	Xenon-138[2]	Submersion[1]	-	-	4E-6	2E-8	-	-
55	Cesium-125[2]	D, all compounds	5E+4 St. wall (9E+4)	1E+5 -	6E-5 -	2E-7 -	- 1E-3	- 1E-2
55	Cesium-127	D, all compounds	6E+4	9E+4	4E-5	1E-7	9E-4	9E-3

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Atomic No.	Radionuclide	Class	Table 1 Occupational Values Col. 1 Oral Ingestion ALI (μCi)	Col. 2 Inhalation ALI (μCi)	Col. 3 Inhalation DAC (μCi/ml)	Table 2 Effluent Concentrations Col. 1 Air (μCi/ml)	Col. 2 Water (μCi/ml)	Table 3 Releases to Sewers Monthly Average Concentration (μCi/ml)
55	Cesium-129	D, all compounds	2E+4	3E+4	1E-5	5E-8	3E-4	3E-3
55	Cesium-130[2]	D, all compounds	6E+4	2E+5	8E-5	3E-7	-	-
			St. wall (1E+5)	-	-	-	1E-3	1E-2
55	Cesium-131	D, all compounds	2E+4	3E+4	1E-5	4E-8	3E-4	3E-3
55	Cesium-132	D, all compounds	3E+3	4E+3	2E-6	6E-9	4E-5	4E-4
55	Cesium-134m	D, all compounds	1E+5	1E+5	6E-5	2E-7	-	-
			St. wall (1E+5)	-	-	-	2E-3	2E-2
55	Cesium-134	D, all compounds	7E+1	1E+2	4E-8	2E-10	9E-7	9E-6
55	Cesium-135m[2]	D, all compounds	1E+5	2E+5	8E-5	3E-7	1E-3	1E-2
55	Cesium-135	D, all compounds	7E+2	1E+3	5E-7	2E-9	1E-5	1E-4
55	Cesium-136	D, all compounds	4E+2	7E+2	3E-7	9E-10	6E-6	6E-5
55	Cesium-137	D, all compounds	1E+2	2E+2	6E-8	2E-10	1E-6	1E-5
55	Cesium-138[2]	D, all compounds	2E+4	6E+4	2E-5	8E-8	-	-
			St. wall (3E+4)	-	-	-	4E-4	4E-3
56	Barium-126[2]	D, all compounds	6E+3	2E+4	6E-6	2E-8	8E-5	8E-4
56	Barium-128	D, all compounds	5E+2	2E+3	7E-7	2E-9	7E-6	7E-5
56	Barium-131m[2]	D, all compounds	4E+5	1E+6	6E-4	2E-6	-	-
			St. wall (5E+5)	-	-	-	7E-3	7E-2
56	Barium-131	D, all compounds	3E+3	8E+3	3E-6	1E-8	4E-5	4E-4
56	Barium-133m	D, all compounds	2E+3	9E+3	4E-6	1E-8	-	-
			LLI wall (3E+3)	-	-	-	4E-5	4E-4
56	Barium-133	D, all compounds	2E+3	7E+2	3E-7	9E-10	2E-5	2E-4
56	Barium-135m	D, all compounds	3E+3	1E+4	5E-6	2E-8	4E-5	4E-4
56	Barium-139[2]	D, all compounds	1E+4	3E+4	1E-5	4E-8	2E-4	2E-3
56	Barium-140	D, all compounds	5E+2	1E+3	6E-7	2E-9	-	-
			LLI wall (6E+2)	-	-	-	8E-6	8E-5
56	Barium-141[2]	D, all compounds	2E+4	7E+4	3E-5	1E-7	3E-4	3E-3
56	Barium-142[2]	D, all compounds	5E+4	1E+5	6E-5	2E-7	7E-4	7E-3
57	Lanthanum-131[2]	D, all compounds except those given for W	5E+4	1E+5	5E-5	2E-7	6E-4	6E-3
		W, oxides and hydroxides	-	2E+5	7E-5	2E-7	-	-

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Atomic No.	Radionuclide	Class	Table 1 Occupational Values: Col 1 Oral Ingestion ALI (μCi)	Table 1: Col. 2 Inhalation ALI (μCi)	Table 1: Col. 3 Inhalation DAC (μCi/ml)	Table 2 Effluent Concentrations: Col. 1 Air (μCi/ml)	Table 2: Col. 2 Water (μCi/ml)	Table 3 Releases to Sewers: Monthly Average Concentration (μCi/ml)
57	Lanthanum-132	D, see ^{131}La	3E+3	1E+4	4E-6	1E-8	4E-5	4E-4
		W, see ^{131}La	-	1E+4	5E-6	2E-8	-	-
57	Lanthanum-135	D, see ^{131}La	4E+4	1E+5	4E-5	1E-7	5E-4	5E-3
		W, see ^{131}La	-	9E+4	4E-5	1E-7	-	-
57	Lanthanum-137	D, see ^{131}La	1E+4	6E+1	3E-8	-	2E-4	2E-3
			-	Liver (7E+1)	-	1E-10	-	-
		W, see ^{131}La	-	3E+2	1E-7	-	-	-
			-	Liver (3E+2)	-	4E-10	-	-
57	Lanthanum-138	D, see ^{131}La	9E+2	4E+0	1E-9	5E-12	1E-5	1E-4
		W, see ^{131}La	-	1E+1	6E-9	2E-11	-	-
57	Lanthanum-140	D, see ^{131}La	6E+2	1E+3	6E-7	2E-9	9E-6	9E-5
		W, see ^{131}La	-	1E+3	5E-7	2E-9	-	-
57	Lanthanum-141	D, see ^{131}La	4E+3	9E+3	4E-6	1E-8	5E-5	5E-4
		W, see ^{131}La	-	1E+4	5E-6	2E-8	-	-
57	Lanthanum-142[2]	D, see ^{131}La	8E+3	2E+4	9E-6	3E-8	1E-4	1E-3
		W, see ^{131}La	-	3E+4	1E-5	5E-8	-	-
57	Lanthanum-143[2]	D, see ^{131}La	4E+4	1E+5	4E-5	1E-7	-	-
			St. wall (4E+4)	-	-	-	5E-4	5E-3
		W, see ^{131}La	-	9E+4	4E-5	1E-7	-	-
58	Cerium-134	W, all compounds except those given for Y	5E+2	7E+2	3E-7	1E-9	-	-
			LLI wall (6E+2)	-	-	-	8E-6	8E-5
		Y, oxides, hydroxides, and fluorides	-	7E+2	3E-7	9E-10	-	-
58	Cerium-135	W, see ^{134}Ce	2E+3	4E+3	2E-6	5E-9	2E-5	2E-4
		Y, see ^{134}Ce	-	4E+3	1E-6	5E-9	-	-
58	Cerium-137m	W, see ^{134}Ce	2E+3	4E+3	2E-6	6E-9	-	-
			LLI wall (2E+3)	-	-	-	3E-5	3E-4
		Y, see ^{134}Ce	-	4E+3	2E-6	5E-9	-	-
58	Cerium-137	W, see ^{134}Ce	5E+4	1E+5	6E-5	2E-7	7E-4	7E-3
		Y, see ^{134}Ce	-	1E+5	5E-5	2E-7	-	-
58	Cerium-139	W, see ^{134}Ce	5E+3	8E+2	3E-7	1E-9	7E-5	7E-4
		Y, see ^{134}Ce	-	7E+2	3E-7	9E-10	-	-
58	Cerium-141	W, see ^{134}Ce	2E+3	7E+2	3E-7	1E-9	-	-
			LLI wall (2E+3)	-	-	-	3E-5	3E-4
		Y, see ^{134}Ce	-	6E+2	2E-7	8E-10	-	-
58	Cerium-143	W, see ^{134}Ce	1E+3	2E+3	8E-7	3E-9	-	-
			LLI wall (1E+3)	-	-	-	2E-5	2E-4
		Y, see ^{134}Ce	-	2E+3	7E-7	2E-9	-	-

Atomic No.	Radionuclide	Class	Table 1 Occupational Values: Col. 1 Oral Ingestion ALI (μCi)	Col. 2 Inhalation ALI (μCi)	Col. 3 Inhalation DAC (μCi/ml)	Table 2 Effluent Concentrations: Col. 1 Air (μCi/ml)	Col. 2 Water (μCi/ml)	Table 3 Releases to Sewers: Monthly Average Concentration (μCi/ml)
58	Cerium-144	W, see ^{134}Ce	2E+2	3E+1	1E-8	4E-11	-	-
			LLI wall (3E+2)	-	-	-	3E-6	3E-5
		Y, see ^{134}Ce	-	1E+1	6E-9	2E-11	-	-
59	Praseodymium-136[2]	W, all compounds except those given for Y	5E+4	2E+5	1E-4	3E-7	-	-
			St. wall (7E+4)	-	-	-	1E-3	1E-2
		Y, oxides, hydroxides, carbides, and fluorides	-	2E+5	9E-5	3E-7	-	-
59	Praseodymium-137[2]	W, see ^{136}Pr	4E+4	2E+5	6E-5	2E-7	5E-4	5E-3
		Y, see ^{136}Pr	-	1E+5	6E-5	2E-7	-	-
59	Praseocymium-138m	W, see ^{136}Pr	1E+4	5E+4	2E-5	8E-8	1E-4	1E-3
		Y, see ^{136}Pr	-	4E+4	2E-5	6E-8	-	-
59	Praseodymium-139	W, see ^{136}Pr	4E+4	1E+5	5E-5	2E-7	6E-4	6E-3
		Y, see ^{136}Pr	-	1E+5	5E-5	2E-7	-	-
59	Praseodymium-142m[2]	W, see ^{136}Pr	8E+4	2E+5	7E-5	2E-7	1E-3	1E-2
		Y, see ^{136}Pr	-	1E+5	6E-5	2E-7	-	-
59	Praseodymium-142	W, see ^{136}Pr	1E+3	2E+3	9E-7	3E-9	1E-5	1E-4
		Y, see ^{136}Pr	-	2E+3	8E-7	3E-9	-	-
59	Praseodymium-143	W, see ^{136}Pr	9E+2	8E+2	3E-7	1E-9	-	-
			LLI wall (1E+3)	-	-	-	2E-5	2E-4
		Y, see ^{136}Pr	-	7E+2	3E-7	9E-10	-	-
59	Praseodymium-144[2]	W, see ^{136}Pr	3E+4	1E+5	5E-5	2E-7	-	-
			St. wall (4E+4)	-	-	-	6E-4	6E-3
		Y, see ^{136}Pr	-	1E+5	5E-5	2E-7	-	-
59	Praseodymium-145	W, see ^{136}Pr	3E+3	9E+3	4E-6	1E-8	4E-5	4E-4
		Y, see ^{136}Pr	-	8E+3	3E-6	1E-8	-	-
59	Praseodymium-147[2]	W, see ^{136}Pr	5E+4	2E+5	8E-5	3E-7	-	-
			St. wall (8E+4)	-	-	-	1E-3	1E-2
		Y, see ^{136}Pr	-	2E+5	8E-5	3E-7	-	-
60	Neodymium-136[2]	W, all compounds except those given for Y	1E+4	6E+4	2E-5	8E-8	2E-4	2E-3
		Y, oxides, hydroxides, carbides, and fluorides	-	5E+4	2E-5	8E-8	-	-
60	Neodymium-138	W, see ^{136}Nd	2E+3	6E+3	3E-6	9E-9	3E-5	3E-4
		Y, see ^{136}Nd	-	5E+3	2E-6	7E-9	-	-
60	Neodymium-139m	W, see ^{136}Nd	5E+3	2E+4	7E-6	2E-8	7E-5	7E-4
		Y, see ^{136}Nd	-	1E+4	6E-6	2E-8	-	-

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Atomic No.	Radionuclide	Class	Table 1 Occupational Values Col. 1 Oral Ingestion ALI (μCi)	Col. 2 Inhalation ALI (μCi)	Col. 3 Inhalation DAC (μCi/ml)	Table 2 Effluent Concentrations Col. 1 Air (μCi/ml)	Col. 2 Water (μCi/ml)	Table 3 Releases to Sewers Monthly Average Concentration (μCi/ml)
60	Neodymium-139[2]	W, see ^{136}Nd	9E+4	3E+5	1E-4	5E-7	1E-3	1E-2
		Y, see ^{136}Nd	-	3E+5	1E-4	4E-7	-	-
60	Neodymium-141	W, see ^{136}Nd	2E+5	7E+5	3E-4	1E-6	2E-3	2E-2
		Y, see ^{136}Nd	-	6E+5	3E-4	9E-7	-	-
60	Neodymium-147	W, see ^{136}Nd	1E+3	9E+2	4E-7	1E-9	-	-
			LLI wall (1E+3)	-	-	-	2E-5	2E-4
		Y, see ^{136}Nd	-	8E+2	4E-7	1E-9	-	-
60	Neodymium-149[2]	W, see ^{136}Nd	1E+4	3E+4	1E-5	4E-8	1E-4	1E-3
		Y, see ^{136}Nd	-	2E+4	1E-5	3E-8	-	-
60	Neodymium-151[2]	W, see ^{136}Nd	7E+4	2E+5	8E-5	3E-7	9E-4	9E-3
		Y, see ^{136}Nd	-	2E+5	8E-5	3E-7	-	-
61	Promethium-141[2]	W, all compounds except those given for Y	5E+4	2E+5	8E-5	3E-7	-	-
			St. wall (6E+4)	-	-	-	8E-4	8E-3
		Y, oxides, hydroxides, carbides, and fluorides	-	2E+5	7E-5	2E-7	-	-
61	Promethium-143	W, see ^{141}Pm	5E+3	6E+2	2E-7	8E-10	7E-5	7E-4
		Y, see ^{141}Pm	-	7E+2	3E-7	1E-9	-	-
61	Promethium-144	W, see ^{141}Pm	1E+3	1E+2	5E-8	2E-10	2E-5	2E-4
		Y, see ^{141}Pm	-	1E+2	5E-8	2E-10	-	-
61	Promethium-145	W, see ^{141}Pm	1E+4	2E+2	7E-8	-	1E-4	1E-3
			-	Bone surf (2E+2)	-	3E-10	-	-
		Y, see ^{141}Pm	-	2E+2	8E-8	3E-10	-	-
61	Promethium-146	W, see ^{141}Pm	2E+3	5E+1	2E-8	7E-11	2E-5	2E-4
		Y, see ^{141}Pm	-	4E+1	2E-8	6E-11	-	-
61	Promethium-147	W, see ^{141}Pm	4E+3	1E+2	5E-8	-	-	-
			LLI wall (5E+3)	Bone surf (2E+2)	-	3E-10	7E-5	7E-4
		Y, see ^{141}Pm	-	1E+2	6E-8	2E-10	-	-
61	Promethium-148m	W, see ^{141}Pm	7E+2	3E+2	1E-7	4E-10	1E-5	1E-4
		Y, see ^{141}Pm	-	3E+2	1E-7	5E-10	-	-
61	Promethium-148	W, see ^{141}Pm	4E+2	5E+2	2E-7	8E-10	-	-
			LLI wall (5E+2)	-	-	-	7E-6	7E-5
		Y, see ^{141}Pm	-	5E+2	2E-7	7E-10	-	-
61	Promethium-149	W, see ^{141}Pm	1E+3	2E+3	8E-7	3E-9	-	-
			LLI wall (1E+3)	-	-	-	2E-5	2E-4
		Y, see ^{141}Pm	-	2E+3	8E-7	2E-9	-	-
61	Promethium-150	W, see ^{141}Pm	5E+3	2E+4	8E-6	3E-8	7E-5	7E-4
		Y, see ^{141}Pm	-	2E+4	7E-6	2E-8	-	-
61	Promethium-151	W, see ^{141}Pm	2E+3	4E+3	1E-6	5E-9	2E-5	2E-4
		Y, see ^{141}Pm	-	3E+3	1E-6	4E-9	-	-

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Atomic No.	Radionuclide	Class	Table 1 Occupational Values: Col. 1 Oral Ingestion ALI (µCi)	Col. 2 Inhalation ALI (µCi)	Col. 3 Inhalation DAC (µCi/ml)	Table 2 Effluent Concentrations: Col. 1 Air (µCi/ml)	Col. 2 Water (µCi/ml)	Table 3 Releases to Sewers: Monthly Average Concentration (µCi/ml)
62	Samarium-141m[2]	W, all compounds	3E+4	1E+5	4E-5	1E-7	4E-4	4E-3
62	Samarium-141[2]	W, all compounds	5E+4	2E+5	8E-5	2E-7	-	-
			St. wall (6E+4)	-	-	-	8E-4	8E-3
62	Samarium-142[2]	W, all compounds	8E+3	3E+4	1E-5	4E-8	1E-4	1E-3
62	Samarium-145	W, all compounds	6E+3	5E+2	2E-7	7E-10	8E-5	8E-4
62	Samarium-146	W, all compounds	1E+1	4E-2	1E-11	-	-	-
			Bone surf (3E+1)	Bone surf (6E-2)	-	9E-14	3E-7	3E-6
62	Samarium-147	W, all compounds	2E+1	4E-2	2E-11	-	-	-
			Bone surf (3E+1)	Bone surf (7E-2)	-	1E-13	4E-7	4E-6
62	Samarium-151	W, all compounds	1E+4	1E+2	4E-8	-	-	-
			LLI wall (1E+4)	Bone surf (2E+2)	-	2E-10	2E-4	2E-3
62	Samarium-153	W, all compounds	2E+3	3E+3	1E-6	4E-9	-	-
			LLI wall (2E+3)	-	-	-	3E-5	3E-4
62	Samarium-155[2]	W, all compounds	6E+4	2E+5	9E-5	3E-7	-	-
			St. wall (8E+4)	-	-	-	1E-3	1E-2
62	Samarium-156	W, all compounds	5E+3	9E+3	4E-6	1E-8	7E-5	7E-4
63	Europium-145	W, all compounds	2E+3	2E+3	8E-7	3E-9	2E-5	2E-4
63	Europium-146	W, all compounds	1E+3	1E+3	5E-7	2E-9	1E-5	1E-4
63	Europium-147	W, all compounds	3E+3	2E+3	7E-7	2E-9	4E-5	4E-4
63	Europium-148	W, all compounds	1E+3	4E+2	1E-7	5E-10	1E-5	1E-4
63	Europium-149	W, all compounds	1E+4	3E+3	1E-6	4E-9	2E-4	2E-3
63	Europium-150 (12.62 h)	W, all compounds	3E+3	8E+3	4E-6	1E-8	4E-5	4E-4
63	Europium-150 (34.2 y)	W, all compounds	8E+2	2E+1	8E-9	3E-11	1E-5	1E-4
63	Europium-152m	W, all compounds	3E+3	6E+3	3E-6	9E-9	4E-5	4E-4
63	Europium-152	W, all compounds	8E+2	2E+1	1E-8	3E-11	1E-5	1E-4
63	Europium-154	W, all compounds	5E+2	2E+1	8E-9	3E-11	7E-6	7E-5
63	Europium-155	W, all compounds	4E+3	9E+1	4E-8	-	5E-5	5E-4
				Bone surf (1E+2)	-	2E-10	-	-
63	Europium-156	W, all compounds	6E+2	5E+2	2E-7	6E-10	8E-6	8E-5

Atomic No.	Radionuclide	Class	Table 1 Occupational Values: Col. 1 Oral Ingestion ALI (μCi)	Col. 2 Inhalation ALI (μCi)	Col. 3 Inhalation DAC (μCi/ml)	Table 2 Effluent Concentrations: Col. 1 Air (μCi/ml)	Col. 2 Water (μCi/ml)	Table 3 Releases to Sewers: Monthly Average Concentration (μCi/ml)
63	Europium-157	W, all compounds	2E+3	5E+3	2E-6	7E-9	3E-5	3E-4
63	Europium-158[2]	W, all compounds	2E+4	6E+4	2E-5	8E-8	3E-4	3E-3
64	Gadolinium-145[2]	D, all compounds except those given for W	5E+4	2E+5	6E-5	2E-7	-	-
			St. wall (5E+4)	-	-	-	6E-4	6E-3
		W, oxides, hydroxides, and fluorides	-	2E+5	7E-5	2E-7	-	-
64	Gadolinium-146	D, see ^{145}Gd	1E+3	1E+2	5E-8	2E-10	2E-5	2E-4
		W, see ^{145}Gd	-	3E+2	1E-7	4E-10	-	-
64	Gadolinium-147	D, see ^{145}Gd	2E+3	4E+3	2E-6	6E-9	3E-5	3E-4
		W, see ^{145}Gd	-	4E+3	1E-6	5E-9	-	-
64	Gadolinium-148	D, see ^{145}Gd	1E+1	8E-3	3E-12	-	-	-
			Bone surf (2E+1)	Bone surf (2E-2)	-	2E-14	3E-7	3E-6
		W, see ^{145}Gd	-	3E-2	1E-11	-	-	-
			-	Bone surf (6E-2)	-	8E-14	-	-
64	Gadolinium-149	D, see ^{145}Gd	3E+3	2E+3	9E-7	3E-9	4E-5	4E-4
		W, see ^{145}Gd	-	2E+3	1E-6	3E-9	-	-
64	Gadolinium-151	D, see ^{145}Gd	6E+3	4E+2	2E-7	-	9E-5	9E-4
			-	Bone surf (6E+2)	-	9E-10	-	-
		W, see ^{145}Gd	-	1E+3	5E-7	2E-9	-	-
64	Gadolinium-152	D, see ^{145}Gd	2E+1	1E-2	4E-12	-	-	-
			Bone surf (3E+1)	Bone surf (2E-2)	-	3E-14	4E-7	4E-6
		W, see ^{145}Gd	-	4E-2	2E-11	-	-	-
			-	Bone surf (8E-2)	-	1E-13	-	-
64	Gadolinium-153	D, see ^{145}Gd	5E+3	1E+2	6E-8	-	6E-5	6E-4
			-	Bone surf (2E+2)	-	3E-10	-	-
		W, see ^{145}Gd	-	6E+2	2E-7	8E-10	-	-
64	Gadolinium-159	D, see ^{145}Gd	3E+3	8E+3	3E-6	1E-8	4E-5	4E-4
		W, see ^{145}Gd	-	6E+3	2E-6	8E-9	-	-
65	Terbium-147[2]	W, all compounds	9E+3	3E+4	1E-5	5E-8	1E-4	1E-3
65	Terbium-149	W, all compounds	5E+3	7E+2	3E-7	1E-9	7E-5	7E-4
65	Terbium-150	W, all compounds	5E+3	2E+4	9E-6	3E-8	7E-5	7E-4
65	Terbium-151	W, all compounds	4E+3	9E+3	4E-6	1E-8	5E-5	5E-4
65	Terbium-153	W, all compounds	5E+3	7E+3	3E-6	1E-8	7E-5	7E-4
65	Terbium-154	W, all compounds	2E+3	4E+3	2E-6	6E-9	2E-5	2E-4
65	Terbium-155	W, all compounds	6E+3	8E+3	3E-6	1E-8	8E-5	8E-4
65	Terbium-156m (5.0 h)	W, all compounds	2E+4	3E+4	1E-5	4E-8	2E-4	2E-3

