

APPENDIX B

U.S. NUCLEAR REGULATORY COMMISSION  
REGION IV

NRC Inspection Report: 50-482/90-17

Operating License: NPF-42

Docket: 50-482

Licensee: Wolf Creek Nuclear Operating Corporation (WCNOC)  
P.O. Box 411  
Burlington, Kansas 66839

Facility Name: Wolf Creek Generating Station (WCGS)

Inspection At: WCGS Site, Burlington, Coffey County, Kansas

Inspection Conducted: April 16-20, 1990

Inspector:

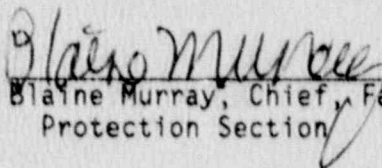
  
R. E. Baer, Radiation Specialist, Facilities  
Radiological Protection Section

5/25/90  
Date

  
L. T. Ricketson, Senior Radiation Specialist  
Facilities Radiological Protection Section

5-24-90  
Date

Approved:

  
Blaine Murray, Chief, Facilities Radiological  
Protection Section

5/29/90  
Date

Inspection Summary

Inspection Conducted April 16-20, 1990 (Report 50-482/90-17)

Areas Inspected: Routine, unannounced inspection of the licensee's occupational radiation protection and transportation activities during the recent refueling outage.

Results: Within the areas inspected, one violation (failure to have adequate procedures for respirator selection, paragraph 7) and no deviations were identified. Radiological controls appeared to be adequate, as was job coverage by the radiation protection (RP) staff. The RP staff was adequately supplemented by contract RP technicians. Several RP procedures needed to be upgraded. The licensee had placed increased emphasis on ALARA by increasing

the number of individuals involved. Quality Assurance auditors had limited knowledge of RP activities. The transportation program was adequate and personnel involved were knowledgeable of applicable regulations.

DETAILS

1. Persons Contacted

WCNOC

- \*B. D. Withers, President
- \*J. A. Bailey, Vice President, Nuclear Operations
- \*F. T. Rhodes, Vice President, Engineering and Technical Support
- \*R. S. Benedict, Manager, Quality Assurance (QA)
- \*G. D. Boyer, Plant Manager
- \*L. F. Breshears, Health Physics (HP) Supervisor, Dosimetry
- \*S. C. Burkdoll, Supervising Instructor, HP
- \*T. A. Conley, HP Supervisor, Calibrations
- \*L. L. Cook, Supervisor, Supplier Quality
- T. F. Deddens, Jr., Outage Manager
- \*T. L. Foster, Manager, Modifications
- \*C. W. Fowler, Manager, Instrumentation and Controls (I&C)
- \*R. Hammond, Health Physicist
- \*R. W. Holloway, Manager, Maintenance and Modifications
- \*E. C. Holman, HP Supervisor, Operations
- \*D. Jacobs, Supervising Engineer, Results Engineering
- \*W. M. Lindsay, Manager, QA
- \*R. L. Logsdon, Manager, Chemistry
- \*V. J. MacTaggart, Wichita Liaison, Nuclear Plant Engineering (NPE)
- \*O. L. Maynard, Manager, Regulatory Services
- \*C. M. Medency, HP Supervisor, Radwaste
- \*K. J. Moles, Manager, Emergency and Radiation Services
- \*T. M. Moore, HP, Radwaste Engineer
- \*T. G. Moreau, Supervising Instructor
- \*T. S. Morrill, Manager, Radiation Protection
- \*C. E. Parry, Director, Quality
- \*J. Pippin, Manager, NPE
- \*B. Reischman, Nuclear Chemist
- \*R. Sims, Supervisor, Equipment Engineering
- \*H. L. Stubby, Supervisor, Technical Training
- \*C. L. Taylor, HP Supervisor, ALARA
- \*J. D. Weeks, Manager, Operations
- \*S. Wideman, Senior Engineering Specialist
- \*M. G. Williams, Manager, Plant Support
- \*J. A. Zell, Manager, Training

NRC

\*M. E. Skow, Senior Resident Inspector, WCGS

The inspectors also interviewed several other licensee and contractor employees including radiation protection, chemistry, operations, maintenance, and administrative personnel.

\*Denotes those individuals present during the exit interview on April 20, 1990.



2. Followup on Previous Inspection Findings

(Open) Open Item (482/8920-01): Personnel Dosimetry Quality Control Tests - This item was previously discussed in NRC Inspection Report 50-482/89-20 and involved intercomparison evaluation discrepancies greater than  $\pm 25$  percent which required an investigation. The licensee had completed the investigation and evaluation of prior noted discrepancies, but requirements had not been established concerning timely evaluation of discrepancies identified in the future.

