

<p><b>ORAU Team</b>  <b>NIOSH Dose Reconstruction Project</b></p> <p>Technical Basis Document for the Idaho National Engineering and Environmental Laboratory (INEEL) – Occupational External Dosimetry</p>	<p>Document Number:  ORAUT-TKBS-0007-6  Effective Date: 04/06/2004  Revision No.: 00  Controlled Copy No.: _____  Page 1 of 48</p>
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## RECORD OF ISSUE/REVISIONS

ISSUE AUTHORIZATION DATE	EFFECTIVE DATE	REV. NO.	DESCRIPTION
Draft	12/09/03	00-A	New technical basis document for the Idaho National Engineering and Environmental Laboratory (INEEL) – Occupational External Dosimetry. Initiated by Norman Rohrig.
Draft	02/24/2004	00-B	Incorporates ORAU and NIOSH review comments. Initiated by Norman Rohrig.
Draft	03/19/2004	00-C	Incorporates additional NIOSH review comments. Initiated by Norman Rohrig.
04/06/2004	04/06/2004	00	First approved issue. Initiated by Norman Rohrig.

**ACRONYMS AND ABBREVIATIONS**

AEC	U.S. Atomic Energy Commission
ANSI	American National Standards Institute
AP	anterior–posterior
Ci	curie
cm	centimeter
CPP	Chemical Processing Plant
DOE	U.S. Department of Energy
DOELAP	DOE Laboratory Accreditation Program
ERDA	Energy Research and Development Administration
FFTF	Fast Flux Test Facility
FNCF	Facility Neutron Correction Factor
ICPP	Idaho Chemical Processing Plant (formerly CPP and now INTEC)
ICRU	International Commission on Radiation Units and Measurements
ICRP	International Commission on Radiological Protection
ID	Idaho Operations Office
INEEL	Idaho National Engineering and Environmental Laboratory
INEL	Idaho National Engineering Laboratory
INTEC	Idaho Nuclear Technology and Engineering Center (formerly ICCP and CPP)
IREP	Interactive RadioEpidemiological Program
in	inch
KERMA	kinetic energy released to matter
keV	kilo electron volt, 1,000 electron volts
LET	Linear Energy Transfer
MeV	mega electron volt, 1 million electron volts
mg	milligram
mm	millimeter
mR	milliroentgen
mrad	millirad
mrem	millirem
MRL	minimum reporting level
MTR	Materials Test Reactor
NBS	National Bureau of Standards
NCRP	National Council on Radiation Protection and Measurement
NRTS	National Reactor Testing Station
NTA	nuclear track emulsion-Type A
NVLAP	National Voluntary Laboratory Accreditation Program
R	roentgen
RBE	relative biological effectiveness
rep	roentgen-equivalent-physical

RESL Radiological and Environmental Services Laboratory  
RWMC Radioactive Waste Management Complex

Sv Sievert

TAN Test Area North  
TLD thermoluminescent dosimeter  
TRA Test Reactor Area

## 6.1 INTRODUCTION

Technical Basis Documents and Site Profile Documents are general working documents that provide guidance concerning the preparation of dose reconstructions at particular sites or categories of sites. They will be revised in the event additional relevant information is obtained about the affected site(s). These documents may be used to assist NIOSH in the completion of the individual work required for each dose reconstruction.

In this document the word "facility" is used as a general term for an area, building or group of buildings that served a specific purpose at a site. It does not necessarily connote an "atomic weapons employer facility" or a "Department of Energy facility" as defined in the Energy Employee Occupational Illness Compensation Program Act of 2000 (42 U.S.C. § 7384l (5) and (12)).

A branch of the Idaho Operations Office (ID, previously IDO) provided external dosimetry resources and services at the Idaho National Engineering and Environmental Laboratory (INEEL) from the start of operations in 1951 [when it was called the National Reactor Testing Station (NRTS)] until 1989, when the U.S. Department of Energy (DOE) transferred that responsibility to the prime operating contractor. Despite the fact that INEEL had several contractors at a time and that contractors changed often, the external dosimetry process has remained under technical management of a single organization with responsibilities for dosimetry development, operational dosimetry, and radiological records; thus providing a stable external dosimetry system.

## 6.2 BASIS OF COMPARISON

The Interactive RadioEpidemiological Program (IREP) calculates the probability of cancer induction in an organ from the external equivalent dose and internal dose received by that organ. Appendix B of the *External Dose Reconstruction Implementation Guidelines* (NIOSH 2002) provides conversions from four photon dose quantities [deep dose equivalent,  $H_p(10)$ ; ambient dose equivalent,  $H^*(10)$ ; exposure,  $X$ ; and air kerma,  $K_a$ ] and three neutron quantities [fluence,  $\phi$ ; ambient dose equivalent,  $H^*(10)$ ; and deep dose equivalent,  $H_{p,slab}(10)$ ] to the organ doses. Over the years, as the National Council on Radiation Protection and Measurements (NCRP), International Commission on Radiological Protection (ICRP), and their predecessor organizations have developed the definitions of dosimetry parameters, dose parameters measured by the INEEL dosimetry system have received further definition. INEEL has reported doses as penetrating and nonpenetrating. The penetrating dose corresponds to the deep dose equivalent, and the nonpenetrating dose plus the penetrating dose corresponds to the shallow dose equivalent.

Horan and Braun (1993), Attix and Roesch (1968), and Meinhold (1975) discuss the history of radiation protection requirements from the 1930s. In 1949, the newly formed National Committee (now Council) on Radiation Protection (NCRP) issued NCRP Report 7 [as National Bureau of Standards (NBS 1940, p 6) Handbook 42], which recommended a permissible dose of  $0.3 \text{ R wk}^{-1}$  ( $15 \text{ R yr}^{-1}$ ) for occupational workers. The term dose was undefined. Roentgen (R) was defined as the quantity or dose of X-rays such that the associated ionization per 0.001293 gram of air ( $1 \text{ cm}^3$  at standard temperature and pressure) produces 1 electrostatic unit of charge of either sign. A site manual in April 1952 stated the limit as "0.3 rep  $\text{wk}^{-1}$  at an effective depth in soft tissue of 5 cm, assumed to be the depth of the blood forming organs" (ACC 1952, p. IV: 1-1). It does not mention a quarterly or an annual limit.

In 1953, the International Commission on Radiation Units and Measurements (ICRU 1954) established a new quantity, absorbed dose, which is the energy deposited in material per unit mass by radiation, using the unit rad = 100 erg/g. It specified the term exposure dose, later to become exposure, for the ionization capability in air for X- and gamma rays. In 1956, the ICRU defined the

term relative biological effectiveness (RBE) dose and the quantity rem (roentgen equivalent in man) and the concept of adding all types of external doses together (ICRU 1956).

In 1957, the NCRP introduced an age prorating formula for the Maximum Allowable Dose of 5 rem  $\times$  [age (yr) -18] (NBS 1958). This introduced 5 rem as an average annual dose but deemphasized it as a limit. The AEC issued AEC Manual Chapter 0524 "Permissible Levels of Radiation Exposure" on January 9, 1958 which adopted the prorating formula. It retained 15 rem as the maximum annual dose and superseded the 13 week whole-body limit of 3 rem with "the provision that not more than one-fourth of the 15 rem maximum permissible yearly dose shall be taken in one-fourth of a year" (AEC 1958).

The quarterly limit of 3 rem or 12 rem  $\text{yr}^{-1}$  replaced the 15 R  $\text{yr}^{-1}$  associated with the weekly limit (NBS 1958, p 3 footnote 2). President Eisenhower approved these values in 1960 for Federal agencies. AEC Manual Chapter 0524 was reissued in 1963 and reissued later as Energy Research and Development Administration (ERDA) Manual Chapter 0524, which provided requirements for radiation safety.

In 1957, NBS Handbook 63 (NBS 1957) specified a dependence of the relative biological effectiveness (RBE) on the linear energy transfer (LET) of the charged particles that actually deliver the dose. NBS used this in the Snyder calculations of maximum permissible neutron flux (NBS 1961) and it is still used in the radiation control regulations for DOE.

At an April 1962 ICRU meeting, the use of the terms RBE and RBE dose in radiation protection was criticized and the terms quality factor (QF, now Q) and dose equivalent (DE, now H) were introduced. The ICRU recommended the quantity kerma in 1962.

In 1971, NCRP Report 39, *Basic Radiation Protection Criteria* (NCRP 1971a), recommended an annual dose limit of 5 rem, eliminating the quarterly limit. In April 1975, ERDA reissued Manual Chapter 0524 (ERDA 1975), which invoked the 5-rem annual dose limits in NCRP Report 39 and required adding internal and external dose equivalents if both are known. Monitoring was required "where the potential exists for the individual to receive a dose or dose commitment ... in excess of 10% of the quarterly standard" of 3 rem. Personnel monitoring equipment for each individual was required for external radiation. "To achieve optimum accuracy, personnel dosimeters should comply with the performance parameters contained in American National Standards Institute standards N13.5, N13.7 (ANSI 1983a), and N13/42 WG1 Final draft 1974" (ERDA 1975, App. p 10). Quality factors from NCRP Report 38 are specified along with the neutron flux density for 100 mrem in 40 hours as a function of neutron energy (NCRP 1971b). The guidance in NCRP (1971b) for interpolating in energy cannot be accomplished with an instrument. The dose equivalent conversion factors reported in ICRP 21 (1973) do not present that problem.

In 1971, ICRU defined the quantity *dose equivalent index*, the maximum value in a 30-cm-diameter sphere, for describing ambient radiation fields for radiation protection purposes (ICRU 1971). ICRU extended this discussion in *Conceptual Basis for the Determination of Dose Equivalent* (ICRU 1976), which defined the concept of deep and shallow dose equivalent indexes as those inside a 1-cm depth in the sphere and at a depth between 0.07 mm and 10 mm, respectively. A remaining issue was that the quantity was measured near the surface of the sphere but applied to the center of the sphere, a distance of 14 or 15 cm. In 1980, ICRU identified the deep and shallow dose equivalent indexes as restricted indexes (ICRU 1980). In 1985, ICRU Report 39, *Determination of Dose Equivalents Resulting from External Radiation Sources*, introduced the concepts of aligned and expanded fields to eliminate issues of field direction and nonuniform fields; it also introduced several dose equivalents:

ambient dose equivalent, directional dose equivalent, individual dose equivalent penetrating, and individual dose equivalent superficial (ICRU 1985).

ICRP Publications 26 and 30 (1977, 1979) introduced new dose limits and the associated quantity *effective dose equivalent* as averaged over the radiation-sensitive organs of the body.

In 1981, DOE Order 5480.1A, Chapter XI, "Requirements for Radiation Protection" (DOE 1981) superseded ERDA Manual Chapter 0524 (ERDA 1977). In 1988, DOE Order 5480.11, "Radiation Protection for Occupational Workers," superseded DOE Order 5480.1A, Chapter XI. This order adopted much of the language of ICRP Publications 26 and 30 (1977, 1979), and the monitoring threshold became 100 mrem effective dose equivalent. The order imposed slight changes in quality factor value for neutrons in one table, but did not capture those changes in the table of permitted neutron flux density.

Because of questions of quality control for dosimetry, the Conference of Radiation Control Program Directors encouraged development of a dosimetry accreditation process, leading to the development of ANSI N13.11 (ANSI 1983b) and the National Voluntary Laboratory Accreditation Program (NVLAP). DOE *Guidelines for the Calibration of Personnel Dosimeters* (Roberson and Holbrook 1984) revised the ANSI (1983) NVLAP processes. Calibration was to the quantities shallow and deep dose equivalent ( $H_s$  and  $H_d$ ) and shallow absorbed dose ( $D_s$ ), which are similar to the individual dose equivalent superficial and individual dose equivalent penetrating dose defined in ICRU (1985). These quantities were renamed to the personal dose equivalent  $H_p(d)$  (ICRU 1993) where  $d$  is the depth in mm (0.07 for surface and 10 for deep) from the surface for which the dose is measured. In 1987, DOE Order 5480.15, "Department of Energy Laboratory Accreditation Program for Personnel Dosimetry," (DOE 1987) established the DOE Laboratory Accreditation Program (DOELAP) system for dosimetry accreditation. In 1986, *Standard for the Performance Testing of Personnel Dosimetry Systems* (DOE 1986a) specified the measurement of deep and shallow dose equivalents at depths of 10 mm and 0.07 mm, respectively.

In 1990, the ICRP redefined the concept of dose equivalent to equivalent dose, redefined quality factor to radiation weighting factor, and generated new factors (ICRP 1990). These factors, invoked in NIOSH (2002), depend on neutron energy at the entrance to the body rather than on secondary particle LET where the dose is received. Dose conversion factors for organs and for ambient dose equivalent and personal dose equivalent were generated in ICRP Publication 74 (ICRP 1996) and are referenced in the external dose implementation guide (NIOSH 2002).

Thus, the quantities to be measured and reported by the dosimetry systems have been evolving over the last 50 years. Although the standards organizations were changing definitions, this had little impact on dosimetry measurements because for gamma radiation the differences are small.

## **6.3 DOSE RECONSTRUCTION PARAMETERS**

### **6.3.1 Site Administrative Practices**

It was INEEL policy that personnel expected to receive any radiation dose or personnel whose work was centered at the site were assigned a radiation monitoring badge. These badges were usually stored at the respective operational area entrance security gate for INEEL facilities. Control badges, which are used to subtract background radiation, have also been located there. This practice may lead to subtracting environmental radiation from site activities reducing the reported doses.