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Atomic No.	Radionuclide	Class	Table 1 Occupational Values Col. 1 Oral Ingestion ALI (µCi)	Col. 2 Inhalation ALI (µCi)	Col. 3 Inhalation DAC (µCi/ml)	Table 2 Effluent Concentrations Col. 1 Air (µCi/ml)	Col. 2 Water (µCi/ml)	Table 3 Releases to Sewers Monthly Average Concentration (µCi/ml)
65	Terbium-156m (24.4 h)	W, all compounds	7E+3	8E+3	3E-6	1E-8	1E-4	1E-3
65	Terbium-156	W, all compounds	1E+3	1E+3	6E-7	2E-9	1E-5	1E-4
65	Terbium-157	W, all compounds	5E+4	3E+2	1E-7	-	-	-
			LLI wall (5E+4)	Bone surf (6E+2)	-	8E-10	7E-4	7E-3
65	Terbium-158	W, all compounds	1E+3	2E+1	8E-9	3E-11	2E-5	2E-4
65	Terbium-160	W, all compounds	8E+2	2E+2	9E-8	3E-10	1E-5	1E-4
65	Terbium-161	W, all compounds	2E+3	2E+3	7E-7	2E-9	-	-
			LLI wall (2E+3)	-	-	-	3E-5	3E-4
66	Dysprosium-155	W, all compounds	9E+3	3E+4	1E-5	4E-8	1E-4	1E-3
66	Dysprosium-157	W, all compounds	2E+4	6E+4	3E-5	9E-8	3E-4	3E-3
66	Dysprosium-159	W, all compounds	1E+4	2E+3	1E-6	3E-9	2E-4	2E-3
66	Dysprosium-165	W, all compounds	1E+4	5E+4	2E-5	6E-8	2E-4	2E-3
66	Dysprosium-166	W, all compounds	6E+2	7E+2	3E-7	1E-9	-	-
			LLI wall (8E+2)	-	-	-	1E-5	1E-4
67	Holmium-155[2]	W, all compounds	4E+4	2E+5	6E-5	2E-7	6E-4	6E-3
67	Holmium-157[2]	W, all compounds	3E+5	1E+6	6E-4	2E-6	4E-3	4E-2
67	Holmium-159[2]	W, all compounds	2E+5	1E+6	4E-4	1E-6	3E-3	3E-2
67	Holmium-161	W, all compounds	1E+5	4E+5	2E-4	6E-7	1E-3	1E-2
67	Holmium-162m[2]	W, all compounds	5E+4	3E+5	1E-4	4E-7	7E-4	7E-3
67	Holmium-162[2]	W, all compounds	5E+5	2E+6	1E-3	3E-6	-	-
			St. wall (8E+5)	-	-	-	1E-2	1E-1
67	Holmium-164m[2]	W, all compounds	1E+5	3E+5	1E-4	4E-7	1E-3	1E-2
67	Holmium-164[2]	W, all compounds	2E+5	6E+5	3E-4	9E-7	-	-
			St. wall (2E+5)	-	-	-	3E-3	3E-2
67	Holmium-166m	W, all compounds	6E+2	7E+0	3E-9	9E-12	9E-6	9E-5
67	Holmium-166	W, all compounds	9E+2	2E+3	7E-7	2E-9	-	-
			LLI wall (9E+2)	-	-	-	1E-5	1E-4
67	Holmium-167	W, all compounds	2E+4	6E+4	2E-5	8E-8	2E-4	2E-3
68	Erbium-161	W, all compounds	2E+4	6E+4	3E-5	9E-8	2E-4	2E-3
68	Erbium-165	W, all compounds	6E+4	2E+5	8E-5	3E-7	9E-4	9E-3

Atomic No.	Radionuclide	Class	Table 1 Occupational Values: Col. 1 Oral Ingestion ALI (μCi)	Col. 2 Inhalation ALI (μCi)	Col. 3 Inhalation DAC (μCi/ml)	Table 2 Effluent Concentrations: Col. 1 Air (μCi/ml)	Col. 2 Water (μCi/ml)	Table 3 Releases to Sewers: Monthly Average Concentration (μCi/ml)
68	Erbium-169	W, all compounds	3E+3	3E+3	1E-6	4E-9	-	-
			LLI wall (4E+3)	-	-	-	5E-5	5E-4
68	Erbium-171	W, all compounds	4E+3	1E+4	4E-6	1E-8	5E-5	5E-4
68	Erbium-172	W, all compounds	1E+3	1E+3	6E-7	2E-9	-	-
			LLI wall (1E+3)	-	-	-	2E-5	2E-4
69	Thulium-162[2]	W, all compounds	7E+4	3E+5	1E-4	4E-7	-	-
			St. wall (7E+4)	-	-	-	1E-3	1E-2
69	Thulium-166	W, all compounds	4E+3	1E+4	6E-6	2E-8	6E-5	6E-4
69	Thulium-167	W, all compounds	2E+3	2E+3	8E-7	3E-9	-	-
			LLI wall (2E+3)	-	-	-	3E-5	3E-4
69	Thulium-170	W, all compounds	8E+2	2E+2	9E-8	3E-10	-	-
			LLI wall (1E+3)	-	-	-	1E-5	1E-4
69	Thulium-171	W, all compounds	1E+4	3E+2	1E-7	-	-	-
			LLI wall (1E+4)	Bone surf (6E+2)	-	8E-10	2E-4	2E-3
69	Thulium-172	W, all compounds	7E+2	1E+3	5E-7	2E-9	-	-
			LLI wall (8E+2)	-	-	-	1E-5	1E-4
69	Thulium-173	W, all compounds	4E+3	1E+4	5E-6	2E-8	6E-5	6E-4
69	Thulium-175[2]	W, all compounds	7E+4	3E+5	1E-4	4E-7	-	-
			St. wall (9E+4)	-	-	-	1E-3	1E-2
70	Ytterbium-162[2]	W, all compounds except those given for Y	7E+4	3E+5	1E-4	4E-7	1E-3	1E-2
		Y, oxides, hydroxides, and fluorides	-	3E+5	1E-4	4E-7	-	-
70	Ytterbium-166	W, see ^{162}Yb	1E+3	2E+3	8E-7	3E-9	2E-5	2E-4
		Y, see ^{162}Yb	-	2E+3	8E-7	3E-9	-	-
70	Ytterbium-167[2]	W, see ^{162}Yb	3E+5	8E+5	3E-4	1E-6	4E-3	4E-2
		Y, see ^{162}Yb	-	7E+5	3E-4	1E-6	-	-
70	Ytterbium-169	W, see ^{162}Yb	2E+3	8E+2	4E-7	1E-9	2E-5	2E-4
		Y, see ^{162}Yb	-	7E+2	3E-7	1E-9	-	-
70	Ytterbium-175	W, see ^{162}Yb	3E+3	4E+3	1E-6	5E-9	-	-
			LLI wall (3E+3)	-	-	-	4E-5	4E-4
		Y, see ^{162}Yb	-	3E+3	1E-6	5E-9	-	-
70	Ytterbium-177[2]	W, see ^{162}Yb	2E+4	5E+4	2E-5	7E-8	2E-4	2E-3
		Y, see ^{162}Yb	-	5E+4	2E-5	6E-8	-	-
70	Ytterbium-178[2]	W, see ^{162}Yb	1E+4	4E+4	2E-5	6E-8	2E-4	2E-3
		Y, see ^{162}Yb	-	4E+4	2E-5	5E-8	-	-

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Atomic No.	Radionuclide	Class	Table 1 Occupational Values: Col. 1 Oral Ingestion ALI (μCi)	Col. 2 Inhalation ALI (μCi)	Col. 3 Inhalation DAC (μCi/ml)	Table 2 Effluent Concentrations: Col. 1 Air (μCi/ml)	Col. 2 Water (μCi/ml)	Table 3 Releases to Sewers: Monthly Average Concentration (μCi/ml)
71	Lutetium-169	W, all compounds except those given for Y	3E+3	4E+3	2E-6	6E-9	3E-5	3E-4
		Y, oxides, hydroxides, and fluorides	-	4E+3	2E-6	6E-9	-	-
71	Lutetium-170	W, see ^{169}Lu	1E+3	2E+3	9E-7	3E-9	2E-5	2E-4
		Y, see ^{169}Lu	-	2E+3	9E-7	3E-9	-	-
71	Lutetium-171	W, see ^{169}Lu	2E+3	2E+3	8E-7	3E-9	3E-5	3E-4
		Y, see ^{169}Lu	-	2E+3	8E-7	3E-9	-	-
71	Lutetium-172	W, see ^{169}Lu	1E+3	1E+3	5E-7	2E-9	1E-5	1E-4
		Y, see ^{169}Lu	-	1E+3	5E-7	2E-9	-	-
71	Lutetium-173	W, see ^{169}Lu	5E+3	3E+2	1E-7	-	7E-5	7E-4
			-	Bone surf (5E+2)	-	6E-10	-	-
		Y, see ^{169}Lu	-	3E+2	1E-7	4E-10	-	-
71	Lutetium-174m	W, see ^{169}Lu	2E+3	2E+2	1E-7	-	-	-
			LLI wall (3E+3)	Bone surf (3E+2)	-	5E-10	4E-5	4E-4
		Y, see ^{169}Lu	-	2E+2	9E-8	3E-10	-	-
71	Lutetium-174	W, see ^{169}Lu	5E+3	1E+2	5E-8	-	7E-5	7E-4
			-	Bone surf (2E+2)	-	3E-10	-	-
		Y, see ^{169}Lu	-	2E+2	6E-8	2E-10	-	-
71	Lutetium-176m	W, see ^{169}Lu	8E+3	3E+4	1E-5	3E-8	1E-4	1E-3
		Y, see ^{169}Lu	-	2E+4	9E-6	3E-8	-	-
71	Lutetium-176	W, see ^{169}Lu	7E+2	5E+0	2E-9	-	1E-5	1E-4
			-	Bone surf (1E+1)	-	2E-11	-	-
		Y, see ^{169}Lu	-	8E+0	3E-9	1E-11	-	-
71	Lutetium-177m	W, see ^{169}Lu	7E+2	1E+2	5E-8	-	1E-5	1E-4
			-	Bone surf (1E+2)	-	2E-10	-	-
		Y, see ^{169}Lu	-	8E+1	3E-8	1E-10	-	-
71	Lutetium-177	W, see ^{169}Lu	2E+3	2E+3	9E-7	3E-9	-	-
			LLI wall (3E+3)	-	-	-	4E-5	4E-4
		Y, see ^{169}Lu	-	2E+3	9E-7	3E-9	-	-
71	Lutetium-178m[2]	W, see ^{169}Lu	5E+4	2E+5	8E-5	3E-7	-	-
			St. wall (6E+4)	-	-	-	8E-4	8E-3
		Y, see ^{169}Lu	-	2E+5	7E-5	2E-7	-	-
71	Lutetium-178[2]	W, see ^{169}Lu	4E+4	1E+5	5E-5	2E-7	-	-
			St. wall (4E+4)	-	-	-	6E-4	6E-3
		Y, see ^{169}Lu	-	1E+5	5E-5	2E-7	-	-
71	Lutetium-179	W, see ^{169}Lu	6E+3	2E+4	8E-6	3E-8	9E-5	9E-4
		Y, see ^{169}Lu	-	2E+4	6E-6	3E-8	-	-

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Atomic No.	Radionuclide	Class	Table 1 Occupational Values Col. 1 Oral Ingestion ALI (µCi)	Col. 2 Inhalation ALI (µCi)	Col. 3 Inhalation DAC (µCi/ml)	Table 2 Effluent Concentrations Col. 1 Air (µCi/ml)	Col. 2 Water (µCi/ml)	Table 3 Releases to Sewers Monthly Average Concentration (µCi/ml)
72	Hafnium-170	D, all compounds except those given for W	3E+3	6E+3	2E-6	8E-9	4E-5	4E-4
		W, oxides, hydroxides, carbides, and nitrates	-	5E+3	2E-6	6E-9	-	-
72	Hafnium-172	D, see ^{170}Hf	1E+3	9E+0	4E-9	-	2E-5	2E-4
		W, see ^{170}Hf	-	Bone surf (2E+1)	-	3E-11	-	-
			-	4E+1	2E-8	-	-	-
			-	Bone surf (6E+1)	-	8E-11	-	-
72	Hafnium-173	D, see ^{170}Hf	5E+3	1E+4	5E-6	2E-8	7E-5	7E-4
		W, see ^{170}Hf	-	1E+4	5E-6	2E-8	-	-
72	Hafnium-175	D, see ^{170}Hf	3E+3	9E+2	4E-7	-	4E-5	4E-4
		W, see ^{170}Hf	-	Bone surf (1E+3)	-	1E-9	-	-
			-	1E+3	5E-7	2E-9	-	-
72	Hafnium-177m[2]	D, see ^{170}Hf	2E+4	6E+4	2E-5	8E-8	3E-4	3E-3
		W, see ^{170}Hf	-	9E+4	4E-5	1E-7	-	-
72	Hafnium-178m	D, see ^{170}Hf	3E+2	1E+0	5E-10	-	3E-6	3E-5
		W, see ^{170}Hf	-	Bone surf (2E+0)	-	3E-12	-	-
			-	5E+0	2E-9	-	-	-
			-	Bone surf (9E+0)	-	1E-11	-	-
72	Hafnium-179m	D, see ^{170}Hf	1E+3	3E+2	1E-7	-	1E-5	1E-4
		W, see ^{170}Hf	-	Bone surf (6E+2)	-	8E-10	-	-
			-	6E+2	3E-7	8E-10	-	-
72	Hafnium-180m	D, see ^{170}Hf	7E+3	2E+4	9E-6	3E-8	1E-4	1E-3
		W, see ^{170}Hf	-	3E+4	1E-5	4E-8	-	-
72	Hafnium-181	D, see ^{170}Hf	1E+3	2E+2	7E-8	-	2E-5	2E-4
		W, see ^{170}Hf	-	Bone surf (4E+2)	-	6E-10	-	-
			-	4E+2	2E-7	6E-10	-	-
72	Hafnium-182m[2]	D, see ^{170}Hf	4E+4	9E+4	4E-5	1E-7	5E-4	5E-3
		W, see ^{170}Hf	-	1E+5	6E-5	2E-7	-	-
72	Hafnium-182	D, see ^{170}Hf	2E+2	8E-1	3E-10	-	-	-
		W, see ^{170}Hf	Bone surf (4E+2)	Bone surf (2E+0)	-	2E-12	5E-6	5E-5
			-	3E+0	1E-9	-	-	-
			-	Bone surf (7E+0)	-	1E-11	-	-
72	Hafnium-183[2]	D, see ^{170}Hf	2E+4	5E+4	2E-5	6E-8	3E-4	3E-3
		W, see ^{170}Hf	-	6E+4	2E-5	8E-8	-	-
72	Hafnium-184	D, see ^{170}Hf	2E+3	8E+3	3E-6	1E-8	3E-5	3E-4
		W, see ^{170}Hf	-	6E+3	3E-6	9E-9	-	-

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Atomic No.	Radionuclide	Class	Table 1 Occupational Values: Col. 1 Oral Ingestion ALI (μCi)	Col. 2 Inhalation ALI (μCi)	Col. 3 Inhalation DAC (μCi/ml)	Table 2 Effluent Concentrations: Col. 1 Air (μCi/ml)	Col. 2 Water (μCi/ml)	Table 3 Releases to Sewers: Monthly Average Concentration (μCi/ml)
73	Tantalum-172[2]	W, all compounds except those given for Y	4E+4	1E+5	5E-5	2E-7	5E-4	5E-3
		Y, elemental Ta, oxides, hydroxides, halides, carbides, nitrates, and nitrides	-	1E+5	4E-5	1E-7	-	-
73	Tantalum-173	W, see ^{172}Ta	7E+3	2E+4	8E-6	3E-8	9E-5	9E-4
		Y, see ^{172}Ta	-	2E+4	7E-6	2E-8	-	-
73	Tantalum-174[2]	W, see ^{172}Ta	3E+4	1E+5	4E-5	1E-7	4E-4	4E-3
		Y, see ^{172}Ta	-	9E+4	4E-5	1E-7	-	-
73	Tantalum-175	W, see ^{172}Ta	6E+3	2E+4	7E-6	2E-8	8E-5	8E-4
		Y, see ^{172}Ta	-	1E+4	6E-6	2E-8	-	-
73	Tantalum-176	W, see ^{172}Ta	4E+3	1E+4	5E-6	2E-8	5E-5	5E-4
		Y, see ^{172}Ta	-	1E+4	5E-6	2E-8	-	-
73	Tantalum-177	W, see ^{172}Ta	1E+4	2E+4	8E-6	3E-8	2E-4	2E-3
		Y, see ^{172}Ta	-	2E+4	7E-6	2E-8	-	-
73	Tantalum-178	W, see ^{172}Ta	2E+4	9E+4	4E-5	1E-7	2E-4	2E-3
		Y, see ^{172}Ta	-	7E+4	3E-5	1E-7	-	-
73	Tantalum-179	W, see ^{172}Ta	2E+4	5E+3	2E-6	8E-9	3E-4	3E-3
		Y, see ^{172}Ta	-	9E+2	4E-7	1E-9	-	-
73	Tantalum-180m	W, see ^{172}Ta	2E+4	7E+4	3E-5	9E-8	3E-4	3E-3
		Y, see ^{172}Ta	-	6E+4	2E-5	8E-8	-	-
73	Tantalum-180	W, see ^{172}Ta	1E+3	4E+2	2E-7	6E-10	2E-5	2E-4
		Y, see ^{172}Ta	-	2E+1	1E-8	3E-11	-	-
73	Tantalum-182m[2]	W, see ^{172}Ta	2E+5	5E+5	2E-4	8E-7	-	-
			St. wall (2E+5)	-	-	-	3E-3	3E-2
		Y, see ^{172}Ta	-	4E+5	2E-4	6E-7	-	-
73	Tantalum-182	W, see ^{172}Ta	8E+2	3E+2	1E-7	5E-10	1E-5	1E-4
		Y, see ^{172}Ta	-	1E+2	6E-8	2E-10	-	-
73	Tantalum-183	W, see ^{172}Ta	9E+2	1E+3	5E-7	2E-9	-	-
			LLI wall (1E+3)	-	-	-	2E-5	2E-4
		Y, see ^{172}Ta	-	1E+3	4E-7	1E-9	-	-
73	Tantalum-184	W, see ^{172}Ta	2E+3	5E+3	2E-6	8E-9	3E-5	3E-4
		Y, see ^{172}Ta	-	5E+3	2E-6	7E-9	-	-
73	Tantalum-185[2]	W, see ^{172}Ta	3E+4	7E+4	3E-5	1E-7	4E-4	4E-3
		Y, see ^{172}Ta	-	6E+4	3E-5	9E-8	-	-
73	Tantalum-186[2]	W, see ^{172}Ta	5E+4	2E+5	1E+4	3E-7	-	-
			St. wall (7E+4)	-	-	-	1E-3	1E-2
		Y, see ^{172}Ta	-	2E+5	9E-5	3E-7	-	-
74	Tungsten-176	D, all compounds	1E+4	5E+4	2E-5	7E-8	1E-4	1E-3
74	Tungsten-177	D, all compounds	2E+4	9E+4	4E-5	1E-7	3E-4	3E-3