(Closed) Open Item (482/8920-02): Extremity Dosimetry - This item was previously discussed in NRC Inspection Report 50-482/89-20 and involved the lower leg being monitored as an extremity. The licensee revised their dosimetry procedure (HPH-01-035) to reflect the lower leg to be accurately monitored as part of the whole body.

(Closed) Open Item (482/8920-04): Tritium Bioassay Program - This item was previously discussed in NRC Inspection Report 50-482/89-20 and involved the need to establish a tritium bioassay program for workers involved with the secondary and reactor coolant systems. The licensee revised the bioassay procedure (HPH-03-006) to implement a random sampling of workers involved with the secondary reactor coolant systems. The procedure states that all personnel should be analyzed for tritium at the completion of the outage.

(Closed) Open Item (482/8920-05): Alpha Calibration Source - This item was previously discussed in NRC Inspection Report 50-482/89-20 and involved the use of a thorium-230 alpha calibration source approximately 2.5 centimeters in diameter to determine the counting efficiency of an instrument used to count samples 4.7 centimeters in diameter. The licensee had obtained a thorium-230 alpha calibration source approximately 4.5 centimeters in diameter and was using the new source to determine counting efficiencies.

3. Observations

The following are observations the inspectors discussed with the licensee's representatives. The observations are not violations, deviations, unresolved items, or open items. Observations are identified for licensee consideration as program improvement items, but have no specific regulatory requirement.

Testing of Portable Ventilation Systems

The licensee did not have a formal program to test HEPA filters on portable ventilation units. (See paragraph 4.)

#### Personnel Qualifications

The licensee had not established written procedures concerning the evaluation of prospective contractor radiation protection technician past work experience in order to classify these individuals as senior radiation protection technicians. (See paragraph 5.)

#### Training Instructors

Training instructors were not allotted sufficient time for classroom preparation or time for keeping current with changes to regulations and industry standards. (See paragraph 5.)

#### Radiological Release Procedures

There was inconsistency in the manner in which items were handled prior to release from contaminated areas such as containment. (See paragraph 8.)

#### Contamination Surveys

Contamination survey records did not always contain sufficient information to clearly define the area surveyed. (See paragraph 8.)

#### QA Auditors

QA auditors did not have specific technical training or qualifications in the area they were auditing. (See paragraph 10.)

### 4. Planning and Preparation

The inspectors reviewed representative records and discussed outage planning with licensee representatives and observed activities to verify that the necessary planning and preparations, including management support, were being implemented.

The licensee had sufficient supplies of protective clothing, respiratory protective equipment (RPE), radiological survey instrumentation, temporary shielding, and portable ventilation equipment to support outage activities. The inspectors observed that the licensee had several portable ventilation (air filtration) units to use as engineering controls for potentially airborne radioactivity areas; however, an implementing procedure had not been established for periodic performance testing of these units. The licensee had not provided test criteria to ensure that the filters were properly installed and capable of performing their intended function. The inspectors also noted that the licensee did not routinely monitor the exhaust from the portable ventilation units to confirm the integrity of the filters condition. The inspectors did not identify any violations of regulatory requirements, but this area was discussed during the exit meeting.

No violations or deviations were identified.



5. Training and Qualifications

The inspectors reviewed resumes of contract HP technicians to determine compliance with TS 6.3.1.

As preparation for the increased staffing for the outage, the supervisor of HP operations reviewed resumes of contract HP technicians and made hiring recommendations based on that review. Many of the individuals had previously worked at Wolf Creek; therefore, the licensee had an opportunity to evaluate their prior performance. The licensee's Procedure ADM 03-801 requires that senior HP technicians have 3 years experience in HP. The inspectors reviewed the resumes of the contract HP technicians and noted that some individuals' experience appeared marginal. The inspectors noted that the licensee had not established written procedures for evaluating previous work experience for qualifying contractor employees as senior radiation protection technicians. The inspector pointed out that such guidance exists in industry-related literature. The licensee's representatives indicated that they would consider developing their own guidelines.

The inspectors interviewed HP technicians and observed HP coverage of selected jobs within the radiologically controlled area (RCA) and determined that HP technicians were adequately qualified.