Environmental radiation levels have been monitored for most of the life of the INEEL, originally with film badges and later with TLDs. Table 6-1 presents results of this monitoring at facility fence-line

locations near the security gates which can be added to individual's dose history or used for non-radiation workers working at the site.

Table 6-1. INEEL facility fence direct gamma values (TLD – Background) (mR).

Year	ARA I & II	SPERT	TAN-TSF	TAN-LOFT	TAN-LPT	CFA	TRA	ICPP	RWMC	EBR-II	TREAT	Backgrnd
1952-72	226	12	42	10	12	52	438	446	32	36	18	
1973	86	21	41	17	12	53	306	405	32	37	19	121
1974	162	48	8	7	0	59	320	627	370	35	17	123
1975	114	16	29	11	7	17	195	357	265	32	8	118
1976	66	27	22	15	12	20	140	311	155	56	50	113
1977	41	5	0	4	4	1	137	318	189	22	0	132
1978	52	12	2	9	4	7	143	251	106	56	2	129
1979	63	18	10	17	7	14	159	236	65	59	5	113
1980	65	17	8	19	13	18	251	203	57	51	12	119
1981	63	18	8	17	10	14	231	255	42	28	9	118
1982	50	26	6	12	6	10	163	124	42	20	12	117
1983	78	17	23	26	19	18	174	141	50	24	10	115
1984	80	19	11	19	12	15	205	181	48	31	13	124
1985	80	19	11	19	12	15	205	181	48	31	13	124
1986	80	19	11	19	12	15	205	181	48	31	13	124
1987	80	19	11	19	12	15	205	181	48	31	13	124
1988	80	19	11	19	12	15	205	181	48	31	13	124
1989	80	19	11	19	12	15	205	181	48	31	13	124
1990	80	10	10	11	9	11	28	39	27	19	13	124
1991	80	10	10	11	9	11	28	39	27	19	13	124
1992	80	10	10	11	9	11	28	39	27	19	13	124
1993	77	19	18	23	15	15	48	37	24	28	16	111
1994	69	0	0	0	0	0	24	28	25	15	3	130
1995	91	6	4	8	2	11	31	43	42	17	7	116
1996	52	4	14	0	0	13	28	49	40	22	21	129
1997	46	10	3	8	0	9	29	44	17	16	16	128
1998	62	8	0	5	0	12	25	31	20	0	11	131
1999	49	13	0	0	0	5	10	38	22	13	13	122
2000	28	16	7	16	8	19	40	55	61	25	26	129
2001	31	3	0	0	0	0	27	32	25	0	3	140
2002	41	11	0	0	0	9	34	54	33	18	39	120

Some individuals who might occasionally visit site facilities but did little work with radiation, had badges at several different facilities. It is not appropriate to base missed doses on the multiple badges issued. Early on at INEEL, the badge change frequency was not the same for everyone. Workers with low probability of exposure were placed on a longer change cycle than those with more chance of exposure. Therefore, missed doses should be based on the actual change frequency for a person, and the frequency can be determined from the individual's data package.

The INEEL dosimetry organization developed a set of basic administrative practices in 1951, which have changed somewhat as the technologies of ionizing radiation dosimetry and recordkeeping have changed.

DOE provided dosimetry information for a former INEEL worker, whose dose reconstruction is underway, should include a dose summary for the employment period and a copy of each weekly, monthly, quarterly, etc. form which will also show the work location, so the individual file could be several inches thick in hard copy. Each sheet is redacted so only the person of interest's name and applicable information are visible. This file provides the recorded information as to the exchange

period for the person for that time period. Figures 6-1 through 6-5 are a partial example set of redacted dose reporting forms.

From 1951 to 1958, the INEEL dosimetry staff recorded dose daily on a dose card (Figure 6-1), rezeroed pencil ionization chambers worn by workers, and entered the weekly badge result on the same card. On this sample, on October 28, November 16, and December 9, 1954, the badges were

WEEK BEGINNING SEPT. 26, 1954										SEV			INS			RING		NS	
SU	M	T	W	T	F	S	P	B	G	G									
26	27	28	29	30															
761 Watchdog 9-30-54																			
3	4	5	6	7	8	9	20												
10	11	12	13	14	15	16	0												
17	18	19	20	21	22	23	0												
24	25	26	27	28	29	30	20												
31	1	2	3	4	5	6	10												
7	8	10	11	12	13	10	150												
BADGE #	NAME		EMPLOYEE		ABC		S #		P		B		G		RING		NS		
14	15	16	17	18	19	20	0	0	15+										
21	22	23	24	25	26	27	0												
28	29	30	1	2	3	4	0	0	10										
5	6	7	8	9	10	11	0	0	0+										
12	13	14	15	16	17	18	0	0	20										
19	20	21	22	23	24	25	0	0	10										
Form IRP-18										WEEK ENDING DEC. 25, 1954		SUB		TOTALS		25+		0	
- BADGE #										AEC									

Figure 6-1. Individual dose reporting form in use until 1958. .

pulled and read in response to high pencil chamber readings. The personnel monitoring badges have always been considered more reliable than pencil dosimeters; so after the film badge results became available, the daily pencil readings were no longer considered doses of record. However, these values can be recovered from the earliest forms for a worst-case estimate of dose. In Figure 6-1, the pencil readings totaled 820 mR and the badges reported 0 mR for 18 badges.

Figure 6-2 is a report from reading the films in the same period. On three of the five badges, the more sensitive open window (OW) result was zero, so the shielded film was not read. On the other two, the open window and shielded values were at the minimum recorded density of 0.02 which corresponded to a 30 mR penetrating dose.

Handwritten notes: *Chad Swin*, *22-19-H*, *FILM REPORT IBH*, *93*, *093 5-22-28-58*

Plant: *CFA Site Survey*      Week Beginning: \_\_\_\_\_

BADGE No.	NAME	REMARKS	DENSITY		EXPOSURE		
			O. W.	SHIELD	BETA	GAMMA	TOTAL
[Redacted]	[Redacted]	A.T.C. 5-22-58 5-28-58	.02	.02	0	30	X
[Redacted]	[Redacted]	A.T.C. 5-22-58 5-28-58	.02	.02	0	30	X
[Redacted]	[Redacted]	A.T.C. 5-22-58 5-28-58	0	0			
[Redacted]	[Redacted]	A.T.C. 5-22-58 5-28-58	0	0			
[Redacted]	[Redacted]	A.T.C. 5-22-58 5-28-58	0	0			

*2167*

Figure 6-2. Film report form used in 1958.

After the pencil ionization chambers were replaced with self-reading pencil dosimeters (which were also ionization chambers), the INEEL operational health physics staff would rezero the dosimeters. The film reading was automated and results were stored in a computer. The form shown in Figure 6-3 reports badge reading for May 1959 when badges were exchanged every two weeks. The column under the P of Personnel is an area designator with the code listed under Location at the bottom of the page. The next column was unused and dropped somewhat later. The next column is a reason code. They are listed in Attachment 6A. Figure 6-4 is a listing of some doses received during recovery from the SL-1 accident. Workers from several areas were pulled into the accident recovery process, and it is notable that one result exceeds the dose limits and that there are few zeros. Figure 6-5 is a follow-up badge report for one result on Figure 6-4.

When there has been a question about a dose value being assigned to an INEEL worker, a Personnel Exposure Questionnaire was normally initiated as shown in Figure 6-6 (shows a hypothetical case).

### 6.3.2 Personnel Monitoring Systems Used at INEEL

#### 6.3.2.1 Initial Film Badge

The badging system in place when operations began at the NRTS was called the Self-Service System (Cipperley 1958). This film system, in use from August 1951 to March 1958, used the Oak Ridge National Laboratory stainless-steel holder, which was 1.875-in. long, 1.375-in. wide, and 0.25-in. thick. Badges were processed weekly. The upper portion of the badge was shielded with 1 mm of cadmium and the lower portion was an open window. Sensitive and insensitive DuPont type 552 film was used

U. S. ATOMIC ENERGY COMMISSION  
IDAHO OPERATIONS OFFICE  
PERSONNEL METERING BRANCH  
PERSONNEL EXPOSURE REPORT

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CONTRACTOR NAME	AREA	NAME	CLM BADGE NO.	PERIOD START DATE	END DATE	SENSITIVE ALTA	SENSITIVE MAGNA	INSENSITIVE GAMMA	ALFA NEUTRON	BETA NEUTRON	TOTAL EXPOSURE	REMARKS
		[REDACTED]	[REDACTED]	5/2/59	5/3/59	1	0.000	0.000				
		[REDACTED]	[REDACTED]	5/0/59	5/3/59	2	0.000	0.000				
		[REDACTED]	[REDACTED]	5/8/59	5/9/59	1	0.000	0.000				
		[REDACTED]	[REDACTED]	5/0/59	5/9/59	2	0.000	0.000				
		[REDACTED]	[REDACTED]	5/8/59	5/9/59	1	0.000	0.000				
		[REDACTED]	[REDACTED]	5/4/59	5/9/59	2	0.000	0.000				
		[REDACTED]	[REDACTED]	5/8/59	5/9/59	1	0.000	0.000				
		[REDACTED]	[REDACTED]	5/0/59	5/9/59	4	0.000	0.000				
		[REDACTED]	[REDACTED]	5/4/59	5/9/59	2	0.000	0.000				
		[REDACTED]	[REDACTED]	5/8/59	5/9/59	3	1				14	
		[REDACTED]	[REDACTED]	5/2/59	5/9/59	3	1				14	
		[REDACTED]	[REDACTED]	5/2/59	5/9/59	3	1	0.000	0.000			
		[REDACTED]	[REDACTED]	5/2/59	5/9/59	3	1	0.000	0.000			
		[REDACTED]	[REDACTED]	5/0/59	5/9/59	13	0.000	0.000				
		[REDACTED]	[REDACTED]	5/1/59	5/9/59	2	0.000	0.000				
											1.00	

30-16492

Figure 6-3. Monthly badge reporting form from May 1959. .

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NAME	CONTR.	AREA	BADGE NUMBER	BETA	GAMMA	TOTAL
[REDACTED]	71	32	[REDACTED]		50	
[REDACTED]	07	17	[REDACTED]		365	
[REDACTED]	01	03	[REDACTED]			
[REDACTED]	02	05	[REDACTED]		140	
[REDACTED]	73	00	[REDACTED]		1175	
[REDACTED]	02	15	[REDACTED]		345	
[REDACTED]	30	00	[REDACTED]	550	740	
[REDACTED]	01	03	[REDACTED]		35	
[REDACTED]	04	07	[REDACTED]	130	250	
[REDACTED]	71	22	[REDACTED]	810	205	
[REDACTED]	08	03	[REDACTED]		60	
[REDACTED]	67	16	[REDACTED]	120000	23195	
[REDACTED]	07	16	[REDACTED]		570	
[REDACTED]	07	04	[REDACTED]			
[REDACTED]	01	03	[REDACTED]		65	
[REDACTED]	01	03	[REDACTED]	1475	2370	
[REDACTED]	01	01	[REDACTED]		30	
[REDACTED]	02	03	[REDACTED]			
[REDACTED]	01	03	[REDACTED]	120	145	
[REDACTED]	01	03	[REDACTED]		15	
[REDACTED]	02	00	[REDACTED]			
[REDACTED]	01	03	[REDACTED]		245	
[REDACTED]	01	03	[REDACTED]	175	210	
[REDACTED]	01	03	[REDACTED]	530	35	
[REDACTED]	01	00	[REDACTED]			
[REDACTED]	04	16	[REDACTED]	120	130	
[REDACTED]	01	03	[REDACTED]		180	
[REDACTED]	02	04	[REDACTED]		20	
[REDACTED]	04	07	[REDACTED]			

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Figure 6-4. Badge pull results from January 1961 for work in recovery from the SL-1 accident.

10-105  
(2-58)

**BADGE REPORT**

Copies: 1. H. P. Representative  
2. File

*Special Report  
metal* 032

TO: \_\_\_\_\_

AREA: Su1 Bldg. \_\_\_\_\_ Date \_\_\_\_\_

RE: \_\_\_\_\_ Badge No. \_\_\_\_\_

The badge on the above named employee recorded:

SEN		INS	
Beta	Gamma	Beta	Gamma
530	35		

The period extending from \_\_\_\_\_ through 1-31-61

Badge pulled for reason listed below:

High Pencil Readings of taken from C-14 by pull

Damaged Pencil Do Special Report to G,

week 5-

Signed \_\_\_\_\_

Figure 6-5. Special badge report associated with a high beta reading listed in Figure 6-44.

for beta-gamma dosimetry for most locations; DuPont type 558 film (type 508 sensitive and type 1290 insensitive) was used at two reactor areas.

Gamma calibration was to a radium source, and beta calibration was to a metallic uranium plate. To determine doses, the film densities were read to  $\pm 0.02$  density unit. A calibration curve was used to convert the cadmium-shielded portion to penetrating gamma exposure in roentgen. The open window density corresponding to the gamma exposure was subtracted from the measured open window density and the remainder was converted to beta dose in rep.