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Atomic No.	Radionuclide	Class	Table 1 Occupational Values Col. 1 Oral Ingestion ALI (µCi)	Col. 2 Inhalation ALI (µCi)	Col. 3 Inhalation DAC (µCi/ml)	Table 2 Effluent Concentrations Col. 1 Air (µCi/ml)	Col. 2 Water (µCi/ml)	Table 3 Releases to Sewers Monthly Average Concentration (µCi/ml)
74	Tungsten-178	D, all compounds	5E+3	2E+4	8E-6	3E-8	7E-5	7E-4
74	Tungsten-179[2]	D, all compounds	5E+5	2E+6	7E-4	2E-6	7E-3	7E-2
74	Tungsten-181	D, all compounds	2E+4	3E+4	1E-5	5E-8	2E-4	2E-3
74	Tungsten-185	D, all compounds	2E+3	7E+3	3E-6	9E-9	-	-
			LLI wall (3E+3)	-	-	-	4E-5	4E-4
74	Tungsten-187	D, all compounds	2E+3	9E+3	4E-6	1E-8	3E-5	3E-4
74	Tungsten-188	D, all compounds	4E+2	1E+3	5E-7	2E-9	-	-
			LLI wall (5E+2)	-	-	-	7E-6	7E-5
75	Rhenium-177[2]	D, all compounds except those given for W	9E+4	3E+5	1E-4	4E-7	-	-
			St. wall (1E+5)	-	-	-	2E-3	2E-2
		W, oxides, hydroxides, and nitrates	-	4E+5	1E-4	5E-7	-	-
75	Rhenium-178[2]	D, see ^{177}Re	7E+4	3E+5	1E-4	4E-7	-	-
			St. wall (1E+5)	-	-	-	1E-3	1E-2
		W, see ^{177}Re	-	3E+5	1E-4	4E-7	-	-
75	Rhenium-181	D, see ^{177}Re	5E+3	9E+3	4E-6	1E-8	7E-5	7E-4
		W, see ^{177}Re	-	9E+3	4E-6	1E-8	-	-
75	Rhenium-182 (12.7 h)	D, see ^{177}Re	7E+3	1E+4	5E-6	2E-8	9E-5	9E-4
		W, see ^{177}Re	-	2E+4	6E-6	2E-8	-	-
75	Rhenium-182 (64.0 h)	D, see ^{177}Re	1E+3	2E+3	1E-6	3E-9	2E-5	2E-4
		W, see ^{177}Re	-	2E+3	9E-7	3E-9	-	-
75	Rhenium-184m	D, see ^{177}Re	2E+3	3E+3	1E-6	4E-9	3E-5	3E-4
		W, see ^{177}Re	-	4E+2	2E-7	6E-10	-	-
75	Rhenium-184	D, see ^{177}Re	2E+3	4E+3	1E-6	5E-9	3E-5	3E-4
		W, see ^{177}Re	-	1E+3	6E-7	2E-9	-	-
75	Rhenium-186m	D, see ^{177}Re	1E+3	2E+3	7E-7	-	-	-
			St. wall (2E+3)	St. wall (2E+3)	-	3E-9	2E-5	2E-4
		W, see ^{177}Re	-	2E+2	6E-8	2E-10	-	-
75	Rhenium-186	D, see ^{177}Re	2E+3	3E+3	1E-6	4E-9	3E-5	3E-4
		W, see ^{177}Re	-	2E+3	7E-7	2E-9	-	-
75	Rhenium-187	D, see ^{177}Re	6E+5	8E+5	4E-4	-	8E-3	8E-2
			-	St. wall (9E+5)	-	1E-6	-	-
		W, see ^{177}Re	-	1E+5	4E-5	1E-7	-	-
75	Rhenium-188m[2]	D, see ^{177}Re	8E+4	1E+5	6E-5	2E-7	1E-3	1E-2
		W, see ^{177}Re	-	1E+5	6E-5	2E-7	-	-
75	Rhenium-188	D, see ^{177}Re	2E+3	3E+3	1E-6	4E-9	2E-5	2E-4
		W, see ^{177}Re	-	3E+3	1E-6	4E-9	-	-

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Atomic No.	Radionuclide	Class	Table 1 Occupational Values Col. 1 Oral Ingestion ALI (μCi)	Col. 2 Inhalation ALI (μCi)	Col. 3 Inhalation DAC (μCi/ml)	Table 2 Effluent Concentrations Col. 1 Air (μCi/ml)	Col. 2 Water (μCi/ml)	Table 3 Releases to Sewers Monthly Average Concentration (μCi/ml)
75	Rhenium-189	D, see ^{177}Re	3E+3	5E+3	2E-6	7E-9	4E-5	4E-4
		W, see ^{177}Re	-	4E+3	2E-6	6E-9	-	-
76	Osmium-180[2]	D, all compounds except those given for W and Y	1E+5	4E+5	2E-4	5E-7	1E-3	1E-2
		W, halides and nitrates	-	5E+5	2E-4	7E-7	-	-
		Y, oxides and hydroxides	-	5E+5	2E-4	6E-7	-	-
76	Osmium-181[2]	D, see ^{180}Os	1E+4	4E+4	2E-5	6E-8	2E-4	2E-3
		W, see ^{180}Os	-	5E+4	2E-5	6E-8	-	-
		Y, see ^{180}Os	-	4E+4	2E-5	6E-8	-	-
76	Osmium-182	D, see ^{180}Os	2E+3	6E+3	2E-6	8E-9	3E-5	3E-4
		W, see ^{180}Os	-	4E+3	2E-6	6E-9	-	-
		Y, see ^{180}Os	-	4E+3	2E-6	6E-9	-	-
76	Osmium-185	D, see ^{180}Os	2E+3	5E+2	2E-7	7E-10	3E-5	3E-4
		W, see ^{180}Os	-	8E+2	3E-7	1E-9	-	-
		Y, see ^{180}Os	-	8E+2	3E-7	1E-9	-	-
76	Osmium-189m	D, see ^{180}Os	8E+4	2E+5	1E-4	3E-7	1E-3	1E-2
		W, see ^{180}Os	-	2E+5	9E-5	3E-7	-	-
		Y, see ^{180}Os	-	2E+5	7E-5	2E-7	-	-
76	Osmium-191m	D, see ^{180}Os	1E+4	3E+4	1E-5	4E-8	2E-4	2E-3
		W, see ^{180}Os	-	2E+4	8E-6	3E-8	-	-
		Y, see ^{180}Os	-	2E+4	7E-6	2E-8	-	-
76	Osmium-191	D, see ^{180}Os	2E+3	2E+3	9E-7	3E-9	-	-
			LLI wall (3E+3)	-	-	-	3E-5	3E-4
		W, see ^{180}Os	-	2E+3	7E-7	2E-9	-	-
		Y, see ^{180}Os	-	1E+3	6E-7	2E-9	-	-
76	Osmium-193	D, see ^{180}Os	2E+3	5E+3	2E-6	6E-9	-	-
			LLI wall (2E+3)	-	-	-	2E-5	2E-4
		W, see ^{180}Os	-	3E+3	1E-6	4E-9	-	-
		Y, see ^{180}Os	-	3E+3	1E-6	4E-9	-	-
76	Osmium-194	D, see ^{180}Os	4E+2	4E+1	2E-8	6E-11	-	-
			LLI wall (6E+2)	-	-	-	8E-6	8E-5
		W, see ^{180}Os	-	6E+1	2E-8	8E-11	-	-
		Y, see ^{180}Os	-	8E+0	3E-9	1E-11	-	-
77	Iridium-182[2]	D, all compounds except those given for W and Y	4E+4	1E+5	6E-5	2E-7	-	-
			St. wall (4E+4)	-	-	-	6E-4	6E-3
		W, halides, nitrates, and metallic iridium	-	2E+5	6E-5	2E-7	-	-
		Y, oxides and hydroxides	-	1E+5	5E-5	2E-7	-	-
77	Iridium-184	D, see ^{182}Ir	8E+3	2E+4	1E-5	3E-8	1E-4	1E-3
		W, see ^{182}Ir	-	3E+4	1E-5	5E-8	-	-
		Y, see ^{182}Ir	-	3E+4	1E-5	4E-8	-	-

Atomic No.	Radionuclide	Class	Table 1 Occupational Values Col. 1 Oral Ingestion ALI (μCi)	Col. 2 Inhalation ALI (μCi)	Col. 3 Inhalation DAC (μCi/ml)	Table 2 Effluent Concentrations Col. 1 Air (μCi/ml)	Col. 2 Water (μCi/ml)	Table 3 Releases to Sewers Monthly Average Concentration (μCi/ml)
77	Iridium-185	D, see ^{182}Ir	5E+3	1E+4	5E-6	2E-8	7E-5	7E-4
		W, see ^{182}Ir	-	1E+4	5E-6	2E-8	-	-
		Y, see ^{182}Ir	-	1E+4	4E-6	1E-8	-	-
77	Iridium-186	D, see ^{182}Ir	2E+3	8E+3	3E-6	1E-8	3E-5	3E-4
		W, see ^{182}Ir	-	6E+3	3E-6	9E-9	-	-
		Y, see ^{182}Ir	-	6E+3	2E-6	8E-9	-	-
77	Iridium-187	D, see ^{182}Ir	1E+4	3E+4	1E-5	5E-8	1E-4	1E-3
		W, see ^{182}Ir	-	3E+4	1E-5	4E-8	-	-
		Y, see ^{182}Ir	-	3E+4	1E-5	4E-8	-	-
77	Iridium-188	D, see ^{182}Ir	2E+3	5E+3	2E-6	6E-9	3E-5	3E-4
		W, see ^{182}Ir	-	4E+3	1E-6	5E-9	-	-
		Y, see ^{182}Ir	-	3E+3	1E-6	5E-9	-	-
77	Iridium-189	D, see ^{182}Ir	5E+3	5E+3	2E-6	7E-9	-	-
			LLI wall (5E+3)	-	-	-	7E-5	7E-4
		W, see ^{182}Ir	-	4E+3	2E-6	5E-9	-	-
		Y, see ^{182}Ir	-	4E+3	1E-6	5E-9	-	-
77	Iridium-190m[2]	D, see ^{182}Ir	2E+5	2E+5	8E-5	3E-7	2E-3	2E-2
		W, see ^{182}Ir	-	2E+5	9E-5	3E-7	-	-
		Y, see ^{182}Ir	-	2E+5	8E-5	3E-7	-	-
77	Iridium-190	D, see ^{182}Ir	1E+3	9E+2	4E-7	1E-9	1E-5	1E-4
		W, see ^{182}Ir	-	1E+3	4E-7	1E-9	-	-
		Y, see ^{182}Ir	-	9E+2	4E-7	1E-9	-	-
77	Iridium-192m	D, see ^{182}Ir	3E+3	9E+1	4E-8	1E-10	4E-5	4E-4
		W, see ^{182}Ir	-	2E+2	9E-8	3E-10	-	-
		Y, see ^{182}Ir	-	2E+1	6E-9	2E-11	-	-
77	Iridium-192	D, see ^{182}Ir	9E+2	3E+2	1E-7	4E-10	1E-5	1E-4
		W, see ^{182}Ir	-	4E+2	2E-7	6E-10	-	-
		Y, see ^{182}Ir	-	2E+2	9E-8	3E-10	-	-
77	Iridium-194m	D, see ^{182}Ir	6E+2	9E+1	4E-8	1E-10	9E-6	9E-5
		W, see ^{182}Ir	-	2E+2	7E-8	2E-10	-	-
		Y, see ^{182}Ir	-	1E+2	4E-8	1E-10	-	-
77	Iridium-194	D, see ^{182}Ir	1E+3	3E+3	1E-6	4E-9	1E-5	1E-4
		W, see ^{182}Ir	-	2E+3	9E-7	3E-9	-	-
		Y, see ^{182}Ir	-	2E+3	8E-7	3E-9	-	-
77	Iridium-195m	D, see ^{182}Ir	8E+3	2E+4	1E-5	3E-8	1E-4	1E-3
		W, see ^{182}Ir	-	3E+4	1E-5	4E-8	-	-
		Y, see ^{182}Ir	-	2E+4	9E-6	3E-8	-	-
77	Iridium-195	D, see ^{182}Ir	1E+4	4E+4	2E-5	6E-8	2E-4	2E-3
		W, see ^{182}Ir	-	5E+4	2E-5	7E-8	-	-
		Y, see ^{182}Ir	-	4E+4	2E-5	6E-8	-	-
78	Platinum-186	D, all compounds	1E+4	4E+4	2E-5	5E-8	2E-4	2E-3
78	Platinum-188	D, all compounds	2E+3	2E+3	7E-7	2E-9	2E-5	2E-4
78	Platinum-189	D, all compounds	1E+4	3E+4	1E-5	4E-8	1E-4	1E-3
78	Platinum-191	D, all compounds	4E+3	8E+3	4E-6	1E-8	5E-5	5E-4

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Atomic No.	Radionuclide	Class	Table 1 Occupational Values Col. 1 Oral Ingestion ALI (μCi)	Col. 2 Inhalation ALI (μCi)	Col. 3 Inhalation DAC (μCi/ml)	Table 2 Effluent Concentrations Col. 1 Air (μCi/ml)	Col. 2 Water (μCi/ml)	Table 3 Releases to Sewers Monthly Average Concentration (μCi/ml)
78	Platinum-193m	D, all compounds	3E+3	6E+3	3E-6	8E-9	-	-
			LLI wall (3E+4)	-	-	-	4E-5	4E-4
78	Platinum-193	D, all compounds	4E+4	2E+4	1E-5	3E-8	-	-
			LLI wall (5E+4)	-	-	-	6E-4	6E-3
78	Platinum-195m	D, all compounds	2E+3	4E+3	2E-6	6E-9	-	-
			LLI wall (2E+3)	-	-	-	3E-5	3E-4
78	Platinum-197m[2]	D, all compounds	2E+4	4E+4	2E-5	6E-8	2E-4	2E-3
78	Platinum-197	D, all compounds	3E+3	1E+4	4E-6	1E-8	4E-5	4E-4
78	Platinum-199[2]	D, all compounds	5E+4	1E+5	6E-5	2E-7	7E-4	7E-3
78	Platinum-200	D, all compounds	1E+3	3E+3	1E-6	5E-9	2E-5	2E-4
79	Gold-193	D, all compounds except those given for W and Y	9E+3	3E+4	1E-5	4E-8	1E-4	1E-3
		W, halides and nitrates	-	2E+4	9E-6	3E-8	-	-
		Y, oxides and hydroxides	-	2E+4	8E-6	3E-8	-	-
79	Gold-194	D, see ^{193}Au	3E+3	8E+3	3E-6	1E-8	4E-5	4E-4
		W, see ^{193}Au	-	5E+3	2E-6	8E-9	-	-
		Y, see ^{193}Au	-	5E+3	2E-6	7E-9	-	-
79	Gold-195	D, see ^{193}Au	5E+3	1E+4	5E-6	2E-8	7E-5	7E-4
		W, see ^{193}Au	-	1E+3	6E-7	2E-9	-	-
		Y, see ^{193}Au	-	4E+2	2E-7	6E-10	-	-
79	Gold-198m	D, see ^{193}Au	1E+3	3E+3	1E-6	4E-9	1E-5	1E-4
		W, see ^{193}Au	-	1E+3	5E-7	2E-9	-	-
		Y, see ^{193}Au	-	1E+3	5E-7	2E-9	-	-
79	Gold-198	D, see ^{193}Au	1E+3	4E+3	2E-6	5E-9	2E-5	2E-4
		W, see ^{193}Au	-	2E+3	8E-7	3E-9	-	-
		Y, see ^{193}Au	-	2E+3	7E-7	2E-9	-	-
79	Gold-199	D, see ^{193}Au	3E+3	9E+3	4E-6	1E-8	-	-
			LLI wall (3E+3)	-	-	-	4E-5	4E-4
		W, see ^{193}Au	-	4E+3	2E-6	6E-9	-	-
		Y, see ^{193}Au	-	4E+3	2E-6	5E-9	-	-
79	Gold-200m	D, see ^{193}Au	1E+3	4E+3	1E-6	5E-9	2E-5	2E-4
		W, see ^{193}Au	-	3E+3	1E-6	4E-9	-	-
		Y, see ^{193}Au	-	2E+4	1E-6	3E-9	-	-
79	Gold-200[2]	D, see ^{193}Au	3E+4	6E+4	3E-5	9E-8	4E-4	4E-3
		W, see ^{193}Au	-	8E+4	3E-5	1E-7	-	-
		Y, see ^{193}Au	-	7E+4	3E-5	1E-7	-	-
79	Gold-201[2]	D, see ^{193}Au	7E+4	2E+5	9E-5	3E-7	-	-
			St. wall (9E+4)	-	-	-	1E-3	1E-2
		W, see ^{193}Au	-	2E+5	1E-4	3E-7	-	-
		Y, see ^{193}Au	-	2E+5	9E-5	3E-7	-	-

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80	Mercury-193m	Vapor	-	8E+3	4E-6	1E-8	-	-
		Organic D	4E+3	1E+4	5E-6	2E-8	6E-5	6E-4
		D, sulfates	3E+3	9E+3	4E-6	1E-8	4E-5	4E-4
		W, oxides, hydroxides, halides, nitrates, and sulfides	-	8E+3	3E-6	1E-8	-	-
80	Mercury-193	Vapor	-	3E+4	1E-5	4E-8	-	-
		Organic D	2E+4	6E+4	3E-5	9E-8	3E-4	3E-3
		D, see ^{193m}Hg	2E+4	4E+4	2E-5	6E-8	2E-4	2E-3
		W, see ^{193m}Hg	-	4E+4	2E-5	6E-8	-	-
80	Mercury-194	Vapor	-	3E+1	1E-8	4E-11	-	-
		Organic D	2E+1	3E+1	1E-8	4E-11	2E-7	2E-6
		D, see ^{193m}Hg	8E+2	4E+1	2E-8	6E-11	1E-5	1E-4
		W, see ^{193m}Hg	-	1E+2	5E-8	2E-10	-	-
80	Mercury-195m	Vapor	-	4E+3	2E-6	6E-9	-	-
		Organic D	3E+3	6E+3	3E-6	8E-9	4E-5	4E-4
		D, see ^{193m}Hg	2E+3	5E+3	2E-6	7E-9	3E-5	3E-4
		W, see ^{193m}Hg	-	4E+3	2E-6	5E-9	-	-
80	Mercury-195	Vapor	-	3E+4	1E-5	4E-8	-	-
		Organic D	2E+4	5E+4	2E-5	6E-8	2E-4	2E-3
		D, see ^{193m}Hg	1E+4	4E+4	1E-5	5E-8	2E-4	2E-3
		W, see ^{193m}Hg	-	3E+4	1E-5	5E-8	-	-
80	Mercury-197m	Vapor	-	5E+3	2E-6	7E-9	-	-
		Organic D	4E+3	9E+3	4E-6	1E-8	5E-5	5E-4
		D, see ^{193m}Hg	3E+3	7E+3	3E-6	1E-8	4E-5	4E-4
		W, see ^{193m}Hg	-	5E+3	2E-6	7E-9	-	-
80	Mercury-197	Vapor	-	8E+3	4E-6	1E-8	-	-
		Organic D	7E+3	1E+4	6E-6	2E-8	9E-5	9E-4
		D, see ^{193m}Hg	6E+3	1E+4	5E-6	2E-8	8E-5	8E-4
		W, see ^{193m}Hg	-	9E+3	4E-6	1E-8	-	-
80	Mercury-199m[2]	Vapor	-	8E+4	3E-5	1E-7	-	-
		Organic D	6E+4	2E+5	7E-5	2E-7	-	-
			St. wall (1E+5)	-	-	-	1E-3	1E-2
		D, see ^{193m}Hg	6E+4	1E+5	6E-5	2E-7	8E-4	8E-3
		W, see ^{193m}Hg	-	2E+5	7E-5	2E-7	-	-
80	Mercury-203	Vapor	-	8E+2	4E-7	1E-9	-	-
		Organic D	5E+2	8E+2	3E-7	1E-9	7E-6	7E-5
		D, see ^{193m}Hg	2E+3	1E+3	5E-7	2E-9	3E-5	3E-4
		W, see ^{193m}Hg	-	1E+3	5E-7	2E-9	-	-
81	Thallium-194m[2]	D, all compounds	5E+4	2E+5	6E-5	2E-7	-	-
			St. wall (7E+4)	-	-	-	1E-3	1E-2

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81	Thallium-194[2]	D, all compounds	3E+5	6E+5	2E-4	8E-7	-	-
			St. wall (3E+5)	-	-	-	4E-3	4E-2
81	Thallium-195[2]	D, all compounds	6E+4	1E+5	5E-5	2E-7	9E-4	9E-3
81	Thallium-197	D, all compounds	7E+4	1E+5	5E-5	2E-7	1E-3	1E-2
81	Thallium-198m[2]	D, all compounds	3E+4	5E+4	2E-5	8E-8	4E-4	4E-3
81	Thallium-198	D, all compounds	2E+4	3E+4	1E-5	5E-8	3E-4	3E-3
81	Thallium-199	D, all compounds	6E+4	8E+4	4E-5	1E-7	9E-4	9E-3
81	Thallium-200	D, all compounds	8E+3	1E+4	5E-6	2E-8	1E-4	1E-3
81	Thallium-201	D, all compounds	2E+4	2E+4	9E-6	3E-8	2E-4	2E-3
81	Thallium-202	D, all compounds	4E+3	5E+3	2E-6	7E-9	5E-5	5E-4
81	Thallium-204	D, all compounds	2E+3	2E+3	9E-7	3E-9	2E-5	2E-4
82	Lead-195m[2]	D, all compounds	6E+4	2E+5	8E-5	3E-7	8E-4	8E-3
82	Lead-198	D, all compounds	3E+4	6E+4	3E-5	9E-8	4E-4	4E-3
82	Lead-199[2]	D, all compounds	2E+4	7E+4	3E-5	1E-7	3E-4	3E-3
82	Lead-200	D, all compounds	3E+3	6E+3	3E-6	9E-9	4E-5	4E-4
82	Lead-201	D, all compounds	7E+3	2E+4	8E-6	3E-8	1E-4	1E-3
82	Lead-202m	D, all compounds	9E+3	3E+4	1E-5	4E-8	1E-4	1E-3
82	Lead-202	D, all compounds	1E+2	5E+1	2E-8	7E-11	2E-6	2E-5
82	Lead-203	D, all compounds	5E+3	9E+3	4E-6	1E-8	7E-5	7E-4
82	Lead-205	D, all compounds	4E+3	1E+3	6E-7	2E-9	5E-5	5E-4
82	Lead-209	D, all compounds	2E+4	6E+4	2E-5	8E-8	3E-4	3E-3
82	Lead-210	D, all compounds	6E-1	2E-1	1E-10	-	-	-
			Bone surf (1E+0)	Bone surf (4E-1)	-	6E-13	1E-8	1E-7
82	Lead-211[2]	D, all compounds	1E+4	6E+2	3E-7	9E-10	2E-4	2E-3
82	Lead-212	D, all compounds	8E+1	3E+1	1E-8	5E-11	-	-
			Bone surf (1E+2)	-	-	-	2E-6	2E-5
82	Lead-214[2]	D, all compounds	9E+3	8E+2	3E-7	1E-9	1E-4	1E-3
83	Bismuth-200[2]	D, nitrates	3E+4	8E+4	4E-5	1E-7	4E-4	4E-3
		W, all other compounds	-	1E+5	4E-5	1E-7	-	-
83	Bismuth-201[2]	D, see ^{200}Bi	1E+4	3E+4	1E-5	4E-8	2E-4	2E-3
		W, see ^{200}Bi	-	4E+4	2E-5	5E-8	-	-
83	Bismuth-202[2]	D, see ^{200}Bi	1E+4	4E+4	2E-5	6E-8	2E-4	2E-3
		W, see ^{200}Bi	-	8E+4	3E-5	1E-7	-	-