The inspectors interviewed training instructors to determine their qualifications and experience. The inspectors observed that sometimes the instructors were not provided sufficient time to maintain their skills and keep current with changes in regulatory requirements. The inspectors discussed with licensee representatives the lack of sufficient preparatory time allowed instructors.

The inspectors noted that one HP instructor worked as a senior radiation protection technician during part of the outage. This allowed the instructor to maintain a current knowledge of in-plant radiation protection activities.

No violations or deviations were identified.

6. External Radiation Exposure Control

The inspectors reviewed the licensee's external radiation exposure control program to determine compliance with 10 CFR Parts 19.12, 19.13, 20.101, 20.102, 20.104, 20.105, 20.202, 20.203, 20.206, 20.405, 20.407, 20.408, 20.409, and 50.73; Sections 6.11 and 6.12 of the TS; and agreement with commitments contained in Chapter 12 of the Updated Safety Analysis Report (USAR).

The inspectors reviewed the method used by the licensee to inform personnel of their radiation exposure during the outage. The licensee printed a current radiation exposure history twice a day. The exposure history was based on both thermoluminescent dosimetry (TLD) and pocket ionization chamber (PIC) results. The PIC results were updated and

entered into the HP computer system each time the individual exited from the RCA.

The licensee routinely uses administrative limits to ensure that radiation exposures do not exceed the regulatory requirements of 10 CFR Part 20.101. An estimated exposure is provided to terminating personnel and the formal TLD results are provided within 30 days.

No violations or deviations were identified.

7. Internal Exposure Control

The inspector reviewed the licensee's program for control of internal radiation exposure to determine compliance with the requirements of TS 6.11 and 10 CFR Part 20.103, 20.203, 20.401; and agreement with the recommendations of Regulatory Guide (RG) 8.15, NUREG-0041, and industry standards ANSI Z88.2-1980 and ANSI/CGA G-7.1-1989.

The inspectors reviewed different aspects of the licensee's respiratory protection program. The inspectors determined that the licensee had a fit testing program for respirators which involved two models of masks, each in three sizes. Licensee representatives stated that they were able to successfully fit all individuals tested with the newer model mask and would be phasing out the older model.

The inspectors noted that, for the outage, the licensee established three areas from which respirators were issued. Those were at access control and two control points within containment. The inspectors noted that there appeared to be an adequate supply of respirators. The inspectors interviewed HP technicians concerning respirator issue procedures and noted that they were knowledgeable of the procedure which involved the verification of the individual's qualifications prior to each respirator issuance. Verification was performed by reviewing dates of the person's last physical, respiratory protection training, and fit test, and determining that all had been performed within the last year. The list, which was updated daily, also included the model and size of respirator for which individuals were fitted.

The inspectors reviewed selected respirator issue records and compared these with the qualification list and determined that all individuals in these examples were qualified to wear respirators. However, the inspectors noted in some cases that individuals were issued respirators of a model for which they were not qualified (fit tested) and, in one case, an individual was issued a respirator of the wrong model and the wrong size.

The inspectors reviewed Procedure AMD 03-600, "Respiratory Protection Program," and noted that the procedure states that respiratory protection equipment will be issued if: the radiation work permit requires it and if the individual has successfully completed an annual respiratory physical, annual respiratory protection training, and annual fit testing. The procedure instructs individuals issuing respirators to verify the



qualifications of individuals wishing to receive them, but it does not give instructions to verify that the individuals are issued masks of the proper size or of the model for which they were fitted. This item was addressed at the exit meeting as an unresolved item needing further review.

Upon further review in the regional office, it was determined that the procedure failed to meet regulatory requirements. TS 6.11 requires that procedures for radiation protection shall be consistent with the requirements of 10 CFR Part 20. 10 CFR 20.103(c)(2) requires that the licensee maintain and implement written procedures regarding the proper selection of respirators. After further review, the inspectors determined that Procedure ADM 03-600 was inadequate because it does not give sufficient guidance to ensure that individuals are issued a respirator of the same size and model as that for which they were fit tested. The failure to have an adequate procedure to ensure compliance with 10 CFR Part 20 is considered an apparent violation of TS 6.11 (482/9017-01). The inspectors discussed the apparent violation during a telephone conversation with Mr. T. S. Morrill on May 3, 1990.

The inspectors determined that the licensee had adequate facilities for cleaning, inspecting, and disinfecting respirators; verified that the quality of bottled air met the standards given in ANSI/CGA G-7.1-1989; sufficient quantities of continuous air monitors and portable air samplers within the RCA; and posted areas as having airborne radioactivity, when appropriate.