Type 552 film has a threshold level of about 30 mR, and type 558 film has a threshold level of about 10 mR. The open window will respond to beta radiation as well as X-rays and low-energy gamma rays. Because of the high atomic number ( $Z$ ) of film in relation to air or tissue, the open window will over respond per unit exposure to low-energy photon radiation, as shown in Figure 6-7, by about a factor of 30 at 40 keV. Using a cadmium filter with its high  $Z$  severely attenuates the photons that get to the film, so the over response is reduced to about a factor of 2 at 125 keV. The beta particle range is independent of the atomic number  $Z$  depending only on the density, so the 1-mm cadmium filter ( $\sim 900 \text{ mg/cm}^2$ ) acts like a tissue depth of 9 mm for beta radiation.

Wrist badges used the same package attached to a wrist band. A finger ring used a small piece of film with a silver or cadmium filter. Pencil ionization chambers were used to monitor daily doses and control operational activities. The dosimetry group read and recorded these pencil readings on cards. Film badge readings were written on the same cards to indicate the dose of record. In 1958, the Victoreen 352 pencil ionization chambers being read by the dosimetry group were replaced with self-reading dosimeters that were read and rezeroed by the field health physics technicians (AEC 1959, p 11). Film readings remained the dose of record.

**PERSONNEL EXPOSURE QUESTIONNAIRE**

Date 1-5-58

---

Name of employee Don, Jim S# 12345 Badge Number 1003

Area GFP Exposure Date 12-29-57--1-4-58

---

Reason for Investigation:

A reportable weekly daily pocket meter reading total of \_\_\_\_\_

Weekly film total of 300 mR or more.

( ) \_\_\_\_\_

Film total covers period extending from 12-29-57 through 1-4-58

FILM RESULTS

BETA	GAMMA
500	350

EXPOSURE RESUME

Week Ending	Meters	SUN.	MON.	TUES	WED.	THURS.	FRI.	SAT
<u>1-4-58</u>	Pocket Meters	-	20	40	60	90	80	-
	Badge Meters	-	-	-	-	-	-	B-500 G-350

Remarks Total 850 mrem

---

Investigation:

a. Findings of Health Physics Representative and/or Supervisor:

b. Recommendations:

Investigated by \_\_\_\_\_ Date \_\_\_\_\_ Noted \_\_\_\_\_ Supervisor \_\_\_\_\_

Health Physics

Figure 6-6. Personnel exposure questionnaire partially completed for a hypothetical case.

### 6.3.2.2 Multiple-Filter NRTS Film Badge

In March 1958, the security badge and film badge were combined in a film badge containing filters of 1 mm cadmium, 0.013 mm. silver, and 0.5 mm aluminum with thicknesses of 950 mg cm<sup>-2</sup>, 203 mg cm<sup>-2</sup>, and 175 mg cm<sup>-2</sup>, respectively, including the plastic in which they are mounted (Cipperley 1968). This NRTS badge was also a security badge, resulting in an absorber thickness of 100 mg cm<sup>-2</sup> in the open window, which filtered out beta radiation below 360 keV.

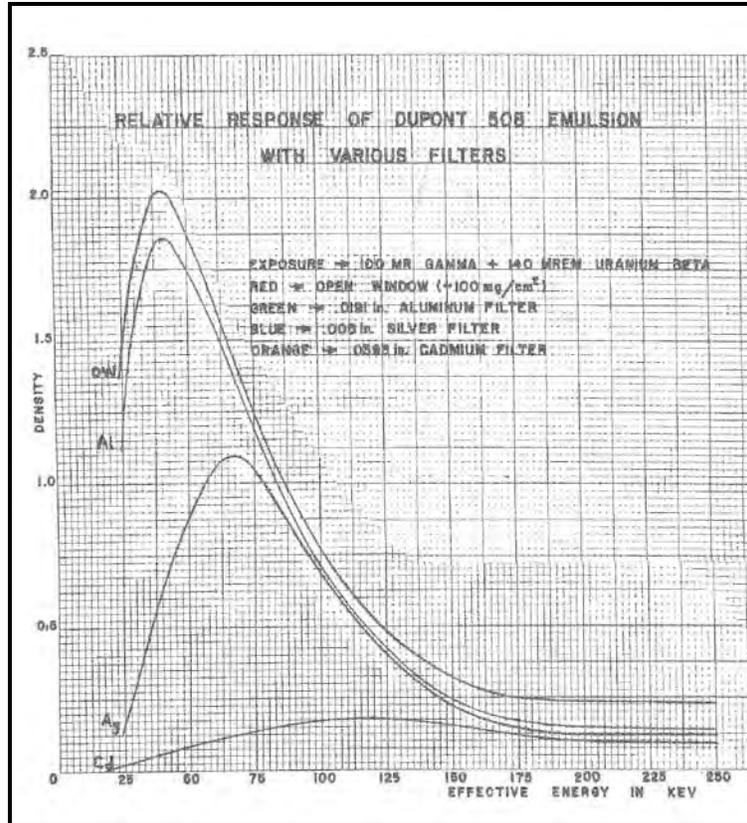


Figure 6-7. Response of Dupont 508 film with various filters to 140 mrem uranium beta and 100 mR of different energy photon irradiation provided by NBS. The original badge used the open window and cadmium shielded films. The multiple filter badge used all three filters plus the open window (Cipperley and Gammill 1959).

With the four absorbers, it was possible to separate beta radiation from photon radiation and to somewhat determine photon energy. Figure 6-7 shows photon energy dependence of the darkening behind the four filters for a combination of uranium beta and X-ray irradiation provided by NBS (Cipperley and Gammill 1959). With Dupont type 508 film, mixed exposures of radium gamma and uranium beta of 10, 20, and 30 mR or mreps were measurable within  $\pm 12$  mR with 95% confidence. A minimum reporting level of 10 mrem was used for both beta and gamma radiation (AEC 1962).

The ID Instrument and Development Branch developed an automatic film reader and densitometer (Purcell and McGary 1963). An algorithm based on probit corrected densities was developed to determine the high-energy photon, beta, and low-energy photon contributions separately (Cipperley 1968, p. 94). The cadmium filter provided the hard gamma component. The uranium beta responses under the open window, aluminum, and silver filters were 1, 0.2, and 0.1, respectively. By assuming a beta signal and subtracting it, the remaining signal could be attributed to low-energy photons and the energy could be estimated. For beta other than uranium, the analysis had greater uncertainty.

Because about 95% of the weekly badge films had doses less than 30 mrem, in 1958 the badging interval was increased to biweekly or monthly with the exception of the high-dose areas where the weekly schedule continued (AEC 1959). The introduction of punch cards increased the efficiency of

report and record generation. A 12-point calibration curve was generated for radium and for  $^{137}\text{Cs}$  gamma and uranium beta. Calibration did not use a phantom.

Experience following the SL-1 accident showed a wide variation of beta-to-gamma ratios and necessitated controlling both radiations rather than just the gamma. A set of as many as 18 badges could and in many cases was fastened on a belt around the worker to determine a beta:gamma ratio for each particular entry (Cipperley, Henry, and Cusimano 1965).

### 6.3.2.3 Original Lithium Fluoride Teflon TLD System

Beginning in November and December 1966, individuals projected to receive doses of less than  $0.5 \text{ rem yr}^{-1}$  were placed on a lithium fluoride (LiF) disk thermoluminescent dosimeter (TLD) badge, which was exchanged quarterly (Cusimano and Cipperley 1968). Two 13-mm-diameter Teflon disks, 0.4 mm thick ( $100 \text{ mg}$  ( $75 \text{ mg/cm}^2$ ) impregnated with  $28 \text{ mg LiF}$ ), were mounted in a badge behind an open window and a 1-mm cadmium filter (Watkins). The disks, manufactured by Teledyne Isotopes, were read with the Teledyne Model 7300 TLA reader. LiF was chosen because the average  $Z$  is close to that of air and tissue, resulting in little energy correction for beta or gamma radiation. The badge could read  $30 \text{ mR}$  on a quarterly basis, so more small doses were reported. The angular dependence of the gamma response (within  $10^\circ$  to  $70^\circ$ ) is superior to film because the material acts like an ionization chamber. For normal monitoring, only the open window TLD was read and considered penetrating dose unless it read more than  $125 \text{ mrem}$ , in which case the shielded TLD was also read.

The pilot tests were successful, and the LiF Teflon TLD system was phased into use in 1966, particularly for individuals who would receive low doses, with longer exchange cycles, typically 3 or 6 months. In July 1968, the monitoring period was increased from 3 to 6 months (AEC 1969). In December 1972, annual processing was used for 1,190 low-dose individual TLDs and 960 were processed quarterly (Cusimano 1972). Employees on a monthly badge change were moved to this system as late as September 1973.

The system had an automatic badge calibrator that did not involve a phantom to provide backscatter (Cipperley 1966; AEC 1970, p. 8). A later discussion introduced the use of a  $^{137}\text{Cs}$  source, so these earlier calibrations probably used radium.

### 6.3.2.4 INEEL ATLAS TLD System

Development began in 1969 on a patented Automatic Thermo Luminescent Analyzer System. It used LiF in a homogeneous mixture with Teflon and replaced the film in the multi-element badge using the same filters. This system became operational for monthly badge changes in February 1974. In June 1974, questions about this system were formalized (Black 1974; Walker 1974).

### 6.3.2.5 Harshaw Two-Chip TLD System

Several unstable characteristics with the Automatic Thermo Luminescent Analyzer System led to rapid implementation of a two-chip TLD system beginning in December 1974 for ICPP, in February 1975 for the prime contractor at TAN, TRA, etc., and in May 1975 for Argonne. This commercial Harshaw system used two LiF TLDs  $240 \text{ mg cm}^{-2}$  thick. In 1976, holes were punched in the security badges to restore the open window. One chip was covered by  $540 \text{ mg cm}^{-2}$  of aluminum and the other was under  $4 \text{ mg cm}^{-2}$  of Mylar. The aluminum-covered chip provided penetrating dose at a tissue depth of nominally 1 cm. The beta dose was calculated from the difference between the two chips. Because of the thickness of the Mylar-covered chip, the beta dose was accurate only for the

beta energy used in calibration. Field calibrations were used to reduce the problem with beta energy dependence. The thin aluminum filter (density thickness  $350 \text{ mg cm}^{-2}$ ) allowed higher-energy beta radiation to expose the chip used for measuring the penetrating ( $1,000 \text{ mg cm}^{-2}$ ) dose.

The practice was to read only the open window chip to determine if the nonpenetrating dose was above 15 mrem and, thus, reportable. If the threshold dose was exceeded, both chips would be read and the penetrating and nonpenetrating doses computed (Kalbeitzer 1983).

### 6.3.2.6 Panasonic Four-Chip System

In 1986, with the advent of DOELAP, INEEL went to a four-element system, the Panasonic 814 AS4 (Gesell, Hall, and Andersen 1992; INEEL 2001). Lithium borate ( $\text{Li}_2\text{B}_4\text{O}_7$ ) TLD elements with plastic and aluminum filtration provide an improved measurement of deep dose equivalent and, with a thinner filter, an improved measurement of the shallow dose equivalent. A calcium sulfate ( $\text{CaSO}_4$ ) TLD provides a strong low-energy photon response. The elements are  $15 \text{ mg cm}^{-2}$  thick. Element 1 has filtration of  $16 \text{ mg cm}^{-2}$ , element 2 has filtration of  $58 \text{ mg cm}^{-2}$  plastic, and elements 3 ( $\text{CaSO}_4$ ) and 4 have filtration of  $550 \text{ mg cm}^{-2}$  of plastic and  $50 \text{ mg cm}^{-2}$  of aluminum. Although none of the elements are at a depth of  $7 \text{ mg cm}^{-2}$ , the specified depth for the shallow dose equivalent, an acceptable response can be obtained by using elements at  $16$  and  $58 \text{ mg cm}^{-2}$ . This system is qualified in DOELAP beta and photon, and mixture, performance categories.

The minimum reporting level was 15 mrem beta and gamma from January to July 1986 (Gesell 1986), 10 mrem gamma and 30 mrem beta from July 1986 to about September 1989, and 15 mrem for gamma and 30 mrem for beta until 1993 (Perry, Andersen, and Ruhter 1993), when it returned to 10 mrem gamma.

### 6.3.2.7 Nuclear Track Emulsion-Type A for Neutrons

Kodak nuclear track emulsion-Type A (NTA) was used for neutron monitoring when the field radiation protection staff requested it. NTA responds to neutrons with energies above 500 to 800 keV, for which the proton recoil tracks leave enough energy to expose at least three (four in some references) grains of emulsion.

The minimum dose assigned was 14 mrem. Before 1958, if a proton recoil track was counted in 40 microscope fields, it was read twice more for a total of 120 fields (Cipperley 1958). On one data sheet from March 1958 with 10 neutron readings, three persons received 14 mrem and one received 42 mrem. Two of the four had gamma readings (MRL = 30 mrem). A blank is recorded for 17 people on the data sheet, probably because they were not monitored for neutrons or the film was not read. Only the two individuals received measurable gamma doses. A person on weekly exchange from January to March 1958 received neutron dose equivalents of 14, 28, 42, and 14 mrem and gamma doses of 130, 70, 30, 30, 50, 30, and 20 mrem with both neutron and gamma doses received twice. Thus data sheets support the MRL of 14 mrem.