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Atomic No.	Radionuclide	Class	Table 1 Occupational Values: Col. 1 Oral Ingestion ALI (μCi)	Col. 2 Inhalation ALI (μCi)	Col. 3 Inhalation DAC (μCi/ml)	Table 2 Effluent Concentrations: Col. 1 Air (μCi/ml)	Col. 2 Water (μCi/ml)	Table 3 Releases to Sewers: Monthly Average Concentration (μCi/ml)
83	Bismuth-203	D, see ^{200}Bi	2E+3	7E+3	3E-6	9E-9	3E-5	3E-4
		W, see ^{200}Bi	-	6E+3	3E-6	9E-9	-	-
83	Bismuth-205	D, see ^{200}Bi	1E+3	3E+3	1E-6	3E-9	2E-5	2E-4
		W, see ^{200}Bi	-	1E+3	5E-7	2E-9	-	-
83	Bismuth-206	D, see ^{200}Bi	6E+2	1E+3	6E-7	2E-9	9E-6	9E-5
		W, see ^{200}Bi	-	9E+2	4E-7	1E-9	-	-
83	Bismuth-207	D, see ^{200}Bi	1E+3	2E+3	7E-7	2E-9	1E-5	1E-4
		W, see ^{200}Bi	-	4E+2	1E-7	5E-10	-	-
83	Bismuth-210m	D, see ^{200}Bi	4E+1 Kidneys (6E+1)	5E+0 Kidneys (6E+0)	2E-9	-	-	-
		W, see ^{200}Bi	-	7E-1	3E-10	9E-12 9E-13	8E-7 -	8E-6 -
83	Bismuth-210	D, see ^{200}Bi	8E+2	2E+2 Kidneys (4E+2)	1E-7	-	1E-5	1E-4
		W, see ^{200}Bi	-	3E+1	1E-8	5E-10 4E-11	- -	- -
83	Bismuth-212[2]	D, see ^{200}Bi	5E+3	2E+2	1E-7	3E-10	7E-5	7E-4
		W, see ^{200}Bi	-	3E+2	1E-7	4E-10	-	-
83	Bismuth-213[2]	D, see ^{200}Bi	7E+3	3E+2	1E-7	4E-10	1E-4	1E-3
		W, see ^{200}Bi	-	4E+2	1E-7	5E-10	-	-
83	Bismuth-214[2]	D, see ^{200}Bi	2E+4 St. wall (2E+4)	8E+2	3E-7	1E-9	-	-
		W, see ^{200}Bi	-	9E-2	4E-7	1E-9	3E-4 -	3E-3 -
84	Polonium-203[2]	D, all compounds except those given for W	3E+4	6E+4	3E-5	9E-8	3E-4	3E-3
		W, oxides, hydroxides, and nitrates	-	9E+4	4E-5	1E-7	-	-
84	Polonium-205[2]	D, see ^{203}Po	2E+4	4E+4	2E-5	5E-8	3E-4	3E-3
		W, see ^{203}Po	-	7E+4	3E-5	1E-7	-	-
84	Polonium-207	D, see ^{203}Po	8E+3	3E+4	1E-5	3E-8	1E-4	1E-3
		W, see ^{203}Po	-	3E+4	1E-5	4E-8	-	-
84	Polonium-210	D, see ^{203}Po	3E+0	6E-1	3E-10	9E-13	4E-8	4E-7
		W, see ^{203}Po	-	6E-1	3E-10	9E-13	-	-
85	Astatine-207[2]	D, halides	6E+3	3E+3	1E-6	4E-9	8E-5	8E-4
		W	-	2E+3	9E-7	3E-9	-	-
85	Astatine-211	D, halides	1E+2	8E+1	3E-8	1E-10	2E-6	2E-5
		W	-	5E+1	2E-8	8E-11	-	-
86	Radon-220	With daughters removed	-	2E+4	7E-6	2E-8	-	-
		With daughters present	-	2E+1 (or 12 working level months)	9E-9 (or 1.0 working level)	3E-11	-	-

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Atomic No.	Radionuclide	Class	Table 1 Occupational Values: Col. 1 Oral Ingestion ALI (μCi)	Col. 2 Inhalation ALI (μCi)	Col. 3 Inhalation DAC (μCi/ml)	Table 2 Effluent Concentrations: Col. 1 Air (μCi/ml)	Col. 2 Water (μCi/ml)	Table 3 Releases to Sewers: Monthly Average Concentration (μCi/ml)
86	Radon-222	With daughters removed	-	1E+4	4E-6	1E-8	-	-
		With daughters present	-	1E+2 (or 4 working level months)	3E-8 (or 0.33 working level)	1E-10	-	-
87	Francium-222[2]	D, all compounds	2E+3	5E+2	2E-7	6E-10	3E-5	3E-4
87	Francium-223[2]	D, all compounds	6E+2	8E+2	3E-7	1E-9	8E-6	8E-5
88	Radium-223	W, all compounds	5E+0	7E-1	3E-10	9E-13	-	-
			Bone surf (9E+0)	-	-	-	1E-7	1E-6
88	Radium-224	W, all compounds	8E+0	2E+0	7E-10	2E-12	-	-
			Bone surf (2E+1)	-	-	-	2E-7	2E-6
88	Radium-225	W, all compounds	8E+0	7E-1	3E-10	9E-13	-	-
			Bone surf (2E+1)	-	-	-	2E-7	2E-6
88	Radium-226	W, all compounds	2E+0	6E-1	3E-10	9E-13	-	-
			Bone surf (5E+0)	-	-	-	6E-8	6E-7
88	Radium-227[2]	W, all compounds	2E+4	1E+4	6E-6	-	-	-
			Bone surf (2E+4)	Bone surf (2E+4)	-	3E-8	3E-4	3E-3
88	Radium-228	W, all compounds	2E+0	1E+0	5E-10	2E-12	-	-
			Bone surf (4E+0)	-	-	-	6E-8	6E-7
89	Actinium-224	D, all compounds except those given for W and Y	2E+3	3E+1	1E-8	-	-	-
			LLI wall (2E+3)	Bone surf (4E+1)	-	5E-11	3E-5	3E-4
		W, halides and nitrates	-	5E+1	2E-8	7E-11	-	-
		Y, oxides and hydroxides	-	5E+1	2E-8	6E-11	-	-
89	Actinium-225	D, see ^{224}Ac	5E+1	3E-1	1E-10	-	-	-
			LLI wall (5E+1)	Bone surf (5E-1)	-	7E-13	7E-7	7E-6
		W, see ^{224}Ac	-	6E-1	3E-10	9E-13	-	-
		Y, see ^{224}Ac	-	6E-1	3E-10	9E-13	-	-
89	Actinium-226	D, see ^{224}Ac	1E+2	3E+0	1E-9	-	-	-
			LLI wall (1E+2)	Bone surf (4E+0)	-	5E-12	2E-6	2E-5
		W, see ^{224}Ac	-	5E+0	2E-9	7E-12	-	-
		Y, see ^{224}Ac	-	5E+0	2E-9	6E-12	-	-
89	Actinium-227	D, see ^{224}Ac	2E-1	4E-4	2E-13	-	-	-
			Bone surf (4E-1)	Bone surf (8E-4)	-	1E-15	5E-9	5E-8
		W, see ^{224}Ac	-	2E-3	7E-13	-	-	-
			-	Bone surf (3E-3)	-	4E-15	-	-
		Y, see ^{224}Ac	-	4E-3	2E-12	6E-15	-	-

Atomic No.	Radionuclide	Class	Table 1 Occupational Values Col. 1 Oral Ingestion ALI (µCi)	Col. 2 Inhalation ALI (µCi)	Col. 3 Inhalation DAC (µCi/ml)	Table 2 Effluent Concentrations Col. 1 Air (µCi/ml)	Col. 2 Water (µCi/ml)	Table 3 Releases to Sewers Monthly Average Concentration (µCi/ml)
89	Actinium-228	D, see ^{224}Ac	2E+3	9E+0	4E-9	-	3E-5	3E-4
		W, see ^{224}Ac	-	Bone surf (2E+1)	-	2E-11	-	-
			-	4E+1	2E-8	-	-	-
		Y, see ^{224}Ac	-	Bone surf (6E+1)	-	8E-11	-	-
			-	4E+1	2E-8	6E-11	-	-
90	Thorium-226[2]	W, all compounds except those given for Y	5E+3	2E+2	6E-8	2E-10	-	-
			St wall (5E+3)	-	-	-	7E-5	7E-4
		Y, oxides and hydroxides	-	1E+2	6E-8	2E-10	-	-
90	Thorium-227	W, see ^{226}Th	1E+2	3E-1	1E-10	5E-13	2E-6	2E-5
		Y, see ^{226}Th	-	3E-1	1E-10	5E-13	-	-
90	Thorium-228	W, see ^{226}Th	6E+0	1E-2	4E-12	-	-	-
			Bone surf (1E+1)	Bone surf (2E-2)	-	3E-14	2E-7	2E-6
		Y, see ^{226}Th	-	2E-2	7E-12	2E-14	-	-
90	Thorium-229	W, see ^{226}Th	6E-1	9E-4	4E-13	-	-	-
			Bone surf (1E+0)	Bone surf (2E-3)	-	3E-15	2E-8	2E-7
		Y, see ^{226}Th	-	2E-3	1E-12	-	-	-
			-	Bone surf (3E-3)	-	4E-15	-	-
90	Thorium-230	W, see ^{226}Th	4E+0	6E-3	3E-12	-	-	-
			Bone surf (9E+0)	Bone surf (2E-2)	-	2E-14	1E-7	1E-6
		Y, see ^{226}Th	-	2E-2	6E-12	-	-	-
			-	Bone surf (2E-2)	-	3E-14	-	-
90	Thorium-231	W, see ^{226}Th	4E+3	6E+3	3E-6	9E-9	5E-5	5E-4
		Y, see ^{226}Th	-	6E+3	3E-6	9E-9	-	-
90	Thorium-232	W, see ^{226}Th	7E-1	1E-3	5E-13	-	-	-
			Bone surf (2E+0)	Bone surf (3E-3)	-	4E-15	3E-8	3E-7
		Y, see ^{226}Th	-	3E-3	1E-12	-	-	-
			-	Bone surf (4E-3)	-	6E-15	-	-
90	Thorium-234	W, see ^{226}Th	3E+2	2E+2	8E-8	3E-10	-	-
			LLI wall (4E+2)	-	-	-	5E-6	5E-5
		Y, see ^{226}Th	-	2E+2	6E-8	2E-10	-	-
91	Protactinium-227[2]	W, all compounds except those given for Y	4E+3	1E+2	5E-8	2E-10	5E-5	5E-4
		Y, oxides and hydroxides	-	1E+2	4E-8	1E-10	-	-
91	Protactinium-228	W, see ^{227}Pa	1E+3	1E+1	5E-9	-	2E-5	2E-4
			-	Bone surf (2E+1)	-	3E-11	-	-
		Y, see ^{226}Pa	-	1E+1	5E-9	2E-11	-	-

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Atomic No.	Radionuclide	Class	Table 1 Occupational Values: Col. 1 Oral Ingestion ALI (µCi)	Col. 2 Inhalation ALI (µCi)	Col. 3 Inhalation DAC (µCi/ml)	Table 2 Effluent Concentrations: Col. 1 Air (µCi/ml)	Col. 2 Water (µCi/ml)	Table 3 Releases to Sewers: Monthly Average Concentration (µCi/ml)
91	Protactinium-230	W, see ^{227}Pa	6E+2	5E+0	2E-9	7E-12	-	-
			Bone surf (9E+2)	-	-	-	1E-5	1E-4
		Y, see ^{227}Pa	-	4E+0	1E-9	5E-12	-	-
91	Protactinium-231	W, see ^{227}Pa	2E-1	2E-3	6E-13	-	-	-
			Bone surf (5E-1)	Bone surf (4E-3)	-	6E-15	6E-9	6E-8
		Y, see ^{226}Pa	-	4E-3	2E-12	-	-	-
			-	Bone surf (6E-3)	-	8E-15	-	-
91	Protactinium-232	W, see ^{227}Pa	1E+3	2E+1	9E-9	-	2E-5	2E-4
			-	Bone surf (6E+1)	-	8E-11	-	-
		Y, see ^{227}Pa	-	6E+1	2E-8	-	-	-
			-	Bone surf (7E+1)	-	1E-10	-	-
91	Protactinium-233	W, see ^{227}Pa	1E+3	7E+2	3E-7	1E-9	-	-
			LLI wall (2E+3)	-	-	-	2E-5	2E-4
		Y, see ^{227}Pa	-	6E+2	2E-7	8E-10	-	-
91	Protactinium-234	W, see ^{227}Pa	2E+3	8E+3	3E-6	1E-8	3E-5	3E-4
		Y, see ^{227}Pa	-	7E+3	3E-6	9E-9	-	-
92	Uranium-230	D, UF_6, UO_2F_2, $UO_2(NO_3)_2$	4E+0	4E-1	2E-10	-	-	-
			Bone surf (6E+0)	Bone surf (6E-1)	-	8E-13	8E-8	8E-7
		W, UO_3, UF_4, UCl_4	-	4E-1	1E-10	5E-13	-	-
		Y, UO_2, U_3O_8	-	3E-1	1E-10	4E-13	-	-
92	Uranium-231	D, see ^{230}U	5E+3	8E+3	3E-6	1E-8	-	-
			LLI wall (4E+3)	-	-	-	6E-5	6E-4
		W, see ^{230}U	-	6E+3	2E-6	8E-9	-	-
		Y, see ^{230}U	-	5E+3	2E-6	6E-9	-	-
92	Uranium-232	D, see ^{230}U	2E+0	2E-1	9E-11	-	-	-
			Bone surf (4E+0)	Bone surf (4E-1)	-	6E-13	6E-8	6E-7
		W, see ^{230}U	-	4E-1	2E-10	5E-13	-	-
		Y, see ^{230}U	-	8E-3	3E-12	1E-14	-	-
92	Uranium-233	D, see ^{230}U	1E+1	1E+0	5E-10	-	-	-
			Bone surf (2E+1)	Bone surf (2E+0)	-	3E-12	3E-7	3E-6
		W, see ^{230}U	-	7E-1	3E-10	1E-12	-	-
		Y, see ^{230}U	-	4E-2	2E-11	5E-14	-	-
92	Uranium-234[3]	D, see ^{230}U	1E+1	1E+0	5E-10	-	-	-
			Bone surf (2E+1)	Bone surf (2E+0)	-	3E-12	3E-7	3E-6
		W, see ^{230}U	-	7E-1	3E-10	1E-12	-	-
		Y, see ^{230}U	-	4E-2	2E-11	5E-14	-	-

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Atomic No.	Radionuclide	Class	Table 1 Occupational Values: Col. 1 Oral Ingestion ALI (µCi)	Table 1 Occupational Values: Col. 2 Inhalation ALI (µCi)	Table 1 Occupational Values: Col. 3 Inhalation DAC (µCi/ml)	Table 2 Effluent Concentrations: Col. 1 Air (µCi/ml)	Table 2 Effluent Concentrations: Col. 2 Water (µCi/ml)	Table 3 Releases to Sewers: Monthly Average Concentration (µCi/ml)
92	Uranium-235[3]	D, see ^{230}U	1E+1 Bone surf (2E+1)	1E+0 Bone surf (2E+0)	6E-10 -	- 3E-12	- 3E-7	- 3E-6
		W, see ^{230}U	-	8E-1	3E-10	1E-12	-	-
		Y, see ^{230}U	-	4E-2	2E-11	6E-14	-	-
92	Uranium-236	D, see ^{230}U	1E+1 Bone surf (2E+1)	1E+0 Bone surf (2E+0)	5E-10 -	- 3E-12	- 3E-7	- 3E-6
		W, see ^{230}U	-	8E-1	3E-10	1E-12	-	-
		Y, see ^{230}U	-	4E-2	2E-11	6E-14	-	-
92	Uranium-237	D, see ^{230}U	2E+3 LLI wall (2E+3)	3E+3 -	1E-6 -	4E-9 -	- 3E-5	- 3E-4
		W, see ^{230}U	-	2E+3	7E-7	2E-9	-	-
		Y, see ^{230}U	-	2E+3	6E-7	2E-9	-	-
92	Uranium-238[3]	D, see ^{230}U	1E+1 Bone surf (2E+1)	1E+0 Bone surf (2E+0)	6E-10 -	- 3E-12	- 3E-7	- 3E-6
		W, see ^{230}U	-	8E-1	3E-10	1E-12	-	-
		Y, see ^{230}U	-	4E-2	2E-11	6E-14	-	-
92	Uranium-239[2]	D, see ^{230}U	7E+4	2E+5	8E-5	3E-7	9E-4	9E-3
		W, see ^{230}U	-	2E+5	7E-5	2E-7	-	-
		Y, see ^{230}U	-	2E+5	6E-5	2E-7	-	-
92	Uranium-240	D, see ^{230}U	1E+3	4E+3	2E-6	5E-9	2E-5	2E-4
		W, see ^{230}U	-	3E+3	1E-6	4E-9	-	-
		Y, see ^{230}U	-	2E+3	1E-6	3E-9	-	-
92	Uranium-natural[3]	D, see ^{230}U	1E+1 Bone surf (2E+1)	1E+0 Bone surf (2E+0)	6E-10 -	- 3E-12	- 3E-7	- 3E-6
		W, see ^{230}U	-	8E-1	3E-10	9E-13	-	-
		Y, see ^{230}U	-	5E-2	2E-11	9E-14	-	-
93	Neptunium-232[2]	W, all compounds	1E+5 -	2E+3 Bone surf (5E+2)	7E-7 -	- 6E-9	2E-3 -	2E-2 -
93	Neptunium-233[2]	W, all compounds	8E+5	3E+6	1E-3	4E-6	1E-2	1E-1
93	Neptunium-234	W, all compounds	2E+3	3E+3	1E-6	4E-9	3E-5	3E-4
93	Neptunium-235	W, all compounds	2E+4 LLI wall (2E+4)	8E+2 Bone surf (1E+3)	3E-7 -	- 2E-9	- 3E-4	- 3E-3
93	Neptunium-236 (1.15E+5 y)	W, all compounds	3E+0 Bone surf (6E+0)	2E-2 Bone surf (5E-2)	9E-12 -	- 8E-14	- 9E-8	- 9E-7
93	Neptunium-236m (22.5 h)	W, all compounds	3E+3 Bone surf (4E+3)	3E+1 Bone surf (7E+1)	1E-8 -	- 1E-10	- 5E-5	- 5E-4
93	Neptunium-237	W, all compounds	5E-1 Bone surf (1E+0)	4E-3 Bone surf (1E-2)	2E-12 -	- 1E-14	- 2E-8	- 2E-7

			Table 1 Occupational Values			Table 2 Effluent Concentrations		Table 3 Releases to Sewers
			Col. 1	Col. 2	Col. 3	Col. 1	Col. 2	
			Oral Ingestion	Inhalation				
Atomic No.	Radionuclide	Class	ALI (μCi)	ALI (μCi)	DAC (μCi/ml)	Air (μCi/ml)	Water (μCi/ml)	Monthly Average Concentration (μCi/ml)
93	Neptunium-238	W, all compounds	1E+3	6E+1	3E-8	-	2E-5	2E-4
			-	Bone surf (2E+2)	-	2E-10	-	-
93	Neptunium-239	W, all compounds	2E+3	2E+3	9E-7	3E-9	-	-
			LLI wall (2E+3)	-	-	-	2E-5	2E-4
93	Neptunium-240[2]	W, all compounds	2E+4	8E+4	3E-5	1E-7	3E-4	3E-3
94	Plutonium-234	W, all compounds except PuO_2	8E+3	2E+2	9E-8	3E-10	1E-4	1E-3
		Y, PuO_2	-	2E+2	8E-8	3E-10	-	-
94	Plutonium-235[2]	W, see ^{234}Pu	9E+5	3E+6	1E-3	4E-6	1E-2	1E-1
		Y, see ^{234}Pu	-	3E+6	1E-3	3E-6	-	-
94	Plutonium-236	W, see ^{234}Pu	2E+0	2E-2	8E-12	-	-	-
			Bone surf (4E+0)	Bone surf (4E-2)	-	5E-14	6E-8	6E-7
		Y, see ^{234}Pu	-	4E-2	2E-11	6E-14	-	-
94	Plutonium-237	W, see ^{234}Pu	1E+4	3E+3	1E-6	5E-9	2E-4	2E-3
		Y, see ^{234}Pu	-	3E+3	1E-6	4E-9	-	-
94	Plutonium-238	W, see ^{234}Pu	9E-1	7E-3	3E-12	-	-	-
			Bone surf (2E+0)	Bone surf (1E-2)	-	2E-14	2E-8	2E-7
		Y, see ^{234}Pu	-	2E-2	8E-12	2E-14	-	-
94	Plutonium-239	W, see ^{234}Pu	8E-1	6E-3	3E-12	-	-	-
			Bone surf (1E+0)	Bone surf (1E-2)	-	2E-14	2E-8	2E-7
		Y, see ^{234}Pu	-	2E-2	7E-12	-	-	-
			-	Bone surf (2E-2)	-	2E-14	-	-
94	Plutonium-240	W, see ^{234}Pu	8E-1	6E-3	3E-12	-	-	-
			Bone surf (1E+0)	Bone surf (1E-2)	-	2E-14	2E-8	2E-7
		Y, see ^{234}Pu	-	2E-2	7E-12	-	-	-
			-	Bone surf (2E-2)	-	2E-14	-	-
94	Plutonium-241	W, see ^{234}Pu	4E+1	3E-1	1E-10	-	-	-
			Bone surf (7E+1)	Bone surf (6E-1)	-	8E-13	1E-6	1E-5
		Y, see ^{234}Pu	-	8E-1	3E-10	-	-	-
			-	Bone surf (1E+0)	-	1E-12	-	-