No deviations were identified.

8. Control of Radioactive Material and Contamination, Surveys, and Monitoring

The inspector reviewed the licensee's programs for surveying/monitoring and controlling radioactive materials to determine agreement with commitments in the USAR, and compliance with the requirements of 10 CFR Parts 20.201, 20.203, 20.207, 20.301, and 20.401.

The inspectors reviewed access controls at the entrance to the RCA and noted that individuals were required to read and sign in on the appropriate radiation work permits (RWP) daily to ensure that they were informed of any changes in working conditions or requirements. The inspectors did identify an isolated case of an individual not signing an RWP each day it was used. However, the inspectors determined that this was not typical and that controls were adequate.

The inspectors reviewed contamination control procedures within containment and determined, again, that practices generally were adequate. The inspectors did note inconsistency in the manner in which items were released from the contaminated area in containment. The inspectors observed HP technicians who surveyed items for contamination and then, either return the items to workers who were still wearing potentially contaminated gloves who in turn placed the items on the control point desk, or the HP technician placed the items in the clean area for the workers to pick up after they had removed all protective clothing (PC). The inspectors did not identify any violation of regulatory requirements,



but noted that HP procedures did not address specific controls for items leaving containment.

The inspectors determined that workers exiting contaminated areas and the RCA performed contamination checks using friskers and high sensitivity personnel contamination monitors (PCMs). The inspectors noted that under certain circumstances individuals might not detect contamination on the right side of the face or the palms of the hands, because of the particular way in which the PCMs were constructed and actuated. This was discussed with the licensee although no specific case of such was observed.

The inspectors reviewed survey records of items released from the RCA and verified that such items were adequately surveyed. However, the inspectors noted that information on some surveys, such as performed before the release of an NRC nondestructive testing device on April 12, 1990, was marginal and did not clearly define the areas from which wipe samples were taken.

The inspectors reviewed the licensee's posting and radiation area controls and determined that they were adequate. The inspectors observed that workers wore proper dosimetry and that administrative radiation dose limits were imposed. The inspectors conducted confirmatory measurements of general area radiation levels and of hot spots and determined that they were in agreement with the licensee results. The inspectors reviewed selected survey records of radiation levels and determined that they were adequate.

No violations or deviations were identified.

9. Maintaining Occupational Exposure ALARA

The inspectors reviewed the licensee's ALARA program to determine compliance with the requirements of TS 6.8.1 and 10 CFR Part 20.1(c); agreement with the commitments in Chapters 12.1 and 12.5 of the USAR; and the recommendations of RGs 8.8, 8.10, and 8.27, and Information Notices (INs) 83-59, 84-61, 86-23, 86-44, 86-107, and 87-39.

The licensee had increased the ALARA support by appointing eight ALARA planners at the supervisory level from the various departments. However, no representative from the operations department had been designated to assist the ALARA coordinator. The ALARA planners are involved in the job task analysis, person-rem and person-hour estimates, prejob briefings and postjob reviews, and assist in job trend analysis.

The ALARA committee consisted of representatives from Radiological Services Department (corporate), HP, NPE, and the manager technical support. The ALARA committee provides the oversight for the ALARA program and recommendations for exposure reduction. The ALARA committee had made recommendations to reduce radiation exposure by the installation of shielding on the reactor head, reactor head stand, and regenerative heat exchanger.

The licensee installed the reactor head shielding during the present outage. The ALARA coordinator estimated that more than 390 person-rem will be saved over the life of this plant from the reactor head shield. The head shield has also contributed to reducing the general radiation level on the reactor operating floor.

The ALARA program trends radiological conditions inside the bioshield and hot spots. The licensee defines a hot spot as five times background and greater than 100 mrem/hr. The licensee had not established a formal program for reduction or removal of hot spots.

The licensee's person-rem goal for 1990 was originally 312 person-rem which was revised down to 265 person-rem. The permanent reactor cavity seal ring was not installed during this outage which was budgeted at approximately 47 person-rem. The licensee expected to expend approximately 200 person-rem during the refueling outage and as of April 16, 1990, had expended approximately 141 person-rem.

No violations or deviations were identified.

#### 10. Audits and Appraisals

The inspectors reviewed selected audits and surveillances of the licensee's radiation protection program. The specific documents reviewed are listed in the Attachment.