After 1959, if more than three proton recoil tracks were counted in 40 microscope fields, a different location on the film was counted by two other technicians, providing three independent results (Cipperley 1968). Two tracks or fewer were attributed to background. This resulted in a somewhat higher MRL. In November 1959, a data sheet shows a 10 and 20 mrem neutron dose equivalent. In January 1962 a data sheet shows a 20 mrem dose. A data sheet from April 1959 shows a neutron dose equivalent of 20, 20, and 40 mrem. These values suggest an MRL of 20 mrem.

Calibration was with a polonium-beryllium (PoBe) source (approximately 30 Ci), resulting in  $5.87 \times 10^{-4}$  tracks/neutron (Cusimano 1963). Uncertainties were assigned at the 90% confidence level. Cipperley (1968, pp. 102-115) discusses this process.

The field health physics staff was aware of the energy limitations of the NTA badge (Sommers 1967, 1969) and compensated with neutron-detecting pencil dosimeters and field measurements. A request to read NTA film occurred if the hard spectra neutron exposure was likely to exceed 10 mrem. Procedures were established using boron trifluoride (BF<sub>3</sub>) pencils to monitor neutrons in the Radioactive Waste Management Complex (RWMC) transuranic waste areas where NTA would not respond to low-energy neutrons (Sommers 1975).

### 6.3.2.8 Neutron Albedo Dosimetry

Because of the missed dose from neutrons below the NTA energy threshold of 0.5 to 0.8 MeV, particularly at plutonium facilities, and because of the advent of TLD techniques, several development efforts in neutron dosimetry occurred in the early 1970s. The result were several designs using the albedo technique in which scattered neutrons from the wearer's body were absorbed by <sup>6</sup>Li in a TLD.

In the Hankins dosimeter used at the INEEL (Hankins 1973), TLDs (<sup>6</sup>Li to capture thermal neutrons) are inside a polyethylene case (to lower the neutron energy) inside a cadmium shell (to eliminate thermal neutrons from outside) and <sup>7</sup>Li TLDs are used to subtract the gamma dose. Because the <sup>6</sup>Li(n,α)<sup>3</sup>He reaction has a strong energy dependence, the response does not follow the flux-to-dose-equivalent conversion, so the neutron signal is divided by a facility neutron correction factor (FNCF). From the ratio of the dose equivalent measured with a 9-in.-diameter Eberline PNR-4 and the corresponding signal (reads in mrem, but not dose equivalent) with the detector in the 3-in.-diameter PNR-4 insert, one can generate an FNCF that converts the TLD gamma equivalent signal to neutron dose equivalent (Hankins 1976). Values of the FNCF as shown in Table 6-2 (Cusimano 1981) were measured for different fields at INEEL, were tabulated for assigning the dose equivalent from the badge results, and were routinely updated.

Table 6-2: INEEL Facility Neutron Correction Factors (FNCF) 1981.

Organization	FNCF	Organization	FNCF
DOE-CFA	0.092	EG&G-TRA (Bare PuBe)	0.06
EG&G-CFA	0.092	EG&G-TRA (PuBe in poly)	0.23
ANL-TREAT	1.05	EG&G-LOFT	3.5
ANL-ZPPR	0.94	EG&G-ARA III	2.0
EG&G-TRA (L & S)	1.2	EG&G-RWMC	0.33
EG&G-TRA (SA)	2.7		

The date of changeover from NTA to albedo neutron monitoring is somewhat in dispute. Typically, different organizations would transition to new monitoring systems at different times. The present record suggests it occurred near the end of 1974 or early 1975 (Ruhter and Perry 2002; Gesell 1996), but an informal list of "Dosimetry Branch Changes" from 1978 (Dosimetry 1978) states "initial testing of albedo neutron dosimeter and replacement of NTA neutron monitoring film with same" in October 1976. Aoki (1979) says the Albedo system replaced the NTA badge in 1977. Dose reconstructions should make the claimant-favorable assumption that this transition occurred in October 1976.

### 6.3.3 Calibration

#### 6.3.3.1 Beta-Gamma Radiation

Gamma calibration initially used a radium source. Victoreen R meters standardized by NBS were used to measure radiation fields (AEC 1959, p. 132). Uranium metal bars 5 mm thick were used for beta calibrations. Cesium-137 was considered for a calibration source in 1959 (AEC 1960, p. 83) and was installed in the instrument calibration facility in 1961 (AEC 1962). An automatic badge irradiator developed in the 1960s (Cipperley 1966) did not use a phantom to provide backscatter.

As reported in 1981, an extrapolation chamber was built for the measurement of beta doses (Gupta 1981). The chamber window was polycarbonate, the gas was air, and the thick collecting electrode was Shonka tissue-equivalent plastic. The chamber was used to calibrate a 2.5 Ci  $^{90}\text{Sr}/\text{Y}$  source to tissue rad. The source with area, 2.5 cm<sup>2</sup>, was constructed by the Amersham Searle Corporation in February 1975. This source was used to measure beta correction factors for several instruments following the Three Mile Island TMI-2 reactor accident in 1978. TLD badges were calibrated to 500 mrad tissue using a 1.78 cm thick phantom 50 cm (300 rad/hr) from the source.

In January 1983, the natural uranium slab again became the primary calibration source for nonpenetrating radiation to better approximate field beta spectra (Gesell 1982a).

Separation of penetrating dose from non-penetrating dose was an issue in 1957 (Bennett 1957) and again in 1976 (Jenson 1976), particularly for ICPP where strong high-energy beta fields were not unusual.

Use of a phantom in calibration apparently started about 1981, with the NVLAP certification process developed for non-DOE dosimetry processors. About this time, calibration developed in terms of absorbed dose to tissue rather than exposure. Beginning in January 1981, in response to a draft NVLAP (a precursor for DOELAP) standard, dosimeters for calibration were irradiated with  $^{137}\text{Cs}$  using a phantom backing. To convert from exposure in roentgen to dose equivalent index in rem, a conversion factor  $C_x$  value of 1.08 was used (RESL 1981). The current recommended  $C_x$  value of 1.03 for  $^{137}\text{Cs}$  (DOE 1986b, Table 2) was used beginning in June 1981 (Gesell 1982b; Kalbeitzner 1984).

In 1989, the INEEL dosimetry service transferred from RESL to EG&G, Inc., the prime contractor. Calibrations continued to use DOE RESL sources and no changes were made to the dosimetry system. The 1991 Tiger Team Review of the INEEL site indicated that the INEEL contractor and the Idaho Operations Office using the same sources for calibration led to a conflict of interest or an advantage in DOELAP tests. As a result, EG&G purchased a Shepherd panoramic irradiator with a  $^{137}\text{Cs}$  source for badge irradiations. This irradiator does not use a phantom, but was cross-referenced using many TLD irradiations to the DOE source using a phantom (Anderson 1994). In addition, the contractor developed and characterized their own uranium slab for beta irradiations (Bean 1995).

Table 6-3 lists common sources of laboratory bias for personnel beta/photon dosimeter calibration based on comparison of the recorded dose with  $H_p(10)$ .

#### 6.3.3.2 Neutron Calibration

The initial NTA neutron badges were calibrated using a PoBe neutron source (30 Ci in 1958) (AEC 1959). In 1982, an AmBe source was used (Cusimano 1982). Alpha particles from the americium or polonium interact in the reaction  $^9\text{Be}(\alpha,n)^{12}\text{C}$ , and generate a broad spectrum of neutrons up to about

Table 6-3. Laboratory sources of uncertainty for beta/photon dosimeter calibration parameters.

Parameter	Historical description	Uncertainty <sup>a</sup>	Comment
In-air calibration	In 1981, INEEL began exposing calibration dosimeters on phantoms (used to simulate worker body). Previous calibrations do not include response from radiation backscatter response.	+10%	Recorded dose of record <b>too high</b> . Backscatter radiation from worker body is highly dependent on dosimeter design.
Radiation quantity	Before 1981, INEEL dosimeter systems were typically calibrated to a photon beam measured as <i>exposure</i> .	-5%	For higher energy <sup>226</sup> Ra and <sup>137</sup> Cs gamma radiation used to calibrate dosimeters, this caused a slight (about 3%) <b>under response</b> in recorded dose.
Tissue depth of dose	Historically, INEEL used an unspecified depth to estimate the deep dose.	±5%	The numerical effect of this for photon radiation is comparatively low. INEEL dosimeter designs had filtration density thickness of about 1,000 mg/cm <sup>2</sup> that would relate closely to the 1-cm depth in tissue.
Angular response	INEEL dosimeter system is calibrated using anterior-posterior (AP) laboratory irradiations.	> 300 keV, ~20%	Recorded dose of record likely <b>too low</b> since the dosimeter response is usually lower at non-AP angles. Effect is highly dependent on dosimeter type, radiation type, energy, and angle.
Environmental stability	INEEL film dosimeter and TLD systems are subject to signal fade with time, heat, humidity, light, etc.	±10%	Recorded dose of record depends strongly on dosimetry parameters such as when calibration dosimeters were irradiated and processed. Mid-cycle calibration minimizes effects.

a. Uncertainty estimate in recorded dose compared to  $H_p(10)$  based on judgment.

11 MeV (mean energy about 5 MeV) as shown in Figure 6-8 (Kluge and Weiss 1982). The yield of the AmBe source should be only about 3% larger than that for the PoBe source (Anderson 1971). Kluge and Weiss (1982) calculate conversion factors of  $3.51$  to  $3.76 \times 10^{-8}$  rem cm<sup>2</sup> n<sup>-1</sup> depending on the particular measure of dose equivalent chosen. IAEA (1988) provides a dose conversion factor for AmBe of  $3.8 \times 10^{-8}$  rem cm<sup>2</sup> n<sup>-1</sup> for the maximum average dose equivalent. A dose equivalent of 1.5 rem required  $3.6 \times 10^7$  n cm<sup>-2</sup> (Cusimano 1963), corresponding to a dose conversion factor of  $4.17 \times 10^{-8}$  rem cm<sup>2</sup> n<sup>-1</sup> so the recorded dose will be about 11% high. Monte Carlo calculations for 5-MeV neutrons show a dose equivalent of about  $4.2 \times 10^{-8}$  rem cm<sup>2</sup> n<sup>-1</sup> averaged over the 0- to 2-cm shell on a 30-cm-diameter cylindrical phantom (NCRP 1971b). Use of the 50-Ci AmBe source continued until 1993.

In 1993, a 40- by 40- by 15-cm polymethyl methacrolate phantom was placed near the unmoderated <sup>252</sup>Cf source used for instrument calibration, and the system was characterized for TLD calibration (Gesell et al. 1996, Appendix A). This system has since been used for neutron dosimeter quality assurance measurements. Calibration factors from the DOELAP manual are used (DOE 1986b).

Several common sources of expected laboratory bias are discussed in Table 6-4 for personnel neutron dosimeters based on comparison of the recorded dose with  $H_p(10)$ .

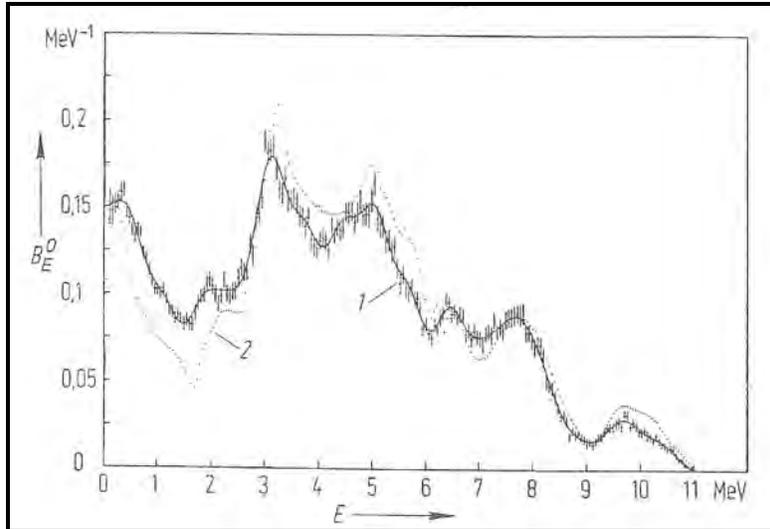


Figure 6-8. Probability density of neutron spectrum from an  $^{241}\text{AmBe}$  ( $\alpha, n$ ) source (Kluge and Weiss 1982).

Table 6-4. Common sources of laboratory bias in the calibration parameters for neutron dosimeters.<sup>a</sup>

Parameter	Historical description	Anticipated laboratory bias <sup>b</sup>
Source energy spectrum	In 1976, INEEL began using dosimeters that were calibrated on a phantom to simulate a worker's body. The previous calibrations did not include response from backscattered radiation.	NTA film tends to be insensitive to albedo neutrons, so probably had minimal effect.
Radiation quantity	Neutron dose quantities that were used to calibrate INEEL neutron dosimeters have varied historically. The <i>first collision dose</i> for fast neutrons and a <i>quality factor</i> of 10 was used for many years.	As noted above, NTA calibration would result in the reported dose being about 11% high. The effects of the respective neutron dose quantities used to calibrate INEEL dosimeters is uncertain and could be evaluated in comparison to the Hp(10) dose used in DOELAP performance testing.
Angular response	INEEL dosimeters are calibrated using anterior-posterior (AP) laboratory irradiation.	Recorded dose of record is likely too low because the dosimeter response is lower at non-AP angles. The effect is highly dependent on neutron energy.
Environmental stability	INEEL NTA film and TLD dosimeters are subject of signal fade with time, heat, humidity, light, etc.	Recorded dose of record is likely too low; however, this depends strongly upon when the calibration dosimeters are irradiated during the dosimeter exchange cycle. Mid-cycle calibration minimizes the effects.

a. Judgment based on INEEL dosimeter response characteristics.

b. Recorded dose compared to Hp(10).