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Atomic No.	Radionuclide	Class	Table 1 Occupational Values Col. 1 Oral Ingestion ALI (μCi)	Col. 2 Inhalation ALI (μCi)	Col. 3 Inhalation DAC (μCi/ml)	Table 2 Effluent Concentrations Col. 1 Air (μCi/ml)	Col. 2 Water (μCi/ml)	Table 3 Releases to Sewers Monthly Average Concentration (μCi/ml)
94	Plutonium-242	W, see ^{234}Pu	8E-1	7E-3	3E-12	-	-	-
			Bone surf (1E+0)	Bone surf (1E-2)	-	2E-14	2E-8	2E-7
		Y, see ^{234}Pu	-	2E-2	7E-12	-	-	-
			-	Bone surf (2E-2)	-	2E-14	-	-
94	Plutonium-243	W, see ^{234}Pu	2E+4	4E+4	2E-5	5E-8	2E-4	2E-3
		Y, see ^{234}Pu	-	4E+4	2E-5	5E-8	-	-
94	Plutonium-244	W, see ^{234}Pu	8E-1	7E-3	3E-12	-	-	-
			Bone surf (2E+0)	Bone surf (1E-2)	-	2E-14	2E-8	2E-7
		Y, see ^{234}Pu	-	2E-2	7E-12	-	-	-
			-	Bone surf (2E-2)	-	2E-14	-	-
94	Plutonium-245	W, see ^{234}Pu	2E+3	5E+3	2E-6	6E-9	3E-5	3E-4
		Y, see ^{234}Pu	-	4E+3	2E-6	6E-9	-	-
94	Plutonium-246	W, see ^{234}Pu	4E+2	3E+2	1E-7	4E-10	-	-
			LLI wall (4E+2)	-	-	-	6E-6	6E-5
		Y, see ^{234}Pu	-	3E+2	1E-7	4E-10	-	-
95	Americium-237[2]	W, all compounds	8E+4	3E+5	1E-4	4E-7	1E-3	1E-2
95	Americium-238[2]	W, all compounds	4E+4	3E+3	1E-6	-	5E-4	5E-3
			-	Bone surf (6E+3)	-	9E-9	-	-
95	Americium-239	W, all compounds	5E+3	1E+4	5E-6	2E-8	7E-5	7E-4
95	Americium-240	W, all compounds	2E+3	3E+3	1E-6	4E-9	3E-5	3E-4
95	Americium-241	W, all compounds	8E-1	6E-3	3E-12	-	-	-
			Bone surf (1E+0)	Bone surf (1E-2)	-	2E-14	2E-8	2E-7
95	Americium-242m	W, all compounds	8E-1	6E-3	3E-12	-	-	-
			Bone surf (1E+0)	Bone surf (1E-2)	-	2E-14	2E-8	2E-7
95	Americium-242	W, all compounds	4E+3	8E+1	4E-8	-	5E-5	5E-4
			-	Bone surf (9E+1)	-	1E-10	-	-
95	Americium-243	W, all compounds	8E-1	6E-3	3E-12	-	-	-
			Bone surf (1E+0)	Bone surf (1E-2)	-	2E-14	2E-8	2E-7
95	Americium-244m[2]	W, all compounds	6E+4	4E+3	2E-6	-	-	-
			St. wall (8E+4)	Bone surf (7E+3)	-	1E-8	1E-3	1E-2
95	Americium-244	W, all compounds	3E+3	2E+2	8E-8	-	4E-5	4E-4
			-	Bone surf (3E+2)	-	4E-10	-	-
95	Americium-245	W, all compounds	3E+4	8E+4	3E-5	1E-7	4E-4	4E-3

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Atomic No.	Radionuclide	Class	Table 1 Occupational Values			Table 2 Effluent Concentrations		Table 3 Releases to Sewers
			Col. 1 Oral Ingestion ALI (µCi)	Col. 2 Inhalation ALI (µCi)	Col. 3 Inhalation DAC (µCi/ml)	Col. 1 Air (µCi/ml)	Col. 2 Water (µCi/ml)	Monthly Average Concentration (µCi/ml)
95	Americium-246m[2]	W, all compounds	5E+4	2E+5	8E-5	3E-7	-	-
			St. wall (6E+4)	-	-	-	8E-4	8E-3
95	Americium-246[2]	W, all compounds	3E+4	1E+5	4E-5	1E-7	4E-4	4E-3
96	Curium-238	W, all compounds	2E+4	1E+3	5E-7	2E-9	2E-4	2E-3
96	Curium-240	W, all compounds	6E+1	6E-1	2E-10	-	-	-
			Bone surf (8E+1)	Bone surf (6E-1)	-	9E-13	1E-6	1E-5
96	Curium-241	W, all compounds	1E+3	3E+1	1E-8	-	2E-5	2E-4
			-	Bone surf (4E+1)	-	5E-11	-	-
96	Curium-242	W, all compounds	3E+1	3E-1	1E-10	-	-	-
			Bone surf (5E+1)	Bone surf (3E-1)	-	4E-13	7E-7	7E-6
96	Curium-243	W, all compounds	1E+0	9E-3	4E-12	-	-	-
			Bone surf (2E+0)	Bone surf (2E-2)	-	2E-14	3E-8	3E-7
96	Curium-244	W, all compounds	1E+0	1E-2	5E-12	-	-	-
			Bone surf (3E+0)	Bone surf (2E-2)	-	3E-14	3E-8	3E-7
96	Curium-245	W, all compounds	7E-1	6E-3	3E-12	-	-	-
			Bone surf (1E+0)	Bone surf (1E-2)	-	2E-14	2E-8	2E-7
96	Curium-246	W, all compounds	7E-1	6E-3	3E-12	-	-	-
			Bone surf (1E+0)	Bone surf (1E-2)	-	2E-14	2E-8	2E-7
96	Curium-247	W, all compounds	8E-1	6E-3	3E-12	-	-	-
			Bone surf (1E+0)	Bone surf (1E-2)	-	2E-14	2E-8	2E-7
96	Curium-248	W, all compounds	2E-1	2E-3	7E-13	-	-	-
			Bone surf (4E-1)	Bone surf (3E-3)	-	4E-15	5E-9	5E-8
96	Curium-249[2]	W, all compounds	5E+4	2E+4	7E-6	-	7E-4	7E-3
			-	Bone surf (3E+4)	-	4E-8	-	-
96	Curium-250	W, all compounds	4E-2	3E-4	1E-13	-	-	-
			Bone surf (6E-2)	Bone surf (5E-4)	-	8E-16	9E-10	9E-9
97	Berkelium-245	W, all compounds	2E+3	1E+3	5E-7	2E-9	3E-5	3E-4
97	Berkelium-246	W, all compounds	3E+3	3E+3	1E-6	4E-9	4E-5	4E-4
97	Berkelium-247	W, all compounds	5E-1	4E-3	2E-12	-	-	-
			Bone surf (1E+0)	Bone surf (9E-3)	-	1E-14	2E-8	2E-7
97	Berkelium-249	W, all compounds	2E+2	2E+0	7E-10	-	-	-
			Bone surf (5E+2)	Bone surf (4E+0)	-	5E-12	6E-6	6E-5

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Atomic No.	Radionuclide	Class	Table 1 Occupational Values: Col. 1 Oral Ingestion ALI (μCi)	Col. 2 Inhalation ALI (μCi)	Col. 3 Inhalation DAC (μCi/ml)	Table 2 Effluent Concentrations: Col. 1 Air (μCi/ml)	Col. 2 Water (μCi/ml)	Table 3 Releases to Sewers: Monthly Average Concentration (μCi/ml)
97	Berkelium-250	W, all compounds	9E+3	3E+2	1E-7	-	1E-4	1E-3
			-	Bone surf (7E+2)	-	1E-9	-	-
98	Californium-244[2]	W, all compounds except those given for Y	3E+4	6E+2	2E-7	8E-10	-	-
			St. wall (3E+4)	-	-	-	4E-4	4E-3
		Y, oxides and hydroxides	-	6E+2	2E-7	8E-10	-	-
98	Californium-246	W, see ^{244}Cf	4E+2	9E+0	4E-9	1E-11	5E-6	5E-5
		Y, see ^{244}Cf	-	9E+0	4E-9	1E-11	-	-
98	Californium-248	W, see ^{244}Cf	8E+0	6E-2	3E-11	-	-	-
			Bone surf (2E+1)	Bone surf (1E-1)	-	2E-13	2E-7	2E-6
		Y, see ^{244}Cf	-	1E-1	4E-11	1E-13	-	-
98	Californium-249	W, see ^{244}Cf	5E-1	4E-3	2E-12	-	-	-
			Bone surf (1E+0)	Bone surf (9E-3)	-	1E-14	2E-8	2E-7
		Y, see ^{244}Cf	-	1E-2	4E-12	-	-	-
			-	Bone surf (1E-2)	-	2E-14	-	-
98	Californium-250	W, see ^{244}Cf	1E+0	9E-3	4E-12	-	-	-
			Bone surf (2E+0)	Bone surf (2E-2)	-	3E-14	3E-8	3E-7
		Y, see ^{244}Cf	-	3E-2	1E-11	4E-14	-	-
98	Californium-251	W, see ^{244}Cf	5E-1	4E-3	2E-12	-	-	-
			Bone surf (1E+0)	Bone surf (9E-3)	-	1E-14	2E-8	2E-7
		Y, see ^{244}Cf	-	1E-2	4E-12	-	-	-
			-	Bone surf (1E-2)	-	2E-14	-	-
98	Californium-252	W, see ^{244}Cf	2E+0	2E-2	8E-12	-	-	-
			Bone surf (5E+0)	Bone surf (4E-2)	-	5E-14	7E-8	7E-7
		Y, see ^{244}Cf	-	3E-2	1E-11	5E-14	-	-
98	Californium-253	W, see ^{244}Cf	2E+2	2E+0	8E-10	3E-12	-	-
			Bone surf (4E+2)	-	-	-	5E-6	5E-5
		Y, see ^{244}Cf	-	2E+0	7E-10	2E-12	-	-
98	Californium-254	W, see ^{244}Cf	2E+0	2E-2	9E-12	3E-14	3E-8	3E-7
		Y, see ^{244}Cf	-	2E-2	7E-12	2E-14	-	-
99	Einsteinium-250	W, all compounds	4E+4	5E+2	2E-7	-	6E-4	6E-3
			-	Bone surf (1E+3)	-	2E-9	-	-
99	Einsteinium-251	W, all compounds	7E+3	9E+2	4E-7	-	1E-4	1E-3
			-	Bone surf (1E+3)	-	2E-9	-	-
99	Einsteinium-253	W, all compounds	2E+2	1E+0	6E-10	2E-12	2E-6	2E-5

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Atomic No.	Radionuclide	Class	Table 1 Occupational Values Col. 1 Oral Ingestion ALI (µCi)	Col. 2 Inhalation ALI (µCi)	Col 3 Inhalation DAC (µCi/ml)	Table 2 Effluent Concentrations Col. 1 Air (µCi/ml)	Col. 2 Water (µCi/ml)	Table 3 Releases to Sewers Monthly Average Concentration (µCi/ml)
99	Einsteinium-254m	W, all compounds	3E+2	1E+1	4E-9	1E-11	-	-
			LLI wall (3E+2)	-	-	-	4E-6	4E-5
99	Einsteinium-254	W, all compounds	8E+0	7E-2	3E-11	-	-	-
			Bone surf (2E+1)	Bone surf (1E-1)	-	2E-13	2E-7	2E-6
100	Fermium-252	W, all compounds	5E+2	1E+1	5E-9	2E-11	6E-6	6E-5
100	Fermium-253	W, all compounds	1E+3	1E+1	4E-9	1E-11	1E-5	1E-4
100	Fermium-254	W, all compounds	3E+3	9E+1	4E-8	1E-10	4E-5	4E-4
100	Fermium-255	W, all compounds	5E+2	2E+1	9E-9	3E-11	7E-6	7E-5
100	Fermium-257	W, all compounds	2E+1	2E-1	7E-11	-	-	-
			Bone surf (4E+1)	Bone surf (2E-1)	-	3E-13	5E-7	5E-6
101	Mendelevium-257	W, all compounds	7E+3	8E+1	4E-8	-	1E-4	1E-3
			-	Bone surf (9E+1)	-	1E-10	-	-
101	Mendelevium-258	W, all compounds	3E+1	2E-1	1E-10	-	-	-
			Bone surf (5E+1)	Bone surf (3E-1)	-	5E-13	6E-7	6E-6
-	Any single radionuclide not listed above with decay mode other than alpha emission or spontaneous fission and with radioactive half-life less than 2 hours	Submersion[1]	-	2E+2	1E-7	1E-9	-	-
-	Any single radionuclide not listed above with decay mode other than alpha emission or spontaneous fission and with radioactive half-life greater than 2 hours	. . . . .	-	2E-1	1E-10	1E-12	1E-8	1E-7
-	Any single radionuclide not listed above that decays by alpha emission or spontaneous fission, or any mixture for which either the identity or the concentration of any radionuclide in the mixture is not known	. . .	-	4E-4	2E-13	1E-15	2E-9	2E-8

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FOOTNOTES:

[1]"Submersion" means that values given are for submersion in a hemispherical semi-infinite cloud of airborne material.

[2]These radionuclides have radiological half-lives of less than 2 hours. The total effective dose equivalent received during operations with these radionuclides might include a significant contribution from external exposure. The DAC values for all radionuclides, other than those designated Class "Submersion," are based upon the committed effective dose equivalent due to the intake of the radionuclide into the body and do NOT include potentially significant contributions to dose equivalent from external exposures. The licensee may substitute 1E-7 μCi/ml for the listed DAC to account for the submersion dose prospectively, but should use individual monitoring devices or other radiation measuring instruments that measure external exposure to demonstrate compliance with the limits. (See § 20.1203.)

[3]For soluble mixtures of U-238, U-234, and U-235 in air, chemical toxicity may be the limiting factor (see § 20.1201(e)). If the percent by weight (enrichment) of U-235 is not greater than 5, the concentration value for a 40-hour workweek is 0.2 milligrams uranium per cubic meter of air average. For any enrichment, the product of the average concentration and time of exposure during a 40-hour workweek shall not exceed 8E-3 (SA) μCi-hr/ml, where SA is the specific activity of the uranium inhaled. The specific activity for natural uranium is 6.77E-7 curies per gram U. The specific activity for other mixtures of U-238, U-235, and U-234, if not known, shall be:

SA = 3.6E-7 curies/gram U U-depleted

$SA = [0.4 + 0.38\ (\text{enrichment}) + 0.0034\ (\text{enrichment})^2]\ E\text{-}6$, enrichment ≥ 0.72

where enrichment is the percentage by weight of U-235, expressed as percent.

NOTE:

1. If the identity of each radionuclide in a mixture is known but the concentration of one or more of the radionuclides in the mixture is not known, the DAC for the mixture shall be the most restrictive DAC of any radionuclide in the mixture

2. If the identity of each radionuclide in the mixture is not known, but it is known that certain radionuclides specified in this appendix are not present in the mixture, the inhalation ALI, DAC, and effluent and sewage concentrations for the mixture are the lowest values specified in this appendix for any radionuclide that is not known to be absent from the mixture; or

	Table 1 Occupational Values			Table 2 Effluent Concentrations		Table 3 Releases to Sewers
	Col. 1	Col. 2	Col. 3	Col. 1	Col. 2	
	Oral Ingestion	Inhalation				
Radionuclide	ALI (μCi)	ALI (μCi)	DAC (μCi/ml)	Air (μCi/ml)	Water (μCi/ml)	Monthly Average Concentration (μCi/ml)
If it is known that Ac-227-D and Cm-250-W are not present	-	7E-4	3E-13	-	-	-
If, in addition, it is known that Ac-227-W,Y, Th-229-W,Y, Th-230-W, Th-232-W,Y, Pa-231-W,Y, Np-237-W, Pu-239-W, Pu-240-W, Pu-242-W, Am-241-W, Am-242m-W, Am-243-W, Cm-245-W, Cm-246-W, Cm-247-W, Cm-248-W, Bk-247-W, Cf-249-W, and Cf-251-W are not present	-	7E-3	3E-12	-	-	-
If, in addition, it is known that Sm-146-W, Sm-147-W, Gd-148-D,W, Gd-152-D,W, Th-228-W,Y, Th-230-Y, U-232-Y, U-233-Y, U-234-Y, U-235-Y, U-236-Y, U-238-Y, Np-236-W, Pu-236-W,Y, Pu-238-W,Y, Pu-239-Y, Pu-240-Y, Pu-242-Y, Pu-244-W,Y, Cm-243-W, Cm-244-W, Cf-248-W, Cf-249-Y, Cf-250-W,Y, Cf-251-Y, Cf-252-W,Y, and Cf-254-W,Y are not present	-	7E-2	3E-11	-	-	-
If, in addition, it is known that Pb-210-D, Bi-210m-W, Po-210-D,W, Ra-223-W, Ra-225-W, Ra-226-W, Ac-225-D,W,Y, Th-227-W,Y, U-230-D,W,Y, U-232-D,W, Pu-241-W, Cm-240-W, Cm-242-W, Cf-248-Y, Es-254-W, Fm-257-W, and Md-258-W are not present	-	7E-1	3E-10	-	-	-

Radionuclide	Table 1 Occupational Values Col. 1 Oral Ingestion ALI (µCi)	Col. 2 Inhalation ALI (µCi)	Col. 3 Inhalation DAC (µCi/ml)	Table 2 Effluent Concentrations Col. 1 Air (µCi/ml)	Col. 2 Water (µCi/ml)	Table 3 Releases to Sewers Monthly Average Concentration (µCi/ml)
If, in addition, it is known that Si-32-Y, Ti-44-Y, Fe-60-D, Sr-90-Y, Zr-93-D, Cd-113m-D, Cd-113-D, In-115-D,W, La-138-D, Lu-176-W, Hf-178m-D,W, Hf-182-D,W, Bi-210m-D, Ra-224-W, Ra-228-W, Ac-226-D,W,Y, Pa-230-W,Y, U-233-D,W, U-234-D,W, U-235-D,W, U-236-D,W, U-238-D,W, Pu-241-Y, Bk-249-W, Cf-253-W,Y, and Es-253-W are not present	-	7E+0	3E-9	-	-	-
If it is known that Ac-227-D,W,Y, Th-229-W,Y, Th-232-W,Y, Pa-231-W,Y, Cm-248-W, and Cm-250-W are not present	-	-		1E-14	-	-
If, in addition, it is known that Sm-146-W, Gd-148-D,W, Gd-152-D, Th-228-W,Y, Th-230-W,Y, U-232-Y, U-233-Y, U-234-Y, U-235-Y, U-236-Y, U-238-Y, U-Nat-Y, Np-236-W, Np-237-W, Pu-236-W,Y, Pu-238-W,Y, Pu-239-W,Y, Pu-240-W,Y, Pu-242-W,Y, Pu-244-W,Y, Am-241-W, Am-242m-W, Am-243-W, Cm-243-W, Cm-244-W, Cm-245-W, Cm-246-W, Cm-247-W, Bk-247-W, Cf-249-W,Y, Cf-250-W,Y, Cf-251-W,Y, Cf-252-W,Y, and Cf-254-W,Y are not present	-	-	-	1E-13	-	-
If, in addition, it is known that Sm-147-W, Gd-152-W, Pb-210-D, Bi-210m-W, Po-210-D,W, Ra-223-W, Ra-225-W, Ra-226-W, Ac-225-D,W,Y, Th-227-W,Y, U-230-D,W,Y, U-232-D,W, U-Nat-W, Pu-241-W, Cm-240-W, Cm-242-W, Cf-248-W,Y, Es-254-W, Fm-257-W, and Md-258-W are not present	-	-	-	1E-12	-	-
If, in addition it is known that Fe-60, Sr-90, Cd-113m, Cd-113, In-115, I-129, Cs-134, Sm-145, Sm-147, Gd-148, Gd-152, Hg-194 (organic), Bi-210m, Ra-223, Ra-224, Ra-225, Ac-225, Th-228, Th-230, U-233, U-234, U-235, U-236, U-238, U-Nat, Cm-242, Cf-248, Es-254, Fm-257, and Md-258 are not present	-	-	-	-	1E-6	1E-5

3 If a mixture of radionuclides consists of uranium and its daughters in ore dust (10 µm AMAD particle distribution assumed) prior to chemical separation of the uranium from the ore, the following values may be used for the DAC of the mixture: 6E-11 µCi of gross alpha activity from uranium-238, uranium-234, thorium-230, and radium-226 per milliliter of air; 3E-11 µCi of natural uranium per milliliter of air, or 45 micrograms of natural uranium per cubic meter of air