The inspectors reviewed the qualifications of the lead auditor for the radiation protection audit performed May 8 - June 9, 1989, and determined that this individual appeared to have limited technical knowledge and experience in the HP area. The inspectors noted that the audit teams prior to that of 1989 had included an individual with extensive experience and training in HP matters. The inspectors discussed with licensee representatives and during the exit interview the benefit of including an auditor with HP expertise in order to maintain an aggressive program for self-identification of programmatic weaknesses. The licensee stated that arrangements have been completed for a technical expert to be a team member during the next scheduled radiation protection audit.

During Audit TE: 50140-K249, conducted during the period May 8 through June 9, 1989, the licensee had placed more emphasis on a performance based audit and three performance improvement recommendations were initiated for consideration. The most noteworthy was for improvements to the ALARA program which addressed more effective use of ALARA planners, monthly reports issued to plant supervisors which include information on personnel contamination events and radiological occurrence reports, and the general

increase for worker awareness to ALARA by plant employees. This recommendation was a result of the ALARA coordinator's self-identified weakness of his own program.

No violations or deviations were identified.

#### 11. Transportation Activities

The inspectors reviewed the licensee's radioactive material transportation program to determine agreement with the recommendations contained in NRC Bulletin 79-19, INs 79-21, 80-32, 83-10, 84-14, 84-50, 85-46, and 87-31; and compliance with the requirements of 10 CFR Parts 20, 30, 61, and 71; and 49 CFR Parts 171 through 189.

The licensee routinely collects samples from the various waste streams within the plant and sends them to an off-site vendor who performs radiological analysis of their contents. The vendor furnishes the licensee with scaling factors for those radionuclides which are not easily identifiable. These scaling factors are injected into the licensee's computer program "radman" which is used for the preparation of shipping documentation and tracking of radwaste shipments. The vendor is routinely inspected for their QA of product service and appears on the licensee's approved vendor listing.

During 1989, the licensee generated approximately 4300 cubic feet of radioactive waste from all sources and shipped 5337 cubic feet in 11 shipments. At the end of 1989, the licensee had no packaged waste onsite. The licensee had made one shipment during 1990 which contained 690 cubic feet of Class A unstable waste packaged in 55-gallon drums. The licensee routinely compacts dry active waste in 55-gallon drums.

All licensee personnel responsible for the packaging and shipment of radioactive waste receive annual training regarding the regulatory and burial site requirements. Waste is presently shipped to South Carolina for burial.

No violations or deviations were identified.

#### 12. Exit Interview

The inspectors met with the senior resident inspector and licensee representatives identified in paragraph 1 of this report at the conclusion of the inspection on April 20, 1990. The inspectors summarized the scope of the inspection and discussed the inspection findings as presented in this report. The licensee did not identify as proprietary any of the materials provided to or reviewed by the inspectors during the inspection.



## ATTACHMENT

### DOCUMENTS REVIEWED

#### QUALITY ASSURANCE ACTIVITIES

##### Audits

- QA Audit Report TE:50140-K249, Radiation Protection, May 8 through June 9, 1989
- QA Audit Report TE:50140-K258, Radioactive Waste Management, July 10-28, 1989
- QA Audit Report TE:50140-K262, Radioactive Material Control, September 1-28, 1989

##### Surveillances

- QA Surveillance TE:53359 S-1731, Control of Licensed Sources, April 3-12, 1989
- QA Surveillance TE:53359 S-1738, Health Physics Calibration, May 2-22, 1989
- QA Surveillance TE:53359 S-1759, Low Level Waste Processing, October 16-20, 1989
- QA Surveillance TE:53359 S-1762, Radioactive Waste Shipment, October 24-26, 1989
- QA Surveillance TE:53359 S-1765, Plant Operations During Waste Processing, October 26 through November 1, 1989
- QA Surveillance TE:53359 S-1785, Health Physics Dosimetry Program, February 12-28, 1990
- QA Surveillance TE:53359 S-1788, Pre-Outage Work Activities, March 5-9, 1990
- QA Surveillance TE:53359 S-1792, Sludge Lancing, March 9-17, 1990
- QA Surveillance TE:53359 S-1793, Polar Crang Work Modifications to #4 Seismic Restraint, March 8-14, 1990
- QA Surveillance TE:53359 S-1794, Foreign Object Search and Retrieval, March 13-19, 1990
- QA Surveillance TE:53359 S-1797, General Outage Activities, March 12-22, 1990
- QA Surveillance TE:53359 S-1798, Reactor Coolant Pump (RCP) Motor Oil Drain, March 12-21, 1990
- QA Surveillance TE:53359 S-1803, Steam Generator Manway Cover Removal, March 23-28, 1990