### 6.3.4 Workplace Radiation Fields

#### 6.3.4.1 Gamma Radiation

In response to a Tiger Team finding, radiation fields at the INEEL have been characterized by making field measurements with a NaI(Tl) gamma spectrometer and TLDs mounted on a phantom and comparing the results (Reilly 1998). The percentage bias is shown in Figure 6-9 for the beta and gamma measurements. Most results lie within +27% to -43 %.

The high gamma bias results are for locations at RWMC looking at skyshine (back scattered and thus low energy photons) from low level waste in the Subsurface Disposal Area (SDA). The doses measured with NaI(Tl) were low (6 and 11 mrem), and the threshold energy on the NaI(Tl) detector was about 100 keV so some low energy photons are likely to have been missed.

The radiation fields at INEEL, with a few exceptions, are generated primarily by mixed fission and activation products. Therefore, most of the photon dose comes from photons with energy greater than 250 keV. The INEEL dosimeters are judged to measure these fields well.

The few exceptions are usually characterized by low dose rates. Much of the waste at the RWMC is transuranic waste from the Rocky Flats plant. This would predominantly contain plutonium and americium with 17- and 59-keV photons, which are highly adsorbed by the waste and the shipping container. The dominant fields at the RWMC come from mixed fission and activation products dominated by <sup>137</sup>Cs and <sup>60</sup>Co.

Analytical X-ray generators operating below 100 keV are used in several laboratories. These are easily shielded so the fields are usually low.

There are a few 250-keV X-ray generators used for radiography or radiography development studies. Wall shielding is generally adequate and any transmitted photons will have energy near the operating voltage because of the hardening caused by the shielding. The radiography facility at TRA has no roof shielding so dose rates of <10 mrem hr<sup>-1</sup> are possible, usually for short periods. The scattered photons will have lower energy than the primary beam. The people likely to be exposed are radiographers who receive fairly high exposures, mostly from the ambient radiation fields at their worksite and some from 300-keV <sup>192</sup>Ir or 1.25-MeV <sup>60</sup>Co.

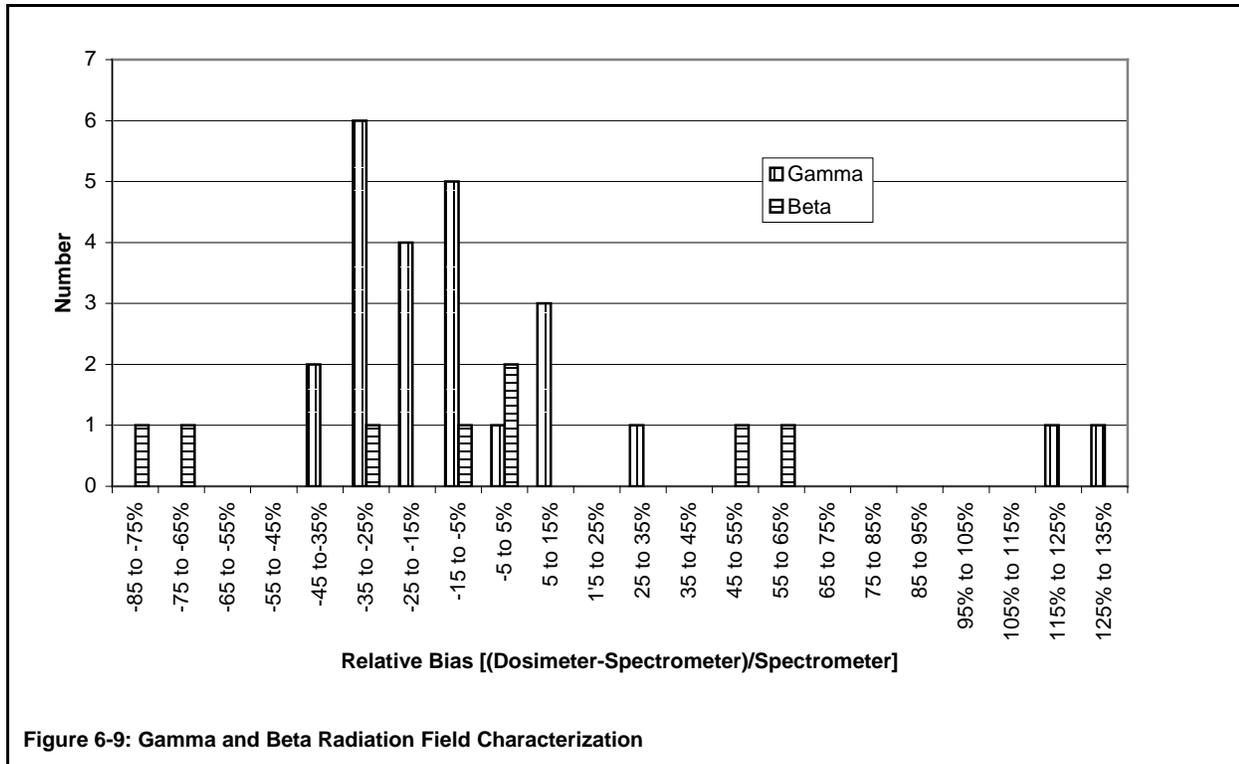


Figure 6-9: Gamma and Beta Radiation Field Characterization

Essentially all INEEL radiological work areas involved beta/photon radiation covering a wide range of energies. These fields can be generally classified according to the IREP codes in Table 6-6.

Table 6-6. Selection of IREP beta and photon energies for INEEL Facilities.

Process/ buildings	Description	Operations		Radiation type	Energy group (keV)	Percentage
		Begin	End			
Reactors	Highly dispersed fields of higher energy photon radiation fields from fission process, activation and fission product nuclides. Potential for significant airborne nuclides, and there might be significant higher energy beta radiation  PBF, TRA, ARA, TAN, EBR, ANL, SPERT			Beta Photon	>15 30–250 > 250	100 25 75
		1952	2003			
Processing plants	Highly dispersed fields of higher energy photon radiation fields from activation and fission product nuclides dominant to most exposure profiles. Potential for higher-energy beta radiation during sampling and maintenance work resulting from fission products.  ICPP	1952	2003	Beta Photon	> 15 30–250 > 250	100 25 75
Calibrations	Calibration of instruments and dosimeters  CF 633, 636	1952	2003	Beta Photon	> 15 30 – 250 > 250	100 25 75
Waste handling	Radiation characteristics are highly dependent on source of waste, but typically fission product nuclides (Sr/Y-90, Cs-137) are dominant. For TRU waste from Rocky Flats contains <sup>241</sup> Am with 59 keV photon.  RWMC, WERF	1953	2003	Beta Photon	> 15 30–250 > 250	100 25 75
Uranium handling	Produced special armor from depleted uranium. Primarily beta radiation from U-238 daughters. Some gamma from contaminants and Cs-137 sources used in process.  SMC	1985	2003	Beta Photon	> 15 30 – 250 > 250	100 90 10

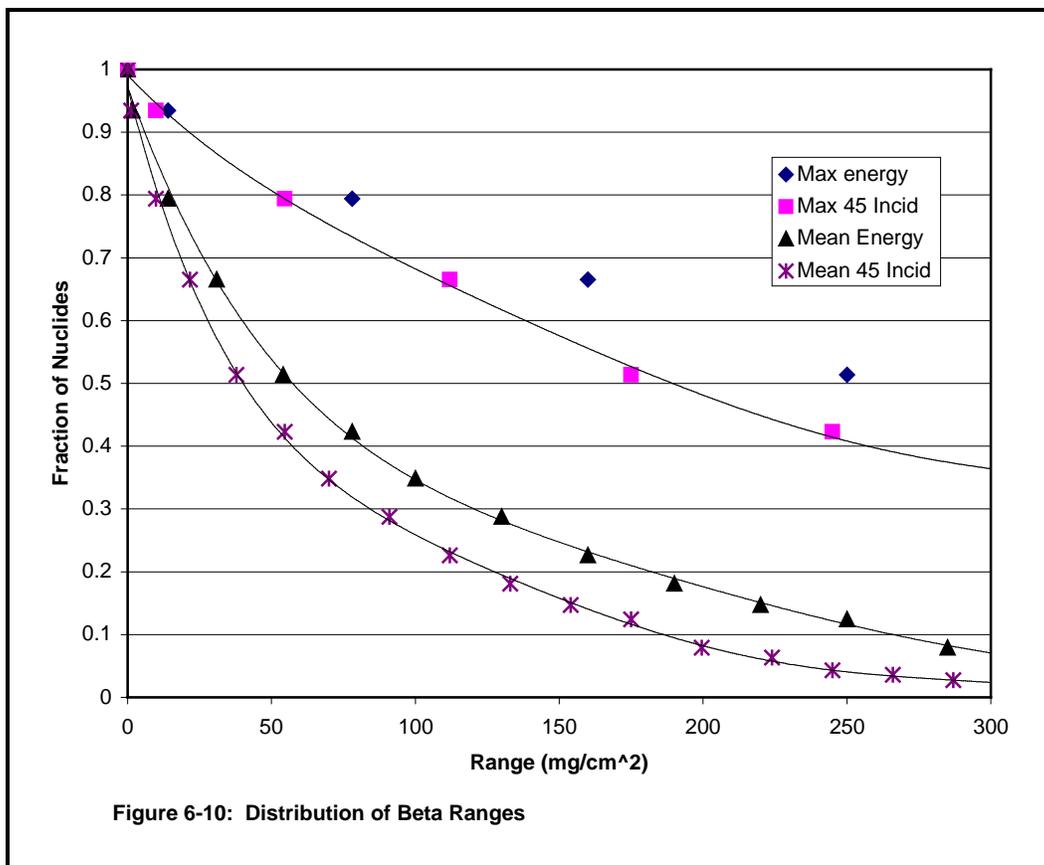
#### 6.3.4.2 Beta Radiation

Beta radiation fields are usually associated with activation or fission product radioactivity that is outside of a container such as a spill or only lightly shielded or in hot cells. High beta fields were not unusual at the INTEC where large quantities of fission products exist. Pure high energy beta fields in some locations, particularly in the exhaust stream, have caused dosimetry problems because the badge shielding or instrument packages did not provide a full 10 mm tissue equivalent coverage and thus beta fields would be measured as gamma fields.

The high bias beta results in Figure 6-9 from comparison of TLD to a phoswich beta spectrometer are for sources at contact or at 1 cm resulting in hard to reproduce geometry. The low bias beta results are for large area sources for which even the spectrometry results have large variations. The beta occupational radiation fields (only 3) have a bias better than 15%.

Beta field dosimetry became fairly accurate with the definition of DOELAP requirements in the early 1980s. Prior to that, beta monitoring systems had various flaws, primarily in a detector too thick to give a good surface result or one that was covered with extra material. Calibration was to high energy betas from either uranium or strontium. The dose from low energy betas will be missed altogether if the beta energy is not sufficient to penetrate the detector cover and will be underreported if the beta energy is not sufficient to penetrate the entire detector. The mean beta energy for the spectrum from a particular nuclide is about 1/3 of the maximum beta energy for that nuclide.

Based on the range energy curve for beta particles and the beta energy distribution of beta emitters (HEW 1970, p 90, 91,123) the fraction of beta radionuclides with ranges greater than the abscissa is plotted on the ordinate in Figure 6-10. The beta nuclides varied from location to location and time to time at the INEEL so a correction factor common for all facilities was estimated. We use the entire mixture of radionuclides to avoid questions of whether the choice is correct and to reflect the wide variety of radionuclides used at the INEEL. To reflect that the beta spectrum is not monoenergetic because of the energy carried off by the neutrino, a curve is presented for the mean energy or 1/3 of the maximum energy. To reflect that some beta particles enter the detector at an angle, a curve is provided for 45° incidence at the maximum energy and the mean energy. These curves of the fraction of nuclides with a larger range essentially show the depth dependence of beta dose, because the energy loss of electrons does not have much energy dependence. These curves also demonstrate why early dosimeters with thick sensitive elements failed to correctly report the beta dose at a depth of  $7 \text{ mg cm}^{-2}$ , a depth that was chosen in the early 1980s. These curves also demonstrate why the beta dose assigned for skin is inappropriate to use for the breast and testes where much of the organ is at a depth greater than 1 mm or  $100 \text{ mg cm}^{-2}$ , and for most of us at depths greater than 1 cm.



To calculate the fraction of dose missed by a dosimeter, you simply need to average the appropriate curve of this nature over the depth of the active detector and compare it to the value at a depth of  $7 \text{ mg cm}^{-2}$ . The appropriate curve should be the curve of the mean range for the beta spectrum and the angular distribution of the radiation exposure. To estimate this we have chosen to add the mean energy curve for perpendicular incidence and 1.4 (relative path length) times that for 45° incidence for the mean energy and to add in  $\frac{1}{2}$  that value for 45° incidence for the maximum energy. The curves are the result of a polynomial trendline to the data, so averaging the fraction of radionuclides is relatively easy.