4 If the identity and concentration of each radionuclide in a mixture are known, the limiting values should be derived as follows: determine, for each radionuclide in the mixture, the ratio between the concentration present in the mixture and the concentration otherwise established in Appendix B for the specific radionuclide when not in a mixture The sum of such ratios for all of the radionuclides in the mixture may not exceed "1" (i.e., "unity")

Example. If radionuclides "A," "B," and "C" are present in concentrations C_A, C_B, and C_C, and if the applicable DACs are DAC_A, DAC_B, and DAC_C, respectively, then the concentrations shall be limited so that the following relationship exists.

$$\frac{C_A}{DAC_A} + \frac{C_B}{DAC_B} + \frac{C_C}{DAC_C} \leq 1$$

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APPENDIX C TO PART 20

QUANTITIES [1] OF LICENSED MATERIAL REQUIRING LABELING

Radionuclide	Quantity (μCi)
Hydrogen-3	1,000
Beryllium-7	1,000
Beryllium-10	1
Carbon-11	1,000
Carbon-14	100
Fluorine-18	1,000
Sodium-22	10
Sodium-24	100
Magnesium-28	100
Aluminum-26	10
Silicon-31	1,000
Silicon-32	1
Phosphorus-32	10
Phosphorus-33	100
Sulfur-35	100
Chlorine-36	10
Chlorine-38	1,000
Chlorine-39	1,000
Argon-39	1,000
Argon-41	1,000
Potassium-40	100
Potassium-42	1,000
Potassium-43	1,000
Potassium-44	1,000
Potassium-45	1,000
Calcium-41	100
Calcium-45	100
Calcium-47	100
Scandium-43	1,000
Scandium-44m	100
Scandium-44	100
Scandium-46	10
Scandium-47	100
Scandium-48	100
Scandium-49	1,000
Titanium-44	1
Titanium-45	1,000
Vanadium-47	1,000
Vanadium-48	100
Vanadium-49	1,000
Chromium-48	1,000
Chromium-49	1,000
Chromium-51	1,000
Manganese-51	1,000
Manganese-52m	1,000
Manganese-52	100
Manganese-53	1,000
Manganese-54	100
Manganese-56	1,000
Iron-52	100
Iron-55	100
Iron-59	10
Iron-60	1
Cobalt-55	100
Cobalt-56	10
Cobalt-57	100
Cobalt-58m	1,000
Cobalt-58	100
Cobalt-60m	1,000
Cobalt-60	1
Cobalt-61	1,000
Cobalt-62m	1,000
Nickel-56	100
Nickel-57	100
Nickel-59	100
Nickel-63	100
Nickel-65	1,000
Nickel-66	10
Copper-60	1,000
Copper-61	1,000
Copper-64	1,000

QUANTITIES [1] OF LICENSED MATERIAL REQUIRING LABELING—Continued

Radionuclide	Quantity (μCi)
Copper-67	1,000
Zinc-62	100
Zinc-63	1,000
Zinc-65	10
Zinc-69m	100
Zinc-69	1,000
Zinc-71m	1,000
Zinc-72	100
Gallium-65	1,000
Gallium-66	100
Gallium-67	1,000
Gallium-68	1,000
Gallium-70	1,000
Gallium-72	100
Gallium-73	1,000
Germanium-66	1,000
Germanium-67	1,000
Germanium-68	10
Germanium-69	1,000
Germanium-71	1,000
Germanium-75	1,000
Germanium-77	1,000
Germanium-78	1,000
Arsenic-69	1,000
Arsenic-70	1,000
Arsenic-71	100
Arsenic-72	100
Arsenic-73	100
Arsenic-74	100
Arsenic-76	100
Arsenic-77	100
Arsenic-78	1,000
Selenium-70	1,000
Selenium-73m	1,000
Selenium-73	100
Selenium-75	100
Selenium-79	100
Selenium-81m	1,000
Selenium-81	1,000
Selenium-83	1,000
Bromine-74m	1,000
Bromine-74	1,000
Bromine-75	1,000
Bromine-76	100
Bromine-77	1,000
Bromine-80m	1,000
Bromine-80	1,000
Bromine-82	100
Bromine-83	1,000
Bromine-84	1,000
Krypton-74	1,000
Krypton-76	1,000
Krypton-77	1,000
Krypton-79	1,000
Krypton-81	1,000
Krypton-83m	1,000
Krypton-85m	1,000
Krypton-85	1,000
Krypton-87	1,000
Krypton-88	1,000
Rubidium-79	1,000
Rubidium-81m	1,000
Rubidium-81	1,000
Rubidium-82m	1,000
Rubidium-83	100
Rubidium-84	100
Rubidium-86	100
Rubidium-87	100
Rubidium-88	1,000
Rubidium-89	1,000
Strontium-80	100
Strontium-81	1,000
Strontium-83	100
Strontium-85m	1,000
Strontium-85	100
Strontium-87m	1,000

QUANTITIES [1] OF LICENSED MATERIAL REQUIRING LABELING—Continued

Radionuclide	Quantity (μCi)
Strontium-89	10
Strontium-90	0.1
Strontium-91	100
Strontium-92	100
Yttrium-86m	1,000
Yttrium-86	100
Yttrium-87	100
Yttrium-88	10
Yttrium-90m	1,000
Yttrium-90	10
Yttrium-91m	1,000
Yttrium-91	10
Yttrium-92	100
Yttrium-93	100
Yttrium-94	1,000
Yttrium-95	1,000
Zirconium-86	100
Zirconium-88	10
Zirconium-89	100
Zirconium-93	1
Zirconium-95	10
Zirconium-97	100
Niobium-88	1,000
Niobium-89m (66 min)	1,000
Niobium-89 (122 min)	1,000
Niobium-90	100
Niobium-93m	10
Niobium-94	1
Niobium-95m	100
Niobium-95	100
Niobium-96	100
Niobium-97	1,000
Niobium-98	1,000
Molybdenum-90	100
Molybdenum-93m	100
Molybdenum-93	10
Molybdenum-99	100
Molybdenum-101	1,000
Technetium-93m	1,000
Technetium-93	1,000
Technetium-94m	1,000
Technetium-94	1,000
Technetium-96m	1,000
Technetium-96	100
Technetium-97m	100
Technetium-97	1,000
Technetium-98	10
Technetium-99m	1,000
Technetium-99	100
Technetium-101	1,000
Technetium-104	1,000
Ruthenium-94	1,000
Ruthenium-97	1,000
Ruthenium-103	100
Ruthenium-105	1,000
Ruthenium-106	1
Rhodium-99m	1,000
Rhodium-99	100
Rhodium-100	100
Rhodium-101m	1,000
Rhodium-101	10
Rhodium-102m	10
Rhodium-102	10
Rhodium-103m	1,000
Rhodium-105	100
Rhodium-106m	1,000
Rhodium-107	1,000
Palladium-100	100
Palladium-101	1,000
Palladium-103	100
Palladium-107	10
Palladium-109	100
Silver-102	1,000
Silver-103	1,000
Silver-104m	1,000
Silver-104	1,000

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QUANTITIES [1] OF LICENSED MATERIAL REQUIRING LABELING—Continued

Radionuclide	Quantity (μCi)
Silver-105	100
Silver-106m	100
Silver-106	1,000
Silver-108m	1
Silver-110m	10
Silver-111	100
Silver-112	100
Silver-115	1,000
Cadmium-104	1,000
Cadmium-107	1,000
Cadmium-109	1
Cadmium-113m	0.1
Cadmium-113	100
Cadmium-115m	10
Cadmium-115	100
Cadmium-117m	1,000
Cadmium-117	1,000
Indium-109	1,000
Indium-110 (69.1min.)	1,000
Indium-110 (4 9h)	1,000
Indium-111	100
Indium-112	1,000
Indium-113m	1,000
Indium-114m	10
Indium-115m	1,000
Indium-115	100
Indium-116m	1,000
Indium-117m	1,000
Indium-117	1,000
Indium-119m	1,000
Tin-110	100
Tin-111	1,000
Tin-113	100
Tin-117m	100
Tin-119m	100
Tin-121m	100
Tin-121	1,000
Tin-123m	1,000
Tin-123	10
Tin-125	10
Tin-126	10
Tin-127	1,000
Tin-128	1,000
Antimony-115	1,000
Antimony-116m	1,000
Antimony-116	1,000
Antimony-117	1,000
Antimony-118m	1,000
Antimony-119	1,000
Antimony-120 (16min.)	1,000
Antimony-120 (5 76d)	100
Antimony-122	100
Antimony-124m	1,000
Antimony-124	10
Antimony-125	100
Antimony-126m	1,000
Antimony-126	100
Antimony-127	100
Antimony-128 (10 4min.)	1,000
Antimony-128 (9 01h)	100
Antimony-129	100
Antimony-130	1,000
Antimony-131	1,000
Tellurium-116	1,000
Tellurium-121m	10
Tellurium-121	100
Tellurium-123m	10
Tellurium-123	100
Tellurium-125m	10
Tellurium-127m	10
Tellurium-127	1,000
Tellurium-129m	10
Tellurium-129	1,000
Tellurium-131m	10
Tellurium-131	100

QUANTITIES [1] OF LICENSED MATERIAL REQUIRING LABELING—Continued

Radionuclide	Quantity (μCi)
Tellurium-132	10
Tellurium-133m	100
Tellurium-133	1,000
Tellurium-134	1,000
Iodine-120m	1,000
Iodine-120	100
Iodine-121	1,000
Iodine-123	100
Iodine-124	10
Iodine-125	1
Iodine-126	1
Iodine-128	1,000
Iodine-129	1
Iodine-130	10
Iodine-131	1
Iodine-132m	100
Iodine-132	100
Iodine-133	10
Iodine-134	1,000
Iodine-135	100
Xenon-120	1,000
Xenon-121	1,000
Xenon-122	1,000
Xenon-123	1,000
Xenon-125	1,000
Xenon-127	1,000
Xenon-129m	1,000
Xenon-131m	1,000
Xenon-133m	1,000
Xenon-133	1,000
Xenon-135m	1,000
Xenon-135	1,000
Xenon-138	1,000
Cesium-125	1,000
Cesium-127	1,000
Cesium-129	1,000
Cesium-130	1,000
Cesium-131	1,000
Cesium-132	100
Cesium-134m	1,000
Cesium-134	10
Cesium-135m	1,000
Cesium-135	100
Cesium-136	10
Cesium-137	10
Cesium-138	1,000
Barium-126	1,000
Barium-128	100
Barium-131m	1,000
Barium-131	100
Barium-133m	100
Barium-133	100
Barium-135m	100
Barium-139	1,000
Barium-140	100
Barium-141	1,000
Barium-142	1,000
Lanthanum-131	1,000
Lanthanum-132	100
Lanthanum-135	1,000
Lanthanum-137	10
Lanthanum-138	100
Lanthanum-140	100
Lanthanum-141	100
Lanthanum-142	1,000
Lanthanum-143	1,000
Cerium-134	100
Cerium-135	100
Cerium-137m	100
Cerium-137	1,000
Cerium-139	100
Cerium-141	100
Cerium-143	100
Cerium-144	1
Praseodymium-138	1,000
Praseodymium-137	1,000

QUANTITIES [1] OF LICENSED MATERIAL REQUIRING LABELING—Continued

Radionuclide	Quantity (μCi)
Praseodymium-138m	1,000
Praseodymium-139	1,000
Praseodymium-142m	1,000
Praseodymium-142	100
Praseodymium-143	100
Praseodymium-144	1,000
Praseodymium-145	100
Praseodymium-147	1,000
Neodymium-136	1,000
Neodymium-138	100
Neodymium-139m	1,000
Neodymium-139	1,000
Neodymium-141	1,000
Neodymium-147	100
Neodymium-149	1,000
Neodymium-151	1,000
Promethium-141	1,000
Promethium-143	100
Promethium-144	10
Promethium-145	10
Promethium-146	1
Promethium-147	10
Promethium-148m	10
Promethium-148	10
Promethium-149	100
Promethium-150	1,000
Promethium-151	100
Samarium-141m	1,000
Samarium-141	1,000
Samarium-142	1,000
Samarium-145	100
Samarium-146	1
Samarium-147	100
Samarium-151	10
Samarium-153	100
Samarium-155	1,000
Samarium-156	1,000
Europium-145	100
Europium-146	100
Europium-147	100
Europium-148	10
Europium-149	100
Europium-150 (12.62h)	100
Europium-150 (34 2y)	1
Europium-152m	100
Europium-152	1
Europium-154	1
Europium-155	10
Europium-156	100
Europium-157	100
Europium-158	1,000
Gadolinium-145	1,000
Gadolinium-146	10
Gadolinium-147	100
Gadolinium-148	0 001
Gadolinium-149	100
Gadolinium-151	10
Gadolinium-152	100
Gadolinium-153	10
Gadolinium-159	100
Terbium-147	1,000
Terbium-149	100
Terbium-150	1,000
Terbium-151	100
Terbium-153	1,000
Terbium-154	100
Terbium-155	1,000
Terbium-156m (5.0h)	1,000
Terbium-156m (24 4h)	1,000
Terbium-156	100
Terbium-157	10
Terbium-158	1
Terbium-160	10
Terbium-161	100
Dysprosium-155	1,000
Dysprosium-157	1,000

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QUANTITIES [1] OF LICENSED MATERIAL REQUIRING LABELING—Continued

Radionuclide	Quantity (μCi)
Dysprosium-159	100
Dysprosium-165	1,000
Dysprosium-166	100
Holmium-155	1,000
Holmium-157	1,000
Holmium-159	1,000
Holmium-161	1,000
Holmium-162m	1,000
Holmium-162	1,000
Holmium-164m	1,000
Holmium-164	1,000
Holmium-166m	1
Holmium-166	100
Holmium-167	1,000
Erbium-161	1,000
Erbium-165	1,000
Erbium-169	100
Erbium-171	100
Erbium-172	100
Thulium-162	1,000
Thulium-166	100
Thulium-167	100
Thulium-170	10
Thulium-171	10
Thulium-172	100
Thulium-173	100
Thulium-175	1,000
Ytterbium-162	1,000
Ytterbium-166	100
Ytterbium-167	1,000
Ytterbium-169	100
Ytterbium-175	100
Ytterbium-177	1,000
Ytterbium-178	1,000
Lutetium-169	100
Lutetium-170	100
Lutetium-171	100
Lutetium-172	100
Lutetium-173	10
Lutetium-174m	10
Lutetium-174	10
Lutetium-176m	1,000
Lutetium-176	100
Lutetium-177m	10
Lutetium-177	100
Lutetium-178m	1,000
Lutetium-178	1,000
Lutetium-179	1,000
Hafnium-170	100
Hafnium-172	1
Hafnium-173	1,000
Hafnium-175	100
Hafnium-177m	1,000
Hafnium-178m	0.1
Hafnium-179m	10
Hafnium-180m	1,000
Hafnium-181	10
Hafnium-182m	1,000
Hafnium-182	0.1
Hafnium-183	1,000
Hafnium-184	100
Tantalum-172	1,000
Tantalum-173	1,000
Tantalum-174	1,000
Tantalum-175	1,000
Tantalum-176	100
Tantalum-177	1,000
Tantalum-178	1,000
Tantalum-179	100
Tantalum-180m	1,000
Tantalum-180	100
Tantalum-182m	1,000
Tantalum-182	10
Tantalum-183	100
Tantalum-184	100
Tantalum-185	1,000

QUANTITIES [1] OF LICENSED MATERIAL REQUIRING LABELING—Continued

Radionuclide	Quantity (μCi)
Tantalum-186	1,000
Tungsten-176	1,000
Tungsten-177	1,000
Tungsten-178	1,000
Tungsten-179	1,000
Tungsten-181	1,000
Tungsten-185	100
Tungsten-187	100
Tungsten-188	10
Rhenium-177	1,000
Rhenium-178	1,000
Rhenium-181	1,000
Rhenium-182 (12.7h)	1,000
Rhenium-182 (64 0h)	100
Rhenium-184m	10
Rhenium-184	100
Rhenium-186m	10
Rhenium-186	100
Rhenium-187	1,000
Rhenium-188m	1,000
Rhenium-188	100
Rhenium-189	100
Osmium-180	1,000
Osmium-181	1,000
Osmium-182	100
Osmium-185	100
Osmium-189m	1,000
Osmium-191m	1,000
Osmium-191	100
Osmium-193	100
Osmium-194	1
Indium-182	1,000
Indium-184	1,000
Indium-185	1,000
Indium-186	100
Indium-187	1,000
Indium-188	100
Indium-189	100
Indium-190m	1,000
Indium-190	100
Indium-192 (73 8d)	1
Indium-192m (1.4mn.)	10
Indium-194m	10
Indium-194	100
Indium-195m	1,000
Iridium-195	1,000
Platinum-186	1,000
Platinum-188	100
Platinum-189	1,000
Platinum-191	100
Platinum-193m	100
Platinum-193	1,000
Platinum-195m	100
Platinum-197m	1,000
Platinum-197	100
Platinum-199	1,000
Platinum-200	100
Gold-193	1,000
Gold-194	100
Gold-195	10
Gold-198m	100
Gold-198	100
Gold-199	100
Gold-200m	100
Gold-200	1,000
Gold-201	1,000
Mercury-193m	100
Mercury-193	1,000
Mercury-194	1
Mercury-195m	100
Mercury-195	1,000
Mercury-197m	100
Mercury-197	1,000
Mercury-199m	1,000
Mercury-203	100
Thallium-194m	1,000

QUANTITIES [1] OF LICENSED MATERIAL REQUIRING LABELING—Continued

Radionuclide	Quantity (μCi)
Thallium-194	1,000
Thallium-195	1,000
Thallium-197	1,000
Thallium-198m	1,000
Thallium-198	1,000
Thallium-199	1,000
Thallium-200	1,000
Thallium-201	1,000
Thallium-202	100
Thallium-204	100
Lead-195m	1,000
Lead-198	1,000
Lead-199	1,000
Lead-200	100
Lead-201	1,000
Lead-202m	1,000
Lead-202	10
Lead-203	1,000
Lead-205	100
Lead-209	1,000
Lead-210	0.01
Lead-211	100
Lead-212	1
Lead-214	100
Bismuth-200	1,000
Bismuth-201	1,000
Bismuth-202	1,000
Bismuth-203	100
Bismuth-205	100
Bismuth-206	100
Bismuth-207	10
Bismuth-210m	0.1
Bismuth-210	1
Bismuth-212	10
Bismuth-213	10
Bismuth-214	100
Polonium-203	1,000
Polonium-205	1,000
Polonium-207	1,000
Polonium-210	0.1
Astatine-207	100
Astatine-211	10
Radon-220	1
Radon-222	1
Francium-222	100
Francium-223	100
Radium-223	0 1
Radium-224	0.1
Radium-225	0.1
Radium-226	0.1
Radium-227	1,000
Radium-228	0.1
Actinium-224	1
Actinium-225	0.01
Actinium-226	0.1
Actinium-227	0.001
Actinium-228	1
Thorium-226	10
Thorium-227	0 01
Thorium-228	0 001
Thorium-229	0.001
Thorium-230	0 001
Thorium-231	100
Thorium-232	100
Thorium-234	10
Thorium-natural	100
Protactinium-227	10
Protactinium-228	1
Protactinium-230	0.1
Protactinium-231	0 001
Protactinium-232	1
Protactinium-233	100
Protactinium-234	100
Uranium-230	0 01
Uranium-231	100
Uranium-232	0 001

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QUANTITIES [1] OF LICENSED MATERIAL REQUIRING LABELING—Continued

Radionuclide	Quantity (μCi)
Uranium-233	0.001
Uranium-234	0.001
Uranium-235	0.001
Uranium-236	0.001
Uranium-237	100
Uranium-238	100
Uranium-239	1,000
Uranium-240	100
Uranium-natural	100
Neptunium-232	100
Neptunium-233	1,000
Neptunium-234	100
Neptunium-235	100
Neptunium-236 (1.15x10⁵y)	0.001
Neptunium-236 (22.5h)	1
Neptunium-237	0.001
Neptunium-238	10
Neptunium-239	100
Neptunium-240	1,000
Plutonium-234	10
Plutonium-235	1,000
Plutonium-236	0.001
Plutonium-237	100
Plutonium-238	0.001
Plutonium-239	0.001
Plutonium-240	0.001
Plutonium-241	0.01
Plutonium-242	0.001
Plutonium-243	1,000
Plutonium-244	0.001
Plutonium-245	100
Americium-237	1,000
Americium-238	100
Americium-239	1,000
Americium-240	100
Americium-241	0.001
Americium-242m	0.001
Americium-242	10
Americium-243	0.001

QUANTITIES [1] OF LICENSED MATERIAL REQUIRING LABELING—Continued

Radionuclide	Quantity (μCi)
Americium-244m	100
Americium-244	10
Americium-245	1,000
Americium-246m	1,000
Americium-248	1,000
Curium-238	100
Curium-240	0.1
Curium-241	1
Curium-242	0.01
Curium-243	0.001
Curium-244	0.001
Curium-245	0.001
Curium-246	0.001
Curium-247	0.001
Curium-248	0.001
Curium-249	1,000
Berkelium-245	100
Berkelium-246	100
Berkelium-247	0.001
Berkelium-249	0.1
Berkelium-250	10
Californium-244	100
Californium-246	1
Californium-248	0.01
Californium-249	0.001
Californium-250	0.001
Californium-251	0.001
Californium-252	0.001
Californium-253	0.1
Californium-254	0.001
Any alpha emitting radionuclide not listed above or mixtures of alpha emitters of unknown composition	0.001
Einsteinium-250	100
Einsteinium-251	100
Einsteinium-253	0.1
Einsteinium-254m	1
Einsteinium-254	0.01
Fermium-252	1

QUANTITIES [1] OF LICENSED MATERIAL REQUIRING LABELING—Continued

Radionuclide	Quantity (μCi)
Fermium-253	1
Fermium-254	10
Fermium-255	1
Fermium-257	0.01
Mendelevium-257	10
Mendelevium-258	0.01
Any radionuclide other than alpha emitting radionuclides not listed above, or mixtures of beta emitters of unknown composition	0.01

[1] The quantities listed above were derived by taking 1/10th of the most restrictive ALI listed in table 1, columns 1 and 2, of appendix B to §§ 20.1001–20.2401 of this part, rounding to the nearest factor of 10, and arbitrarily constraining the values listed between 0.001 and 1,000 μCi. Values of 100 μCi have been assigned for radionuclides having a radioactive half-life in excess of 10⁹ years (except rhenium, 1000 μCi) to take into account their low specific activity.