QA Surveillance TE:53359 S-1810, Steam Generator Eddy Current Testing,  
March 26 through April 7, 1990

QA Surveillance TE:53359 S-1811, Foreign Object Retrieval, April 1-9, 1990

Procedures

<u>Title</u>	<u>Revision</u>	<u>Date</u>
ADM 01-006, Manager Technical Support Duties and Responsibilities	7	12/12/89
ADM 01-008, Manager Radiation Protection Duties and Responsibilities	6	11/07/89
ADM 01-094, Evaluation of Air Contaminants and Respirator Selection	3	02/09/90
ADM 01-116, Incident Investigation	2	02/14/89
ADM 01-207, Refueling Outage Health Physics Program	4	03/14/90
ADM 03-002, Radiation Worker Guidelines	3	08/30/88
ADM 03-004, Containment Entry	5	08/03/89
ADM 03-006, Notice of Rad Work Practice Violation	6	07/25/89
ADM 03-007, Duties and Responsibilities of Health Physics Supervisors and Technicians	10	11/14/89
ADM 03-011, Radiological Occurrence Reporting Program	1	07/18/89
ADM 03-012, Contaminated Area Reduction Program	0	08/09/88
ADM 03-050, ALARA Program	7	11/21/89
ADM 03-100, Health Physics Dosimetry Program	8	03/14/90
ADM 03-101, Radiation Work Permit Program	12	11/12/89
ADM 03-104, Control of High High Radiation Areas	4	05/23/89
ADM 03-105, Radiation Work Permit Request Program	0	11/21/89
ADM 03-202, Radiological Control and Unconditional Release of Tools and Equipment	8	03/28/90
ADM 03-203, ADM Procedure For Rad Material	10	08/22/89

ADM 03-204, Hot Particle Contamination Program	0	08/04/88
<u>Title</u>	<u>Revision</u>	<u>Date</u>
ADM 03-400, Operation and Calibration of Health Physics Equipment	6	07/11/89
ADM 03-600, Respiratory Protection Program	8	05/23/89
ADM 03-801, Health Physics Technician Training Program	3	01/23/90
ADM 03-951, Use of Vacuum Cleaners in the Radiologically Controlled Area	1	10/17/89
ADM 03-960, Use of Temporary Lead Shielding	5	10/31/89
ADM 06-200, General Employees Training Program	7	05/26/87
HPH 01-008, MPC-Hour Tracking	10	03/24/89
HPH 01-012, Internal Exposure Calculations and Evaluation	8	04/02/90
HPH 01-019, Exposure History Files	7	06/07/89
HPH 01-035, Dosimetry in Non-Uniform Radiation Fields	8	02/16/90
HPH 03-002, Radiation Survey Methods	8	03/31/90
HPH 03-005, Airborne Radioactivity Survey Methods	10	03/22/89
HPH 03-011, Contamination Survey Methods	7	10/12/88
HPH 03-013, Health Physics Shift Logs and Shift Turnover	5	09/01/89
HPH 03-014, Personnel Decontamination	8	11/22/89
HPH 03-015, Posting for Radiological Controls	7	04/21/89
HPH 03-017, Initialization and Operation of the Hydro-Nuclear Services Respirator Cleaning Facility	4	04/02/90
HPH 03-020, Health Physics Coverage of Steam Generator Entry	2	02/16/90
HPH 03-028, Free Release of Trash	6	02/05/90
HPH 04-074, Operation and Calibration of the NNC Gamma-10 Portal Monitor	6	02/09/90



<u>Title</u>	<u>Revision</u>	<u>Date</u>
HPH 04-078, Operation and Calibration of the NNC Betamax Friskall	2	06/16/89
HPH 04-085A, Operation of HP Trash Monitor Table	1	04/02/90
HPH 04-085B, Calibration of HP Trash Monitor Table	1	01/18/90
HPH 06-004, Selection of Respiratory Protection Equipment	5	02/26/90
HPH 06-011, Quality Control of Respiratory Protection Equipment	9	04/04/90
HPH 07-001, Pre and Post Job ALARA Reviews	3	12/07/89
HPH 07-002, ALARA Reviews	3	11/27/89
HPH 09-521, Shipment of Limited Quantity Materials	2	01/16/90
HPH 09-522, Shipment of LSA Materials	2	01/23/90
HPH 09-543, Operation of the Hot Machine Shop Decon Equipment	1	01/09/90
HPH 09-545, Maintenance of Vacuum Cleaners Used in the RCA	0	12/12/89