Table 6-5 provides the cover and detector thicknesses for the beta badges used at the INEEL. Thicknesses with a “~” are estimated. The fraction of beta dose measured shown in Table 6-5 is the average as described above. To determine the corrected beta dose, divide the nonpenetrating result from the dosimetry system by the values in the last column of Table 6-5. The reported dose will likely be somewhat higher than this because the calibration probably did not consider such a correction and reported the dose for the calibration exposure.

Table 6-5: Beta Dosimeter Thicknesses and Associated Underreporting.

Dosimeter system	Time period	Covers (mg cm <sup>-2</sup> )	Detector thickness (mg cm <sup>-2</sup> )	Estimated Dose Recorded
Two filter film	1951-1958	~50	~50	0.49
Multi-filter film	1958-1974	100	~20	0.35
Low dose TLD	1969-1974	100	75	0.33
ATLAS	1974-1975	100	~100	0.30
Harshaw TLD	1975-1976	104	344	0.21
Harshaw TLD	1976-1985	4	240	0.41
Panasonic TLD	1986-present	16	15	0.86

#### 6.3.4.3 Neutron Radiation

Most INEEL workers are not exposed to neutrons and so are not badged to measure neutrons. Neutron fields at the INEEL are specific to a few facilities. The high dose locations where most of the gamma and beta dose is received, such as the ICPP and SL-1, do not have associated neutron dose.

In 1969, 150 workers were involved in radiation work which required their NTA neutron dosimeters to be evaluated out of 2900 film-badged employees and more than 3000 personnel monitored with TLD badges (AEC 1969).

For calendar year 1979, 5 people received neutron doses between 0.5 and 1 rem and 79 received measurable neutron doses below 0.5 rem (Jones 1980).

Individuals who have the potential to receive neutron dose currently wear albedo badges, and experience has shown that most do not receive significant doses. In the first 9 months of 1995, only 1,461 neutron dosimeters were issued (both monthly and quarterly badges) compared to about 50,000 beta/gamma badges. Only 54 badges had reportable doses ( $\geq 15$  mrem) as shown in Figure 6-11 (Gesell et al. 1996). Only six were above 35 mrem. The Hankins albedo dosimeter badges in use since 1975 see all neutron fields. A FNCF determined from the 9- to 3-in. ratio in the worker location is used to adjust the measurement result to dose equivalent.

In 1997, several workplace neutron fields were measured with TLDs mounted on a phantom and at nearly the same time a ROSPEC neutron spectrometer (Reilly 1998). The relative biases [(Dosimeter-Spectrometer)/Spectrometer] for the neutron fields are shown in Figure 6-12. These results show a greater dispersion than the gamma results.

The two lowest values (-0.52 and -0.51) are for TLD measurements on opposite sides of a phantom where the field is from Cf-252 on an overhead filter bank. The phantom attenuates the radiation from each side so the TLDs only see half the radiation field. The next lowest value (-0.38) is for the Cf-252 instrument calibration source at a distance of 3.5 m where the operator stands. The two highest values (0.94 and 0.71) are for a waste drum which was reanalyzed and a new 9”/3” ratio determined

because of the unsatisfactory initial result. The report suggests that other waste barrels may have had neutron sources causing interference. The remaining bias values lie between -0.16 and 0.44.

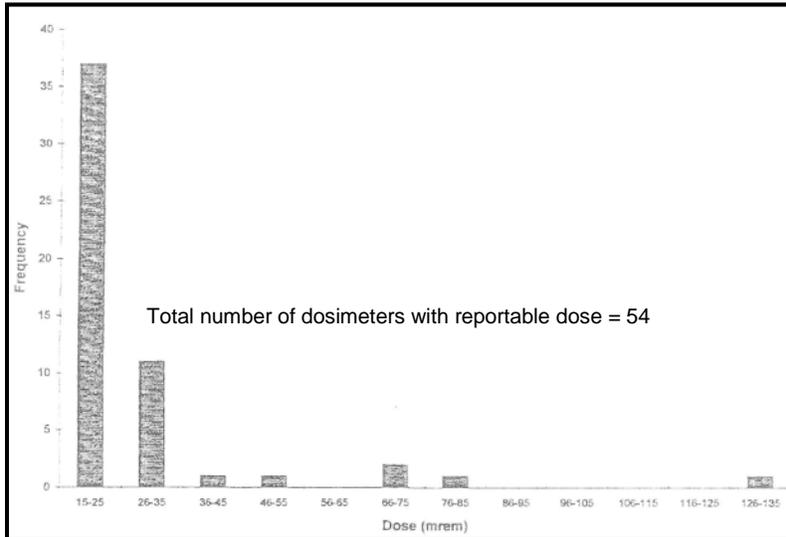


Figure 6-11. Distribution of reportable neutron dose at the INEEL for the first 9 months of 1995. Of 1461 dosimeters, 1407 were below the 15 mrem reporting level.

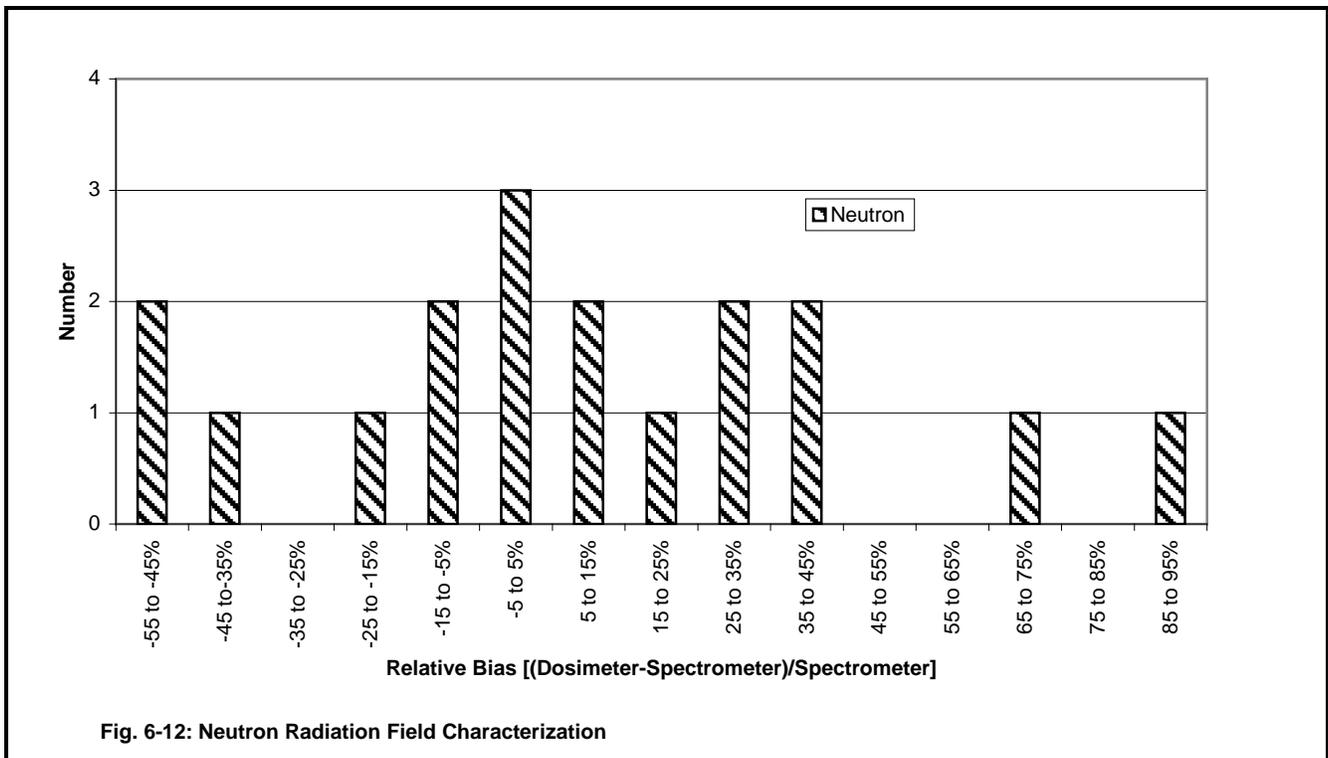


Fig. 6-12: Neutron Radiation Field Characterization

Sources of neutron exposure include neutron sources at the instrument calibration laboratories and 14-MeV neutron generators used to characterize waste. For these spectra, the NTA works reasonably well. Use of small  $^{252}\text{Cf}$  sources for research began after albedo badge use began. Figure 6-13 provides spectra for the AmBe (Kluge and Weiss 1982) and  $^{252}\text{Cf}$  (fission) neutron sources and the 14-MeV neutron generator as seen through 10 cm of polyethylene shielding (Ing and Makra 1978) typical of the INEEL facilities.

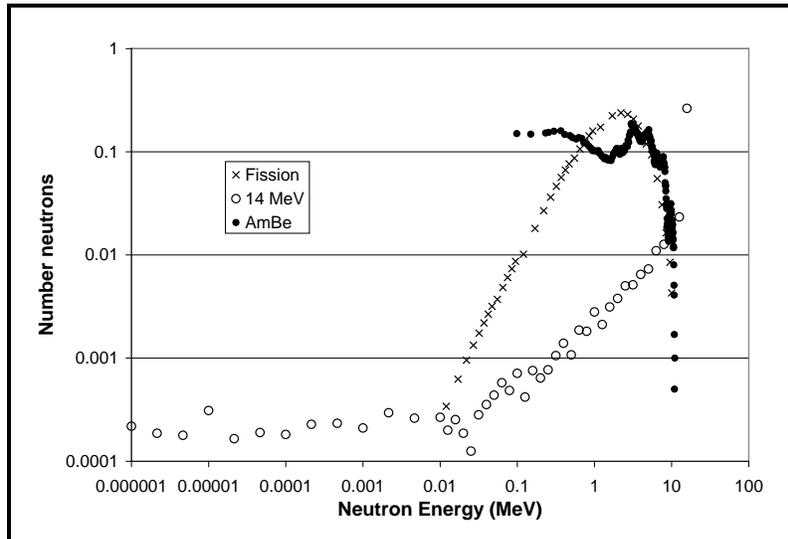


Figure 6-13. Neutron spectra simulating INEEL facilities.

Most of the reactors built at the INEEL had no beam ports. Thus the neutrons were generally well contained away from the workplace. The reactor core environment is characterized not only by high neutron levels, but also by very high gamma levels. The gamma shielding is often water and concrete which are also very good neutron shields. The neutron fields in the energy spectrum for reactors and lower will be attenuated much more quickly in concrete or water than will the gamma fields. This is not true for lead or iron, but these are usually not used as gamma shields where neutrons also exist. Thus neutron fields are generally not a problem at an enclosed reactor.

#### 6.3.4.3.1 MTR Neutron Radiation

The exception to the above discussion is the MTR, which operated from 1952 to 1970 and had beam ports and neutron beams extending onto a research floor. Also in this category are the Zero Power Physics Reactor (ZPPR) and Transient Reactor Test (TREAT), both at Argonne West. Some neutron surveys of the MTR experimental floor have been recovered (Sommers 1959, 1962; Hankins 1961), but these individually do not provide all components of the radiation field. Hankins (1961) used 2-, 3-, and 8-in. polyethylene Bonner balls in a cadmium shield to characterize the intermediate and fast neutrons at 21 locations around the MTR floor. He made these measurements and also measured the thermal neutron component at six other locations. The Hankins data have been reanalyzed (Rohrig 2004) using more recent Bonner response curves (Hertel and Davidson 1985). Figure 6-14 shows the resultant neutron spectra for locations 3 and 23, which have higher doses and nearly the maximum low energy intermediate and fission components, respectively. Figure 6-15 shows the correlations of the thermal and intermediate neutron dose equivalents to the fast neutron dose equivalent for the Rohrig reanalysis of the Hankins data. The trend line for the reanalyzed intermediate energy neutron dose equivalent has a  $R^2$  value of 0.86 and 0.92 as compared to a  $R^2$  value of 0.50 for the original analysis demonstrating a better fit to the data. The average ratio of thermal to fast neutron is  $0.071 \pm 0.025$ , for the low energy intermediate to the fast is  $0.177 \pm 0.057$ , and

for the higher energy intermediate to the fast is  $0.149 \pm 0.046$  where fast neutrons are taken as those above 0.2 MeV.

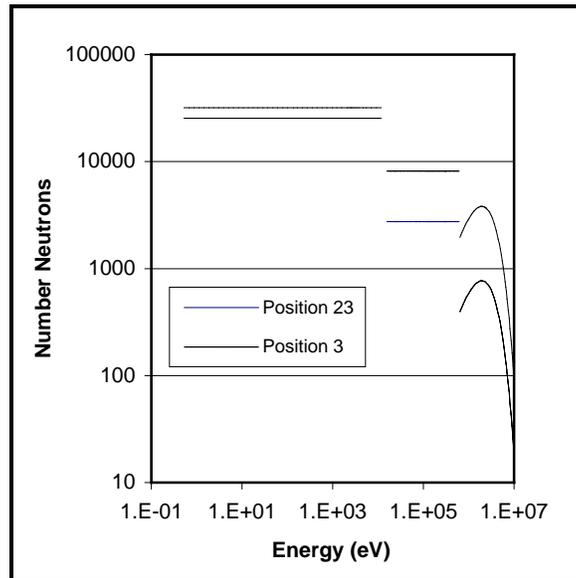


Figure 6-14. Sample MTR Spectra from Hankins Bonner Measurements.