Note: For purposes of §§ 20.1902(e), 20.1905(a), and 20.2201(a) where there is involved a combination of radionuclides in known amounts, the limit for the combination should be derived as follows: determine, for each radionuclide in the combination, the ratio between the quantity present in the combination and the limit otherwise established for the specific radionuclide when not in combination. The sum of such ratios for all radionuclides in the combination may not exceed "1" (i.e., "unity").

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Appendix D to part 20—
United States Nuclear Regulatory Commission Regional Offices

	Address	Telephone (24 hour)
Region I: Connecticut, Delaware, District of Columbia, Maine, Maryland, Massachusetts, New Hampshire, New Jersey, New York, Pennsylvania, Rhode Island, and Vermont.	USNRC, Region I, 475 Allendale Road, King of Prussia, PA 19406.	(610) 337-5000, (FTS) 346-5000.
Region II: Alabama, Florida, Georgia, Kentucky, Mississippi, North Carolina, Puerto Rico, South Carolina, Tennessee, Virginia, Virgin Islands, and West Virginia.	USNRC, Region II, Atlanta Federal Center, 61 Forsyth Street, SW., Suite 23T85, Atlanta, GA 30303.	(404) 562-4400
Region III. Illinois, Indiana, Iowa, Michigan, Minnesota, Missouri, Ohio, and Wisconsin.	USNRC, Region III, 801 Warrenville Road, Lisle, IL 60532-4351.	(708) 829-9500, (FTS) 829-9500
Region IV: Alaska, Arizona, Arkansas, California, Colorado, Hawaii, Idaho, Kansas, Louisiana, Montana, Nebraska, Nevada, New Mexico, North Dakota, Oklahoma, Oregon, South Dakota, Texas, Utah, Washington, Wyoming, and the U.S. territories and possessions in the Pacific.	USNRC, Region IV, 611 Ryan Plaza Drive, Suite 400, Arlington, TX 76011.	(817) 860-8100 (FTS) 728-8100
Region IV: Field Office	USNRC, Region IV, Walnut Creek Field Office, 1450 Maria Lane, Suite 300, Walnut Creek, CA 94596.	(510) 975-0200

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Appendix E to part 20 — [Reserved]

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Appendix F to part 20 — Requirements for Low-Level-Waste Transfer for Disposal at Land Disposal Facilities and Manifests

I. Manifest

The shipment manifest shall contain the name, address, and telephone number of the person generating the waste. The manifest shall also include the name, address, and telephone number or the name and EPA hazardous waste identification number of the person transporting the waste to the land disposal facility. The manifest must also indicate as completely as practical: a physical description of the waste, the volume, radionuclide identity and quantity, the total radioactivity, and the principal chemical form. The solidification agent must be specified. Waste containing more than 0.1% chelating agents by weight must be identified and the weight percentage of the chelating agent estimated. Wastes classified as Class A, Class B, or Class C in § 61.55 of this chapter must be clearly identified as such in the manifest. The total quantity of the radionuclides ^{3}H, ^{14}C, ^{99}Tc, and ^{129}I must be shown. The manifest required by this paragraph may be shipping papers used to meet Department of Transportation or Environmental Protection Agency regulations or requirements of the receiver, provided all the required information is included. Copies of manifests required by this section may be legible carbon copies or legible photocopies.

II. Certification

The waste generator shall include in the shipment manifest a certification that the transported materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the Commission. An authorized representative of the waste generator shall sign and date the manifest.

III. Control and Tracking

A. Any generating licensee who transfers radioactive waste to a land disposal facility or a licensed waste collector shall comply with the requirements in paragraphs A.1 through 8 of this section. Any generating licensee who transfers waste to a licensed waste processor who treats or repackages waste shall comply with the requirements of paragraphs A.4 through 8 of this section. A licensee shall:

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1. Prepare all wastes so that the waste is classified according to § 61.55 of this chapter and meets the waste characteristics requirements in § 61.56 of this chapter;
2. Label each package of waste to identify whether it is Class A waste, Class B waste, or Class C waste, in accordance with § 61.55 of this chapter;
3. Conduct a quality control program to ensure compliance with §§ 61.55 and 61.56 of this chapter; the program must include management evaluation of audits;
4. Prepare shipping manifests to meet the requirements of sections I and II of this appendix;
5. Forward a copy of the manifest to the intended recipient, at the time of shipment, or deliver to a collector at the time the waste is collected, obtaining acknowledgment of receipt in the form of a signed copy of the manifest or equivalent documentation from the collector;
6. Include one copy of the manifest with the shipment;

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7. Retain a copy of the manifest and documentation of acknowledgement of receipt as the record of transfer of licensed material as required by parts 30, 40, and 70 of this chapter. This includes those manifests and documents required under the standards for protection against radiation in effect prior to January 1, 1994; and

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8. For any shipments or any part of a shipment for which acknowledgment of receipt has not been received within the times set forth in this section, conduct an investigation in accordance with paragraph E of this appendix.

B. Any waste collector licensee who handles only prepackaged waste shall:

1. Acknowledge receipt of the waste from the generator within 1 week of receipt by returning a signed copy of the manifest or equivalent documentation;
2. Prepare a new manifest to reflect consolidated shipments; the new manifest shall serve as a listing or index for the detailed generator manifests. Copies of the generator manifests shall be a part of the new manifest. The waste collector may prepare a new manifest without attaching the generator manifests, provided the new manifest contains for each package the information specified in section I of this appendix. The collector licensee shall certify that nothing has been done to the waste that would invalidate the generator's certification;
3. Forward a copy of the new manifest to the land disposal facility operator at the time of shipment;
4. Include the new manifest with the shipment to the disposal site;

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5. Retain a copy of the manifest and documentation of acknowledgement of receipt as the record of transfer of licensed material as required by parts 30, 40, and 70 of this chapter, and retain information from generator manifest until the license is terminated. This includes those manifests and documents of acknowledgement of receipt required under the standards for protection against radiation in effect prior to January 1, 1994; and

6. For any shipments or any part of a shipment for which acknowledgment of receipt is not received within the times set forth in this section, conduct an investigation in accordance with section III, E of this appendix.

C. Any licensed waste processor who treats or repackages wastes shall:

1. Acknowledge receipt of the waste from the generator within 1 week of receipt by returning a signed copy of the manifest or equivalent documentation;

2. Prepare a new manifest that meets the requirements of sections I and II of this appendix. Preparation of the new manifest reflects that the processor is responsible for the waste;

3. Prepare all wastes so that the waste is classified according to § 61.55 of this chapter and meets the waste characteristics requirements in § 61.56 of this chapter;

4. Label each package of waste to identify whether it is Class A waste, Class B waste, or Class C waste, in accordance with §§ 61.55 and 61.57 of this chapter;

5. Conduct a quality control program to ensure compliance with §§ 61.55 and 61.56 of this chapter. The program shall include management evaluation of audits;

6 Forward a copy of the new manifest to the disposal site operator or waste collector at the time of shipment, or deliver to a collector at the time the waste is collected, obtaining acknowledgment of receipt in the form of a signed copy of the manifest or equivalent documentation by the collector;

7. Include the new manifest with the shipment;

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8. Retain copies of original manifests and new manifests and documentation of acknowledgement of receipt as the record of transfer of licensed material as required by parts 30, 40, and 70 of this chapter. This includes those manifests and documents of acknowledgement of receipt required under the standards for protection against radiation in effect prior to January 1, 1994; and

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9. For any shipment or part of a shipment for which acknowledgment is not received within the times set forth in this section, conduct an investigation in accordance with section III, E of this appendix.

D. The land disposal facility operator shall:

1. Acknowledge receipt of the waste within 1 week of receipt by returning a signed copy of the manifest or equivalent documentation to the shipper. The shipper to be notified is the licensee who last possessed the waste and transferred the waste to the operator. The returned copy of the manifest or equivalent documentation shall indicate any discrepancies between materials listed on the manifest and materials received;

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2. Maintain copies of all completed manifests or equivalent documentation until the license is terminated. This includes those manifests or equivalent documents required under the standards for protection against radiation in effect prior to January 1, 1994; and

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3. Notify the shipper (i e., the generator, the collector, or processor) and the Administrator of the nearest Commission Regional Office listed in appendix D to this part when any shipment or part of a shipment has not arrived within 60 days after the advance manifest was received.

E. Any shipment or part of a shipment for which acknowledgment is not received within the times set forth in this section must:

1. Be investigated by the shipper if the shipper has not received notification or receipt within 20 days after transfer; and

2. Be traced and reported. The investigation shall include tracing the shipment and filing a report with the nearest Commission Regional Office listed in appendix D to this part. Each licensee who conducts a trace investigation shall file a written report with the appropriate NRC Regional Office within 2 weeks of completion of the investigation.

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Appendix G to 10 CFR Part 20—Requirements for Transfers of Low-Level Radioactive Waste Intended for Disposal at Licensed Land Disposal Facilities and Manifests

I. Manifest

A waste generator, collector, or processor who transports, or offers for transportation, low-level radioactive waste intended for ultimate disposal at a licensed low-level radioactive waste land disposal facility must prepare a Manifest (OMB Control Numbers 3150–0164, –0165, and –0166) reflecting information requested on applicable NRC Forms 540 (Uniform Low-Level Radioactive Waste Manifest (Shipping Paper)) and 541 (Uniform Low-Level Radioactive Waste Manifest (Container and Waste Description)) and, if necessary, on an applicable NRC Form 542 (Uniform Low-Level Radioactive Waste Manifest (Manifest Index and Regional Compact Tabulation)). NRC Forms 540 and 540A must be completed and must physically accompany the pertinent low-level waste shipment. Upon agreement between shipper and consignee, NRC Forms 541 and 541A and 542 and 542A may be completed, transmitted, and stored in electronic media with the capability for producing legible, accurate, and complete records on the respective forms. Licensees are not required by NRC to comply with the manifesting requirements of this part when they ship:

(a) LLW for processing and expect its return (i e., for storage under their license) prior to disposal at a licensed land disposal facility;

(b) LLW that is being returned to the licensee who is the "waste generator" or "generator," as defined in this part; or

(c) Radioactively contaminated material to a "waste processor" that becomes the processor's "residual waste."

For guidance in completing these forms, refer to the instructions that accompany the forms. Copies of manifests required by this appendix may be legible carbon copies, photocopies, or computer printouts that reproduce the data in the format of the uniform manifest.

NRC Forms 540, 540A, 541, 541A, 542 and 542A, and the accompanying instructions, in hard copy, may be obtained from the Information and Records Management Branch, Office of Information Resources Management, U.S. Nuclear Regulatory Commission, Washington, DC 20555, telephone (301) 415–7232.

This appendix includes information requirements of the Department of Transportation, as codified in 49 CFR part 172. Information on hazardous, medical, or other waste, required to meet Environmental Protection Agency regulations, as codified in 40 CFR parts 259, 261 or elsewhere, is not addressed in this section, and must be provided on the required EPA forms. However, the required EPA forms must accompany the Uniform Low-Level Radioactive Waste Manifest required by this chapter.

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As used in this appendix, the following definitions apply:

Chelating agent has the same meaning as that given in § 61.2 of this chapter.

Chemical description means a description of the principal chemical characteristics of a low-level radioactive waste.

Computer-readable medium means that the regulatory agency's computer can transfer the information from the medium into its memory.

Consignee means the designated receiver of the shipment of low-level radioactive waste.

Decontamination facility means a facility operating under a Commission or Agreement State license whose principal purpose is decontamination of equipment or materials to accomplish recycle, reuse, or other waste management objectives, and, for purposes of this part, is not considered to be a consignee for LLW shipments.

Disposal container means a container principally used to confine low-level radioactive waste during disposal operations at a land disposal facility (also see "high integrity container"). Note that for some shipments, the disposal container may be the transport package.

EPA identification number means the number received by a transporter following application to the Administrator of EPA as required by 40 CFR part 263.

Generator means a licensee operating under a Commission or Agreement State license who (1) is a waste generator as defined in this part, or (2) is the licensee to whom waste can be attributed within the context of the Low-Level Radioactive Waste Policy Amendments Act of 1985 (e g., waste generated as a result of decontamination or recycle activities).

High integrity container (HIC) means a container commonly designed to meet the structural stability requirements of § 61.56 of this chapter, and to meet Department of Transportation requirements for a Type A package.

Land disposal facility has the same meaning as that given in § 61.2 of this chapter.

NRC Forms 540, 540A, 541, 541A, 542, and 542A are official NRC Forms referenced in this appendix. Licensees need not use originals of these NRC Forms as long as any substitute forms are equivalent to the original documentation in respect to content, clarity, size, and location of information. Upon agreement between the shipper and consignee, NRC Forms 541 (and 541A) and NRC Forms 542 (and 542A) may be completed, transmitted, and stored in electronic media. The electronic media must have the capability for producing legible, accurate, and complete records in the format of the uniform manifest.

Package means the assembly of components necessary to ensure compliance with the packaging requirements of DOT regulations, together with its radioactive contents, as presented for transport.

Physical description means the items called for on NRC Form 541 to describe a low-level radioactive waste.

Residual waste means low-level radioactive waste resulting from processing or decontamination activities that cannot be easily separated into distinct batches attributable to specific waste generators. This waste is attributable to the processor or decontamination facility, as applicable.

Shipper means the licensed entity (i.e., the waste generator, waste collector, or waste processor) who offers low-level radioactive waste for transportation, typically consigning this type of waste to a licensed waste collector, waste processor, or land disposal facility operator.

Shipping paper means NRC Form 540 and, if required, NRC Form 540A which includes the information required by DOT in 49 CFR part 172.

Source material has the same meaning as that given in § 40.4 of this chapter.

Special nuclear material has the same meaning as that given in § 70.4 of this chapter.

Uniform Low-Level Radioactive Waste Manifest or *uniform manifest* means the combination of NRC Forms 540, 541, and, if necessary, 542, and their respective continuation sheets as needed, or equivalent.

Waste collector means an entity, operating under a Commission or Agreement State license, whose principal purpose is to collect and consolidate waste generated by others, and to transfer this waste, without processing or repackaging the collected waste, to another licensed waste collector, licensed waste processor, or licensed land disposal facility.

Waste description means the physical, chemical and radiological description of a low-level radioactive waste as called for on NRC Form 541.

Waste generator means an entity, operating under a Commission or Agreement State license, who (1) possesses any material or component that contains radioactivity or is radioactively contaminated for which the licensee foresees no further use, and (2) transfers this material or component to a licensed land disposal facility or to a licensed waste collector or processor for handling or treatment prior to disposal. A licensee performing processing or decontamination services may be a "waste generator" if the transfer of low-level radioactive waste from its facility is defined as "residual waste."

Waste processor means an entity, operating under a Commission or Agreement State license, whose principal purpose is to process, repackage, or otherwise treat low-level radioactive material or waste generated by others prior to eventual transfer of waste to a licensed low-level radioactive waste land disposal facility.

Waste type means a waste within a disposal container having a unique physical description (i e., a specific waste descriptor code or description; or a waste sorbed on or solidified in a specifically defined media).

Information Requirements

A. General Information

The shipper of the radioactive waste, shall provide the following information on the uniform manifest:

1. The name, facility address, and telephone number of the licensee shipping the waste;

2. An explicit declaration indicating whether the shipper is acting as a waste

generator, collector, processor, or a combination of these identifiers for purposes of the manifested shipment; and

3. The name, address, and telephone number, or the name and EPA identification number for the carrier transporting the waste.

B. Shipment Information

The shipper of the radioactive waste shall provide the following information regarding the waste shipment on the uniform manifest:

1. The date of the waste shipment;
2. The total number of packages/disposal containers;
3. The total disposal volume and disposal weight in the shipment;
4. The total radionuclide activity in the shipment;
5. The activity of each of the radionuclides H-3, C-14, Tc-99, and I-129 contained in the shipment; and
6. The total masses of U-233, U-235, and plutonium in special nuclear material, and the total mass of uranium and thorium in source material.

C. Disposal Container and Waste Information

The shipper of the radioactive waste shall provide the following information on the uniform manifest regarding the waste and each disposal container of waste in the shipment:

1. An alphabetic or numeric identification that uniquely identifies each disposal container in the shipment;
2. A physical description of the disposal container, including the manufacturer and model of any high integrity container;
3. The volume displaced by the disposal container;
4. The gross weight of the disposal container, including the waste;
5. For waste consigned to a disposal facility, the maximum radiation level at the surface of each disposal container;
6 A physical and chemical description of the waste;
7. The total weight percentage of chelating agent for any waste containing more than 0 1% chelating agent by weight, plus the identity of the principal chelating agent;
8. The approximate volume of waste within a container;
9. The sorbing or solidification media, if any, and the identity of the solidification media vendor and brand name;
10. The identities and activities of individual radionuclides contained in each container, the masses of U-233, U-235, and plutonium in special nuclear material, and the masses of uranium and thorium in source material. For discrete waste types (i.e., activated materials, contaminated equipment, mechanical filters, sealed source/devices, and wastes in solidification/stabilization media), the identities and activities of individual radionuclides associated with or contained on these waste types within a disposal container shall be reported;
11. The total radioactivity within each container; and
12. For wastes consigned to a disposal facility, the classification of the waste pursuant to § 61.55 of this chapter Waste not meeting the structural stability requirements of § 61.56(b) of this chapter must be identified.

D. Uncontainerized Waste Information

The shipper of the radioactive waste shall provide the following information on the uniform manifest regarding a waste shipment delivered without a disposal container:

1. The approximate volume and weight of the waste;
2. A physical and chemical description of the waste;
3. The total weight percentage of chelating agent if the chelating agent exceeds 0.1% by weight, plus the identity of the principal chelating agent;
4. For waste consigned to a disposal facility, the classification of the waste pursuant to § 61.55 of this chapter. Waste not meeting the structural stability requirements of § 61.56(b) of this chapter must be identified;
5. The identities and activities of individual radionuclides contained in the waste, the masses of U-233, U-235, and plutonium in special nuclear material, and the masses of uranium and thorium in source material; and
6. For wastes consigned to a disposal facility, the maximum radiation levels at the surface of the waste.

E. Multi-Generator Disposal Container Information

This section applies to disposal containers enclosing mixtures of waste originating from different generators. (Note: The origin of the LLW resulting from a processor's activities may be attributable to one or more "generators" (including "waste generators") as defined in this part). It also applies to mixtures of wastes shipped in an uncontainerized form, for which portions of the mixture within the shipment originate from different generators.

1. For homogeneous mixtures of waste, such as incinerator ash, provide the waste description applicable to the mixture and the volume of the waste attributed to each generator.
2. For heterogeneous mixtures of waste, such as the combined products from a large compactor, identify each generator contributing waste to the disposal container, and, for discrete waste types (i.e , activated materials, contaminated equipment, mechanical filters, sealed source/devices, and wastes in solidification/stabilization media), the identities and activities of individual radionuclides contained on these waste types within the disposal container. For each generator, provide the following:

(a) The volume of waste within the disposal container;

(b) A physical and chemical description of the waste, including the solidification agent, if any;

(c) The total weight percentage of chelating agents for any disposal container containing more than 0.1% chelating agent by weight, plus the identity of the principal chelating agent;

(d) The sorbing or solidification media, if any, and the identity of the solidification media vendor and brand name if the media is claimed to meet stability requirements in 10 CFR 61.56(b); and

(e) Radionuclide identities and activities contained in the waste, the masses of U-233, U-235, and plutonium in special nuclear material, and the masses of uranium and thorium in source material if contained in the waste.

II. Certification

An authorized representative of the waste generator, processor, or collector shall certify by signing and dating the shipment manifest that the transported materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the Commission. A collector in signing the certification is certifying that nothing has been done to the collected waste which would invalidate the waste generator's certification.