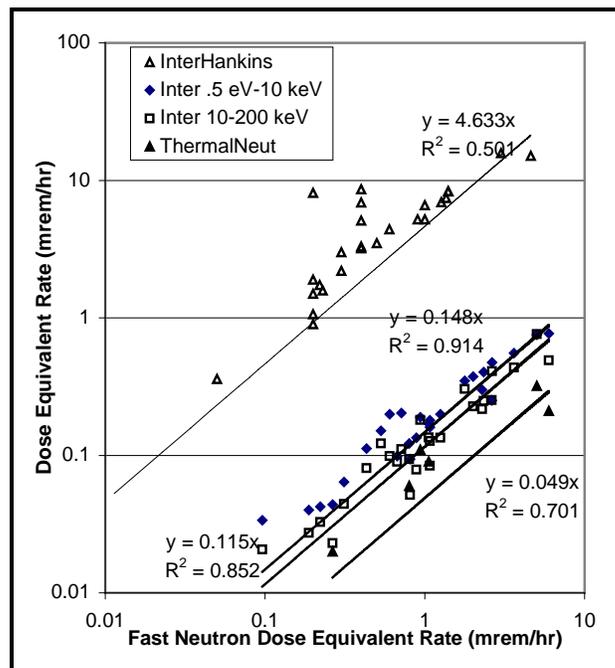


Figure 6-15. MTR neutron field components.

The MTR personnel who were likely to get neutron dose were assigned NTA film in their dosimetry packets, but it would have missed the dose below 0.5 to 0.8 MeV. For the MTR spectra, the fraction of neutron dose equivalent above 0.8 MeV has an average value of  $0.52 \pm 0.08$  and varies from 35% to 66% depending on the location. The dosimetry record location code for the TRA was 4 (later 40 to 45). To correct for missed dose on the MTR experiment floor, the NTA results from MTR should be

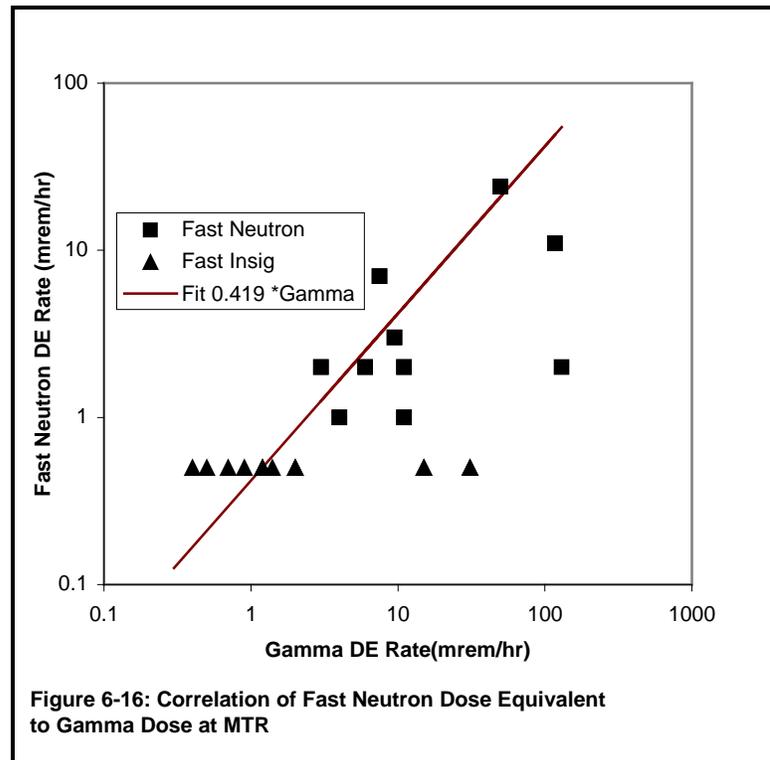
multiplied by  $2 \pm 0.2$  ( $1/0.52$ ,  $0.08/0.52$ ) for a Monte Carlo dose reconstruction or 3 ( $1/0.35$ ) for the less accurate worst case reconstruction.

Sommers (1962) reported thermal and fast neutron dose equivalent rates and gamma dose rates around the MTR beam lines. The thermal measurements near beams are believed to not be representative of the general workplace. Figure 6-16 shows the correlation of fast neutron dose equivalent to the gamma dose for these measurements. The fast neutron component was insignificant for several of the measurements. These values are shown with the triangles at one-half of the smallest measured value. Using the Shapiro-Wilks Normality Test (Gilbert 1987) and including the insignificant fast neutron values at  $\frac{1}{2}$  of the minimum reported value suggests that the normal distribution is a slightly better description of the data than a log-normal distribution. The fast neutron dose equivalent is  $0.42 \pm 0.35$  of the gamma dose rate for this data set. Combining these results, one can conclude that the total neutron dose equivalent is  $0.58 \pm 0.48$  of the gamma dose equivalent on the MTR Experimental Floor.

$$\frac{\text{TotalNeutronDose}}{\text{GammaDose}} = \frac{\text{FastN}}{\text{Gamma}} \left( 1 + \frac{\text{Thermal}}{\text{Fast}} + \frac{\text{LoInter}}{\text{Fast}} + \frac{\text{HiInter}}{\text{Fast}} \right) \quad (\text{Eq. 1})$$

$$= (0.42 \pm 0.35)(1 + 0.071 + 0.177 + 0.149) = 0.58 \pm 0.48$$

The variation within the different components of neutron dose rate are so much smaller than the variation between the fast neutron and gamma dose equivalent rate as to be unimportant.



Many of the people wearing NTA film would receive gamma dose at locations other than on the MTR experimental floor while the reactor was operating. For example, health physics technicians would often be covering jobs with only beta gamma fields. A craftsperson may service pumps carrying

radioactive water and not receive any neutron dose. Therefore, simply multiplying the gamma dose by 1.6 (i.e. 1+0.58) or 2.1 (i.e. 1+1.06) although claimant favorable is probably inappropriate

### 6.3.4.3.2 TAN Fuel Storage Casks

As noted in the INEEL Site Description TBD (section 2.2.1.3), fuel storage casks are located on a storage pad at TAN. The dose rates are 25 to 30 mrem hr<sup>-1</sup> gamma and 40 mrem hr<sup>-1</sup> neutron. The metal cask attenuates the gamma radiation, but doesn't appreciably affect the neutron field. While the loaded casks were being temperature tested in 1985 and 1986, they were located in the TAN Warm Shop which has offices nearby at one end on the second floor. Neutron radiation levels were discovered in the offices, and the people (about 6) in these offices were not wearing albedo neutron badges, but were wearing beta/gamma dosimetry. The casks were each in the area about 2 weeks while temperature measurements were made before they were moved outside onto the storage pad. The casks contain irradiated oxide fuel so the <sup>18</sup>O(α,n) reaction generates neutrons in the few MeV energy range. This radiation was attenuated by distance and the building concrete between the cask and the offices. A TLD area monitoring albedo system identified the radiation field. Based on EPRI documents (EPRI 1986, EPRI 1987a, EPRI 1987b) the temperatures were measured from 9/11 to 9/23/85, 1/14 to 2/6/86, and 6/2 to 6/27/86. The office most affected was for an operations person. Also affected were safety- and radiological- engineers. The estimated dose equivalent for full time occupancy is less than 50 mrem for each cask evolution.

### 6.3.4.3.3 Typical Workplace Neutron Dosimeter Hp(10) Performance

Table 6-7 summarizes typical neutron personnel dosimeter parameters important to H<sub>p</sub>(10) performance in the workplace. The most important parameter related to H<sub>p</sub>(10) performance of the neutron dosimeters is the difference between calibration and workplace neutron energy spectra. Table 6B-2 summarizes the locations at the INEEL where neutron dose is credible.

Table 6-7. Typical workplace neutron dosimeter H<sub>p</sub>(10) performance.<sup>a</sup>

Parameter	Description	Potential workplace bias <sup>b</sup>
Workplace neutron energy spectra	NTA dosimeter response decreases and TLD response increases with decreasing neutron energy	Depends upon workplace neutron spectra. NTA recorded dose of record likely too low because of high 500-keV threshold for detection of neutrons.
Exposure geometry	NTA dosimeter response increases with increasing exposure angle and TLD response decreases with increasing exposure angle.	NTA recorded dose likely too high since dosimeter response is higher at angles other than AP. TLD recorded dose is lower at angles other than AP. Effect is highly dependent on neutron energy.
Missed dose	Doses less than Minimum Reporting Limit (MRL) recorded as zero dose.	Recorded dose of record is likely too low. The impact of missed dose is greatest in earlier years because of the higher MRLs and shorter exchange cycle of the neutron dosimeters.
Environmental effects	Workplace environment (heat, humidity, etc.) fades the dosimeter signal.	Recorded dose of record is likely too low.

a. Judgment based on INEEL dosimeter response characteristics.

b. Recorded dose compared to H<sub>p</sub>(10).

## 6.4 ADJUSTMENTS TO RECORDED DOSE

### 6.4.1 Neutron Weighting Factor

All dose equivalents measured at the INEEL and reported in this document used the quality factors based on the LET of the ionizing secondary particles established in the 1950s and used since by U.S. regulatory agencies. In 1990 the ICRP developed new dose concepts that have been used by NIOSH. The quality factor,  $Q$ , as a function of LET was replaced with a radiation weighting factor,  $w_R$ , which is a function of the neutron energy (ICRP 1990, Table 1).

A correction needs to be made to the INEEL reported data to change from dose equivalent (pre-ICRP 60) to a newer dose quantity (ICRP 1990; NIOSH 2002). ICRP 74 (1996) tabulates the ambient dose equivalent (dose equivalent at 10 mm depth in a 30 cm diameter sphere) for neutrons. The ratios of organ dose equivalents to ambient dose equivalent are tabulated in the NIOSH External Dose Reconstruction Implementation Guide (NIOSH 2002), so this quantity will be used for the conversion. Ambient dose equivalent is an ICRU quantity so it uses a revised  $Q(L)$  rather than a  $w_R$  so the correction factors are not as large as in other TBDs.

The dose equivalent for a spectrum of particle energies is the result of an integral of the fluence spectrum,  $\Phi(E)$ , times a dose equivalent conversion factor,  $DECf(E)$ , which also depends on energy over the range of energies considered:

$$H = \int_{E_1}^{E_2} DECf(E) \varphi(E) dE. \quad (\text{Eq. 2})$$

**Error! Bookmark not defined.** These factors are incorporated into statements of dose equivalent values and calibrations following generally accepted principles. The conventional dose conversion factors are most clearly and correctly stated in ICRP Publication 21 (ICRP 1973). NCRP Report 38 tabulates a neutron flux density associated with the annual dose limit that is proportional to the reciprocal of the dose conversion factor (NCRP 1971b). Conventionally, the primary geometry considered is from one direction with the maximum dose in the body tabulated. More recent references (ICRU 1985; ICRP 1987, 1996) consider the dose to individual organs for different irradiation geometries, so the more recent tabulations give results lower by factors up to about 10 due to attenuation in the human body. Dosimeters are designed to respond to radiation entering the body on the side where they are located, and work best for an anterior-posterior (AP) irradiation geometry with the dosimeter on the front of the body.

For ambient dose equivalent, the same equation applies except that a tabulation of the ambient dose equivalent dose conversion factor is used (ICRP 1996). The correction factor for an energy interval is then the ratio of the two integrals. Because IREP uses different radiation effectiveness factors for different radiation types and energies, it is appropriate to use the IREP energy intervals for calculating the correction factors.

Table 6-8 lists the calculated fractions of dose equivalent in the IREP energy groups and the conversion factors from dose equivalent to equivalent dose for INEEL spectra. The ratios of average radiation weighting factor to average quality factor for the IREP energy groups have some variation, particularly for the 10-100 keV group where the energy dependence of the fluence is radically different for the fission and 14 MeV source than for the reactor spectrum. The lower part of the table lists the recommended default values for the dose equivalent fractions and quality factor corrections.

Table 6-8. Dose equivalent fractions and Q corrections, estimated and recommended.