III. Control and Tracking

A. Any licensee who transfers radioactive waste to a land disposal facility or a licensed waste collector shall comply with the requirements in paragraphs A.1 through 9 of this section. Any licensee who transfers waste to a licensed waste processor for waste treatment or repackaging shall comply with the requirements of paragraphs A.4 through 9 of this section. A licensee shall:

1. Prepare all wastes so that the waste is classified according to § 61.55 and meets the waste characteristics requirements in § 61.56 of this chapter;
2. Label each disposal container (or transport package if potential radiation hazards preclude labeling of the individual disposal container) of waste to identify whether it is Class A waste, Class B waste, Class C waste, or greater than Class C waste, in accordance with § 61.55 of this chapter;
3. Conduct a quality assurance program to assure compliance with §§ 61.55 and 61.56 of this chapter (the program must include management evaluation of audits);
4. Prepare the NRC Uniform Low-Level Radioactive Waste Manifest as required by this appendix;
5. Forward a copy or electronically transfer the Uniform Low-Level Radioactive Waste Manifest to the intended consignee so that either (i) receipt of the manifest precedes the LLW shipment or (ii) the manifest is delivered to the consignee with the waste at the time the waste is transferred to the consignee. Using both (i) and (ii) is also acceptable;
6. Include NRC Form 540 (and NRC Form 540A, if required) with the shipment regardless of the option chosen in paragraph A.5 of this section;
7. Receive acknowledgement of the receipt of the shipment in the form of a signed copy of NRC Form 540.
8. Retain a copy of or electronically store the Uniform Low-Level Radioactive Waste Manifest and documentation of acknowledgement of receipt as the record of transfer of licensed material as required by 10 CFR Parts 30, 40, and 70 of this chapter, and
9. For any shipments or any part of a shipment for which acknowledgement of receipt has not been received within the times set forth in this appendix, conduct an investigation in accordance with paragraph E of this appendix

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B. Any waste collector licensee who handles only prepackaged waste shall:

1. Acknowledge receipt of the waste from the shipper within one week of receipt by returning a signed copy of NRC Form 540;

2. Prepare a new manifest to reflect consolidated shipments that meet the requirements of this appendix. The waste collector shall ensure that, for each container of waste in the shipment, the manifest identifies the generator of that container of waste;

3. Forward a copy or electronically transfer the Uniform Low-Level Radioactive Waste Manifest to the intended consignee so that either: (i) Receipt of the manifest precedes the LLW shipment or (ii) the manifest is delivered to the consignee with the waste at the time the waste is transferred to the consignee. Using both (i) and (ii) is also acceptable;

4. Include NRC Form 540 (and NRC Form 540A, if required) with the shipment regardless of the option chosen in paragraph B 3 of this section;

5. Receive acknowledgement of the receipt of the shipment in the form of a signed copy of NRC Form 540;

6. Retain a copy of or electronically store the Uniform Low-Level Radioactive Waste Manifest and documentation of acknowledgement of receipt as the record of transfer of licensed material as required by 10 CFR parts 30, 40, and 70 of this chapter;

7. For any shipments or any part of a shipment for which acknowledgement of receipt has not been received within the times set forth in this appendix, conduct an investigation in accordance with paragraph E of this appendix; and

8. Notify the shipper and the Administrator of the nearest Commission Regional Office listed in appendix D of this part when any shipment, or part of a shipment, has not arrived within 60 days after receipt of an advance manifest, unless notified by the shipper that the shipment has been cancelled.

C. Any licensed waste processor who treats or repackages waste shall:

1. Acknowledge receipt of the waste from the shipper within one week of receipt by returning a signed copy of NRC Form 540;

2. Prepare a new manifest that meets the requirements of this appendix. Preparation of the new manifest reflects that the processor is responsible for meeting these requirements. For each container of waste in the shipment, the manifest shall identify the waste generators, the preprocessed waste volume, and the other information as required in paragraph I.E. of this appendix;

3. Prepare all wastes so that the waste is classified according to § 61.55 of this chapter and meets the waste characteristics requirements in § 61.56 of this chapter;

4. Label each package of waste to identify whether it is Class A waste, Class B waste, or Class C waste, in accordance with §§ 61.55 and 61.57 of this chapter;

5. Conduct a quality assurance program to assure compliance with §§ 61.55 and 61.56 of this chapter (the program shall include management evaluation of audits);

6. Forward a copy or electronically transfer the Uniform Low-Level Radioactive Waste Manifest to the intended consignee so that either: (i) Receipt of the manifest precedes the LLW shipment or (ii) the manifest is delivered to the consignee with the waste at the time the waste is transferred to the consignee. Using both (i) and (ii) is also acceptable;

7. Include NRC Form 540 (and NRC Form 540A, if required) with the shipment regardless of the option chosen in paragraph C.6 of this section;

8. Receive acknowledgement of the receipt of the shipment in the form of a signed copy of NRC Form 540;

9. Retain a copy of or electronically store the Uniform Low-Level Radioactive Waste Manifest and documentation of acknowledgement of receipt as the record of transfer of licensed material as required by 10 CFR parts 30, 40, and 70 of this chapter;

10. For any shipment or any part of a shipment for which acknowledgement of receipt has not been received within the times set forth in this appendix, conduct an investigation in accordance with paragraph E of this appendix; and

11. Notify the shipper and the Administrator of the nearest Commission Regional Office listed in appendix D of this part when any shipment, or part of a shipment, has not arrived within 60 days after receipt of an advance manifest, unless notified by the shipper that the shipment has been cancelled.

D. The land disposal facility operator shall:

1. Acknowledge receipt of the waste within one week of receipt by returning, as a minimum, a signed copy of NRC Form 540 to the shipper. The shipper to be notified is the licensee who last possessed the waste and transferred the waste to the operator. If any discrepancy exists between materials listed on the Uniform Low-Level Radioactive Waste Manifest and materials received, copies or electronic transfer of the affected forms must be returned indicating the discrepancy;

2. Maintain copies of all completed manifests and electronically store the information required by 10 CFR 61.80(l) until the Commission terminates the license; and

3. Notify the shipper and the Administrator of the nearest Commission Regional Office listed in appendix D of this part when any shipment, or part of a shipment, has not arrived within 60 days after receipt of an advance manifest, unless notified by the shipper that the shipment has been cancelled.

E. Any shipment or part of a shipment for which acknowledgement is not received within the times set forth in this section must:

1. Be investigated by the shipper if the shipper has not received notification or receipt within 20 days after transfer; and

2. Be traced and reported. The investigation shall include tracing the shipment and filing a report with the nearest Commission Regional Office listed in Appendix D to this part. Each licensee who conducts a trace investigation shall file a written report with the appropriate NRC Regional Office within 2 weeks of completion of the investigation.

Appendix 3-5

Regulatory Guide 8.10

U.S. NUCLEAR REGULATORY COMMISSION

Revision 1-R
September 1975

REGULATORY GUIDE

OFFICE OF STANDARDS DEVELOPMENT

(This page reissued May 1977)

REGULATORY GUIDE 8.10

OPERATING PHILOSOPHY FOR MAINTAINING OCCUPATIONAL RADIATION EXPOSURES AS LOW AS IS REASONABLY ACHIEVABLE

A. INTRODUCTION

Paragraph 20.1(c) of 10 CFR Part 20, "Standards for Protection Against Radiation," states, in part, that licensees should make every reasonable effort to maintain radiation exposures as far below the limits specified in that part as practicable. This guide describes to licensees a general operating philosophy acceptable to the NRC staff as a necessary basis for a program of maintaining occupational exposures to radiation as low as is reasonably achievable.

Both this guide and Regulatory Guide 8.8, "Information Relevant to Maintaining Occupational Radiation Exposure as Low as is Reasonably Achievable (Nuclear Power Reactors)," deal with the concept of "as low as is reasonably achievable" occupational exposures to radiation. The main difference between the two guides, aside from the fact that Regulatory Guide 8.8 applies only to nuclear power reactors and this guide applies to all specific licensees, is that Regulatory Guide 8.8 is addressed to applicants for a license and tells them what information relevant to "as low as is reasonably achievable" should be included in their license applications. This guide, on the other hand, describes an operating philosophy that the NRC staff believes all specific licensees should follow to keep occupational exposures to radiation as low as is reasonably achievable.

B. DISCUSSION

Even though current occupational exposure limits provide a very low risk of injury, it is prudent to avoid unnecessary exposure to radiation. The objective is thus to reduce occupational exposures as far below the specified limits as is reasonably achievable by means of good radiation protection planning and practice, as well as by management commitment to policies that foster vigilance against departures from good practice.

In addition to maintaining doses to individuals as far below the limits as is reasonably achievable, the sum of the doses received by all exposed individuals should also be maintained at the lowest practicable level. It would not be desirable, for example, to hold the highest doses to individuals to some fraction of the applicable limit if this involved exposing additional people and significantly increasing the sum of radiation doses received by all involved individuals.

C. REGULATORY POSITION

Two basic conditions are considered necessary in any program for keeping occupational exposures as far below the specified limits as is reasonably achievable. The management of the licensed facility should be committed to maintaining exposures as low as is reasonably achievable, and the personnel responsible for radiation protection should be continually vigilant for means to reduce exposures.

1. Management Commitment

The commitment made by licensee management to minimize exposures should provide clearly defined radiation protection responsibilities and an environment in which the radiation protection staff can do its job properly. There are several aspects to this commitment:

a. Plant personnel should be made aware of management's commitment to keep occupational exposures as low as is reasonably achievable. The commitment should appear in policy statements, instructions to personnel, and similar documents. As a minimum, workers should be sufficiently familiar with this commitment that they can explain what the management commitment is, what "as low as is reasonably achievable exposure to radiation" means, why it is recommended, and how they have been advised to implement it on their jobs.

USNRC REGULATORY GUIDES

Regulatory Guides are issued to describe and make available to the public methods acceptable to the NRC staff of implementing specific parts of the Commission's regulations, to delineate techniques used by the staff in evaluating specific problems or postulated accidents, or to provide guidance to applicants. Regulatory Guides are not substitutes for regulations, and compliance with them is not required. Methods and solutions different from those set out in the guides will be acceptable if they provide a basis for the findings requisite to the issuance or continuance of a permit or license by the Commission.

Comments and suggestions for improvements in these guides are encouraged at all times, and guides will be revised, as appropriate, to accommodate comments and to reflect new information or experience. However, the staff's consideration of comments received during the initial public comment period for this guide has resulted in the determination that there is no need for a revision at this time.

Comments should be sent to the Secretary of the Commission, U.S. Nuclear Regulatory Commission, Washington, D.C. 20555, Attention Docketing and Service Branch.

The guides are issued in the following ten broad divisions

1. Power Reactors
2. Research and Test Reactors
3. Fuels and Materials Facilities
4. Environmental and Siting
5. Materials and Plant Protection
6. Products
7. Transportation
8. Occupational Health
9. Antitrust Review
10. General

Requests for single copies of issued guides (which may be reproduced) or for placement on an automatic distribution list for single copies of future guides in specific divisions should be made in writing to the U.S. Nuclear Regulatory Commission, Washington, D.C. 20555, Attention Director, Division of Document Control

b. **Management should periodically perform a formal audit to determine how exposures might be lowered.** This should include reviews of operating procedures and past exposure records, plant inspections, and consultations with the radiation protection staff or outside consultants. As a minimum, management should be able to discuss which operating procedures were reviewed, in which locations most exposures are being received, what groups of workers are receiving the highest exposures, what discussions they have had with the radiation protection staff or outside consultants, and what steps they have taken to reduce exposures.

c. **The management should ensure that there is a well-supervised radiation protection capability with well-defined responsibilities.** The qualifications for the Radiation Protection Manager for a nuclear power reactor facility are presented in Regulatory Guides 1.8 and 8.8. Applicants submitting applications for any specific license other than a nuclear power reactor license should select and state the qualifications for the lead individual who will be responsible for implementing the radiation protection program for the facility, i.e., the Radiation Safety Officer (RSO).[1] The qualifications selected should be commensurate with the potential problems anticipated to be encountered in a facility of the type subject to the license.

d. **The management should see that plant workers receive sufficient training.** Section 19.12 of 10 CFR Part 19 requires instruction of personnel on radiation protection. The radiation worker should understand how radiation protection relates to his job and should be tested on this understanding at least once per year. He should have frequent opportunities to discuss radiation safety with the radiation protection staff whenever the need arises. Management should be committed to a review of radiation protection at least once every three years. Training should be sufficient to ensure that the workers can correctly answer questions on radiation protection as it relates to their jobs.

e. **The RSO should be given sufficient authority to enforce safe plant operation.** The RSO should have the authority to prevent unsafe practices and to communicate promptly with an appropriate level of management about halting an operation he deems unsafe. Operating procedures related to radiation safety should be reviewed and approved by radiation protection personnel. This authority should be demonstrable by written policy statements.

f. **Modifications to operating and maintenance procedures and to plant equipment and facilities should be made where they will substantially reduce exposures at a reasonable cost.** The management should be able to demonstrate that improvements have been *sought*, that modifications have been considered, and that they have been implemented where practicable. Where modifications have been considered but not implemented, the licensee should be prepared to describe the reasons for not implementing them.

2. Vigilance by the RSO and the Radiation Protection Staff

It should be the responsibility of the RSO and the radiation protection staff to conduct surveillance programs and investigations to ensure that occupational exposures are as far below the specified limits as is reasonably achievable. Additionally, they should be vigilant in searching out new and better ways to perform all radiation jobs with less exposure. There are several aspects to this responsibility.

a. **The RSO and the radiation protection staff should know the origins of radiation exposures in the plant.** They should know these by location, operation, and job category and should be aware of trends in exposures. Where radiation work permits are used, exposures received should be recorded on the permits. The RSO and the radiation protection staff should be able to describe which locations, operations, and jobs are associated with the highest exposures and why exposures are increasing or decreasing.

b. **The RSO and the radiation protection staff should look for ways to reduce exposures.** When unusual exposures have occurred, the radiation protection staff should direct and participate in an investigation of the circumstances of such exposures to determine the causes and take steps to reduce the likelihood of similar future occurrences. For each such occurrence, the RSO should be able to demonstrate that such an investigation has been carried out, that conclusions were reached as a result of the investigation, and that corrective action was taken, as appropriate.

The RSO and the radiation protection staff should periodically review operating procedures that may affect radiation safety and survey plant operations to identify situations in which exposures can be reduced. Indicated changes should be promptly implemented. Procedures for receiving and evaluating suggestions relating to radiation protection from employees should be established. Workers should be knowledgeable of the procedures for making suggestions on radiation protection.

c. **Adequate equipment and supplies for radiation protection work should be provided.** The RSO should be responsible for ensuring that proper equipment and supplies are available, are maintained in good working order, and are used properly. Written procedures for the use of the equipment should be available and followed.

*Lines indicate substantive changes from previous issue.

[1] The term "Radiation Safety Officer" is used by many licensees; other terms are equally acceptable.

D. IMPLEMENTATION

The purpose of this section is to provide information to applicants and licensees regarding the NRC staff's plans for utilizing this regulatory guide.

Except in those cases in which the applicant or licensee proposes an alternative method for complying with the specified portions of the Commission's regulations, the methods described herein will be used in the evaluation of submittals in connection with applications for a specific license.

Regulatory Guides 1.8 and 8.8 address nuclear power reactor facilities specifically and will be used by the NRC staff in evaluating submittals in connection with licensing actions for nuclear power reactors.

Appendix 3-6

Management Directive 10.131

Protection of NRC Employees Against Ionizing Radiation

Directive

(Formerly MC 0524) **10.131**

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Protection of NRC Employees Against Ionizing Radiation Directive 10.131

Policy
(10.131–01)

It is the policy of the U.S. Nuclear Regulatory Commission to maintain occupational radiation doses to NRC employees below the limits established in this directive and as low as reasonably achievable (ALARA).

Objectives
(10.131–02)

To establish procedures and standards for protecting NRC employees from ionizing radiation hazards associated with activities conducted by the NRC. These procedures and standards must be—

- Consistent with the regulations of the Occupational Safety and Health Administration (OSHA), Department of Labor, as required by Executive Order 12196, Occupational Safety and Health Programs for Federal Employees. (021)
- Consistent with the radiation protection guidance to Federal agencies prepared by the former Federal Radiation Council or by the Environmental Protection Agency. (022)
- Consistent with the standards adopted by NRC for application to NRC–licensed operations. (023)

Organizational Responsibilities and Delegations of Authority
(10.131–03)

Executive Director for Operations (EDO)
(031)

- Establishes and oversees activities that create and implement standards for protection against radiation for NRC operations. (a)
- Delegates to the Director, Office of Nuclear Material Safety and Safeguards, responsibility for establishing radiation protection standards and providing technical oversight of the radiation safety programs for NRC employees. (b)
- Delegates to the Director, Office of Personnel (OP), authority to act as the Designated Agency Safety and Health Official (DASHO) for the NRC responsible for the management and administration of nonradiological safety and health programs for NRC employees, and administrative support of the radiation safety program with regard to interaction with OSHA. (c)

Director, Office of Nuclear Regulatory Research (RES)
(032)

Develops and maintains the employee exposure database (EED) and provides guidance on its use.

Director, Office of Nuclear Material Safety and Safeguards (NMSS)
(033)

- Maintains this directive and reviews and approves, or disapproves, any proposed routine deviation (other than emergency actions) from the provisions of this directive dealing with radiation safety standards for NRC employees. (a)
- Provides the project officer and other technical support for the contract that provides personnel monitoring equipment for NRC employees. (b)

Director, Office of Nuclear Material Safety and Safeguards (NMSS)
(033) (continued)

- Renders interpretations of the provisions of this directive in consultation with the Office of the General Counsel. (c)
- Ensures that NRC headquarters and regional offices implement and maintain the standards for protection against radiation under the provisions established by this directive by sponsoring a peer review of the radiation safety program in two different offices each year by all of the NRC radiation safety officers (RSOs). These reviews shall include any deviations authorized under item (033)(b) of this directive. (d)
- Provides quality assurance and implementation guidance as necessary to ensure consistency of radiation safety programs. (e)
- Sponsors an annual counterparts meeting for all NRC radiation safety officers, providing a written agenda to discuss NRC radiation safety program matters and to resolve problems, and provides minutes reflecting the results of the meeting to the EDO, program office directors, and regional administrators as an annual report on the NRC radiation safety program. (f)

Director, Office of Personnel (OP)
(034)

- Acting as the DASHO—
  - Reviews and approves, or disapproves, any proposed deviation from the nonradiological requirements dealing with employee occupational safety and health. (a)
  - Ensures that new employees complete an NRC Form 4, "Lifetime Occupational Exposure History," when they enter on duty, and forwards this form to RES for entry in the EED. (b)
  - Ensures that the provisions of this directive are consistent with the safety and health regulations issued by OSHA, and acts as the NRC interface with OSHA. (c)

Director, Office of Administration (ADM)
(035)

- Develops procedures for the dissemination of personnel monitoring equipment to headquarters employees. (a)
- Executes the contract(s) necessary to provide dosimetry services and provides administrative support with regard to contract–related activities for NRC headquarters, regional, and field offices. (b)

Director, Office for Analysis and Evaluation of Operational Data (AEOD)
(036)

- Establishes and offers training courses to support the training requirements of this directive. (a)
- Maintains a list of NRC employees that have successfully completed radiation safety training (including Site Access Training and NMSS Radiation Worker Training) within the last 12 months, and provides a copy of the list every quarter to the headquarters Administrative Service Center and each NRC RSO. (b)

Office Directors and Regional Administrators
(037)

- Ensure that employees under their jurisdiction are informed of the provisions of this directive and that they comply with these provisions. (a)
- Ensure that any employee under their jurisdiction is notified immediately if the employee has been exposed to any radiation (single or cumulative exposure) that exceeds the limits specified in this directive. (b)
- Each regional administrator and the directors of the offices of Nuclear Reactor Regulation (NRR), Nuclear Material Safety and Safeguards (NMSS), and the Office for Analysis and Evaluation of Operational Data (AEOD) shall appoint an RSO and establish a radiation safety program for using dosimeters and maintaining occupational doses ALARA. All other NRC office directors shall

Office Directors and Regional Administrators
(037) (continued)

obtain their radiation safety support from the NRR RSO. The minimum qualification for an RSO is a working knowledge of basic health physics and radiological controls gained from several years of training and experience. (d)

- Decide and act when immediate decisions and actions are required, and immediately inform the Director, NMSS, of any action that results in an exception to this directive. (e)
- Each regional administrator shall ensure that provisions for dosimetry are adequate to support regional emergency response duties. (f)
- Establishes procedures to ensure the appropriate technical training of employees who may receive occupational exposures to radiation. (g)
- Each regional administrator shall develop and implement a written radiation safety program for possession and use of radioactive materials in the regional office. (h)

Applicability
(10.131–04)

The policy and guidance in this directive and handbook apply to all NRC employees.

- This directive applies to occupational exposures received by NRC employees during official duties at any location. However, requirements concerning the control of radioactive material apply to facilities controlled by NRC only. (041)
- This directive does not apply to non–NRC employees (e.g., contractors), and it does not apply to exposures from background radiation or medical exposures. (042)

Handbook
(10.131–05)

Handbook 10.131 contains guidelines, procedures, and standards for protection of NRC employees against ionizing radiation to be applied in conformance with the requirements of this management directive.

Definitions
(10.131–06)

The terms used in this directive and handbook are as defined in 10 CFR Part 20.

References
(10.131–07)

Code of Federal Regulations

"Notices, Instructions, and Reports to Workers: Inspection and Investigations," 10 CFR Part 19.

"Standards for Protection Against Radiation," 10 CFR Part 20.

"Occupational Safety and Health Standards," 29 CFR Part 1910.

"Basic Program Elements for Federal Employee Occupational Safety and Health Programs and Related Matters," 29 CFR Part 1960.

Environmental Protection Agency "Manual of Protective Action Guides and Protective Actions for Nuclear Incidents," EPA 400–R–92–001, May 1992.

Executive Order 12196, "Occupational Safety and Health Programs for Federal Employees" (45 FR 12769), February 26, 1980.

NRC Management Directive 3.53, "NRC Records Management Program."

— 10.130, "NRC Safety and Health Program Under the Occupational Safety and Health Act."

NUREG–0910, "NRC Comprehensive Records Disposition Schedule," Revision 2, March 1992.

NUREG/CR–4214, "Health Effects Models for Nuclear Power Plant Accident Consequence Analysis," Revision 1, Part II, Addendum 1, August 1991.

Privacy Act of 1974, as amended (5 U.S.C. 552a).

"Radiation Protection Guidance to Federal Agencies for Occupational Exposure; Approval of Environmental Protection Agency Recommendations," Administrative Order (52 FR 2822) January 27, 1987.

The Occupational Safety and Health Act of 1970 (Pub. L. 91–596, 84 Stat. 1590).

Protection of NRC Employees Against Ionizing Radiation

Handbook

(Formerly Appendix 0524) **10.131**

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