IREP energy interval	< 10 keV	10 keV-100 keV	100 keV-2 MeV	2 MeV-20 MeV
<b>Spectrum Calculated Values</b>				
Dose equivalent fractions				
Bare fission		4.4E-05	0.20	0.80
AmBe			0.15	0.85
14 MeV 10 cm poly	2.4E-08	3.1E-06	1.5E-03	1.00
MTR exp floor ave	0.18	0.06	0.49	0.28
MTR exp floor max	0.24	0.08	0.52	0.35
MTR exp floor min	0.13	0.03	0.46	0.19
ICRP 74 H* <sub>10</sub> /NCRP 38 H				
Bare fission		1.46	1.32	1.09
AmBe			1.41	1.05
14 MeV 10 cm poly	0.69	1.47	1.36	0.93
MTR exp floor ave	0.86	1.08	1.33	1.12
MTR exp floor max	0.80	1.08	1.37	1.12
MTR exp floor min	0.92	1.08	1.30	1.12
<b>Recommended defaults</b>				
Dose equivalent fractions				
14 MeV 10 cm poly			0.05	0.95
Source calibrations			0.20	0.80
MTR exp floor	0.2	0.05	0.50	0.25
H*(10)/H	1	1.1	1.4	1.1

## 6.5 Missed Dose

### 6.5.1 Photon Missed Dose

Missed photon dose for INEEL workers would occur where (1) there is no recorded dose because workers were not monitored or the dose is otherwise unavailable, or (2) a zero dose is recorded for the dosimeter systems for any response less than the site dose recording threshold (the MRL). The missed dose for dosimeter results less than the MRL is particularly important for earlier years when MRLs were higher and dosimeter exchange was more frequent. One option to calculate the missed dose described in NIOSH (2002) is to estimate a claimant-favorable maximum potential missed dose where MRL/2 is multiplied by the number of zero dose results. Table 6B-1 lists the potential missed photon dose **according to year, dosimeter type, and badge exchange frequency**. The minimum reporting levels (MRL) shown are based on Cipperley (1958, 1968) and Cusimano (1963) for film; Kalbeitzner (1983), Gesell (1986, 1992), and Perry et al. (1993) for TLDs; and Ruhter and Perry (2002) for film and TLD. The exchange frequency will need to be determined from the dose submittal package for each individual and year because it was shorter for highly exposed individuals and longer for those with lower doses.

### 6.5.2 Neutron Missed Dose

Neutron radiation was present at the INEEL reactors, 14-MeV neutron generators at RWMC and for a short time at TRA and TAN, small sources used for research at TRA and IRC, calibration laboratories (CF 633 and 636), and for calibration of criticality alarms (TRA and ICPP).

For other locations, there is likely limited missed neutron dose because of the very low potential for neutron exposure. To calculate the missed dose, the reconstructor must first determine if the person worked near neutrons and which category of neutrons. This can best be done by looking for the work

location and whether a worker or others in the badge reporting group were assigned any neutron dose equivalent. The work location code for TRA where the MTR operated is 4 (also 40 to 45). If no neutron dose was assigned to him/her or to coworkers for several months, the dose reconstructor should assume that the person was not exposed to neutrons so no neutron dose would be missed.

If a worker was likely exposed to neutrons, the reconstructor should assign missed neutron dose equivalent using Table 6B-3 for the times when workers did not have reported neutron dose. For the period when NTA film was used, the dose should be multiplied by 1.25 for all facilities except the MTR experimental floor and by 2 for the MTR experimental floor when the MTR was operating between 1953 and 1970. Then the dose equivalent is apportioned into the IREP groups using Table 6B-3.

For example, if in 1955 a person was an experimenter at the MTR, and 7 of the weekly badges recorded a total of 185 mrem neutron dose equivalent, the missed dose would be 315 mrem  $[(52-7) \times 14 \div 2]$  so the total dose by the badges would be 500 mrem. Because the badge only sees about one-half the MTR neutron dose equivalent (from [Section 6.3.4.3.1](#)), the total dose equivalent is 1 rem. To convert the 1 rem received from neutrons on the MTR experimental floor to equivalent dose, multiply the total dose equivalent by the last column of Table 6B-3 to get 200 mrem to the <10-keV group, 60 mrem to the 10- to 100-keV group, 700 mrem to the 0.1- to 2-MeV group, and 280 mrem to the above 2 MeV group for a total equivalent dose of 1.24 rem.

The neutron missed dose is divided into two historical periods in the following discussion. The first is before 1975 when only NTA film dosimeters were used with supplemental recording of thermal neutron doses from B-10 pencil dosimeters. The second period is after 1975 when only Hankins albedo dosimeters were used. The estimated MRLs for these neutron dosimeters are summarized in Table 6A-2. It is possible to estimate the missed neutron dose using the MRLs because the neutron dosimeters were calibrated with neutron sources that had energies similar to those encountered in the workplace and most of the neutrons to which workers were normally exposed had energies greater than the 500- to 800-keV threshold of the NTA film dosimeters. There was, of course, no threshold energy for the measurements using neutron albedo TLD badges.

#### **6.5.2.1 Before October 1976**

The use of NTA films for neutron dosimetry prior to 1976 is documented in various INEEL reports (Cusimano 1963; Cipperley 1958, 1968). As noted above, it is possible to estimate the missed dose using the MRLs. There are a lot of recorded zeros in the neutron dose data for INEEL workers for two reasons: (1) an NTA film was developed and not read per standard criteria, or (2) an NTA film indicated a neutron dose equivalent that was less than the film's MRL, 14 mrem. When the MRL for NTA film is used in estimating the missed neutron dose, it should be multiplied by 1.25 for most workers and by 2 for workers on the MTR Experimental Floor.

It is also possible to estimate the missed neutron dose in some facilities through neutron-to-photon dose ratios (NIOSH 2002). However, for the INEEL facilities there are several other sources of gamma exposure with no associated neutron exposure, so this would be erroneous.

#### **6.5.2.2 After October 1976**

Since October 1976, the neutron dose has been measured using the Hankins albedo-type TLD. The characteristics of this dosimeter are well documented (Gesell et al. 1996), and the MRL to be used in estimating missed dose is 15 mrem. A location-specific FNCF has been applied to convert the reading to dose equivalent, so no additional adjustments should be required.

For a couple months in the mid 1980s a few office workers without neutron dosimetry were exposed to neutrons at TAN (see 6.3.4.3). For these individuals, 50 mrem of neutron dose should be assigned for each period they were so exposed.

## 6.6 Organ Dose

Once the  $H_p(10)$  adjusted doses have been calculated for each year, the values are used to calculate organ doses of interest using the external dose reconstruction implementation guidelines (NIOSH 2002). Consistent with OCAS/ORAUT agreements, it is recommended that the AP (front to back) geometry should be assumed for the irradiation geometry and for conversion to organ dose. The calculated neutron doses in each energy group should be multiplied by the conversion factors from ambient dose equivalent to organ dose for AP irradiation from Appendix B of NIOSH 2002. For photons prior to 1981 the conversion factor from exposure to organ dose should be used. For 1981 and after, the conversion factor from deep dose equivalent to organ dose should be used.

## 6.7 Uncertainty

Measurement uncertainties arise from many sources. For gamma rays the standards for exposure have existed with only minor changes from the 1930s as required for medical uses of radiation. The INEEL used ionization chambers standardized by NBS (now NIST) for their calibrations. Use of a phantom for dosimeter irradiation began in the early 1980s, but backscatter only causes a minor change for high energy photon dosimetry. The over response of the multi-element film badge to deep dose in tissue is because they were calibrated to exposure which is somewhat more at low energies than the deep dose. The INEEL environment did not have a significant low energy photon field like a plutonium finishing plant so the nonpenetrating component was attributed to beta radiation. A realistic estimate of total uncertainty for photon dosimetry is about 35% at one sigma. This is roughly consistent with the results presented in Figure 6-9. For those measurements, the standardization instrument contributed some significant uncertainty.

For beta radiations when considering skin cancer, one must divide the reported nonpenetrating dose by the fraction of dose measured as reported in Table 6-5. The uncertainty for beta radiation is somewhat larger, an estimated 50% at one sigma. This is driven by uncertainties in the field geometry and in the fact that beta radiation is often stopped by thin materials such as clothing and air. Algorithms are used to estimate the dose at a depth of 7 mg cm<sup>-2</sup> from dosimeters at depths of 15 to 250 mg cm<sup>-2</sup> and such depth differences can change the signal significantly. The difference between a point source irradiation and a planar source can confuse an algorithm. Earlier techniques did not provide a thin detector with minimal covering which is important for simulating the skin for beta dosimetry.

For neutron radiations, the situation is more complex. The NTA films used before 1975 did not see low energy neutrons below 0.5 to 0.8 MeV. Corrections are described for handling this issue. The TLD albedo system provides a very indirect way of measuring dose equivalent to a person. Dose to people is primarily due to hydrogen recoils and not due to  ${}^6\text{Li}(n,\alpha)$  reactions. The response of the 9" PNR-4 detector used to standardize the TLD measurements is also due to a different process than dose deposition in the human body. The total uncertainty for neutrons is probably larger at about 60% at one sigma. The cause of the greatest uncertainty for neutrons is the variation of dose caused by an organs position in the body. For 1 MeV neutrons, the dose facing the source is about a factor of 1000 higher than the dose on the back side of a 30 cm diameter sphere of tissue like material. In a work environment, the direction of the neutrons may be unknown, but it is often from many directions which reduces the impact of this uncertainty driver. For simplicity and because it often is true, it is assumed in EEOICPA that the worker irradiation is in an AP geometry (from the front). Note that in

Figure 6-11 the discrepancy where the dosimeters are reporting about  $\frac{1}{2}$  of the spectrometer result is because the spectrometer does not simulate the attenuation of the body so it read high by a factor of two.

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## GLOSSARY

### **1/E spectrum**

For neutrons, the number of neutrons in an energy interval scales as the width of the energy interval divided by the energy of the neutrons in that interval.

### **beta particle**

An electron or positron emitted spontaneously at high velocity from the nuclei of certain radioactive elements. Most of the direct fission products are (negative) beta emitters.

### **dose equivalent (H)**

The product of the absorbed dose (D), the quality factor (Q), and any other modifying factors. The special unit is the rem, the SI unit is Sievert (Sv) (1 Sv = 100 rem).

### **dose equivalent index**

Maximum dose equivalent within the ICRU sphere centered at the point in space to which the quantity is assigned,  $H_i$ . The outer 0.07 mm thick shell is ignored. It is also called the unrestricted dose equivalent index.

### **deep dose equivalent index**

Maximum dose equivalent in the ICRU sphere within a core radius of 14 cm. The sphere is centered at the point in space to which the quantity is assigned. This quantity is one of the two restricted dose equivalent indices.

### **DOELAP**

The DOE Laboratory Accreditation Program (DOELAP) accredits DOE site dosimetry programs based on performance testing and onsite reviews performed on a two year cycle.

### **dosimeter**

A device used to measure the quantity of radiation received. A holder with radiation-absorbing elements (filters) and an insert with radiation-sensitive elements packaged to provide a record of absorbed dose or dose equivalent received by an individual

### **effective dose equivalent, $H_E$**

The weighted average of the dose equivalents in certain organs or tissues of the body,  $H_T$ , each weighted by an organ weighting factor,  $W_T$ . The organ weighting factors were chosen by the ICRP to reflect the relative risk of death from cancer or occurrence of severe hereditary effects in the first generations after uniform whole body exposure.

### **exposure**

In the technical sense, the ionization produced by gamma or X-rays in air (roentgen); in the generic sense, ionizing radiation applied to matter.

### **exposure-to-dose-equivalent conversion factor for photons (Cx)**

The ratio of exposure in air to the dose equivalent at a specified depth in a material of specified geometry and composition. The Cx factors are a function of photon energy, material geometry (e.g., sphere, slab, or torso), and material composition (e.g., tissue-equivalent plastic, soft tissue ignoring trace elements, or soft tissue including trace elements).

### **Linear Energy Transfer (LET)**

The lineal rate of local energy deposition by a charged particle.

**minimum reporting level**

Based on a policy decision, the minimum dose level that is routinely recorded.

**non-penetrating dose**

Dose from beta and lower energy photon radiation. Determined from the open window minus the shielded.

**pencil dosimeters**

A type of ionization chamber used by personnel to measure radiation dose. Other names: pencil, pocket dosimeter, pocket pencil, pocket ionization chamber (PIC).

**penetrating dose equivalent**

Photon dose measured by shielded INEEL film or elements plus neutron dose equivalent. Essentially, personal dose equivalent  $H_p(10)$ .

**personal dose equivalent,  $H_p(d)$** 

Radiation quantity recommended for use as the operational quantity to be recorded for radiological protection purposes (ICRU 1993). The Personal Dose Equivalent is represented by  $H_p(d)$ , where  $d$  identifies the depth (in mm) from the point of reference for dose in tissue. For weakly penetrating radiation of significance to skin dose,  $d = 0.07$  mm and is noted as  $H_p(0.07)$ . For penetrating radiation of significance to "whole-body" dose,  $d = 10$  mm and is noted as  $H_p(10)$ .

**polymethyl methacrylate**

Scientific name for plastic commonly known as Lucite or Plexiglas.

**redacted**

To select item(s) to be visible for viewing or for publication by obscuring others.

**shallow absorbed dose (Ds)**

The absorbed dose at a depth of 0.07 mm in a material of specified geometry and composition.

**shallow dose equivalent (Hs)**

Dose equivalent at a depth of 0.07 mm in tissue (sum of penetrating and non-penetrating dose equivalent).

**tissue rad**

Absorbed dose in tissue.

## ATTACHMENT 6A: INTERPRETATION OF INEEL DOSIMETRY CODES

### LIST OF TABLES

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Table 6A-1: Area Codes:

01	Headquarters (AEC Bldg.)	18	WP
02	EBR #1	19	TAN (Phillips & AEC)
03	CFA	20	TREAT
04	MTR	21	LX
42	TRA Monthly	22	GCRE
45	TRA Quarterly or Yearly	23	OX
05	CPP	24	ARHG
53	CPP Monthly	25	
55	CPP Quarterly or Yearly	26	EBR #2
06	NRF	27	ML-1
07	TAN	28	On-Site Site Survey
08	Service	29	Off-Site Site Survey
09	NX (X is construction)	30	ANP at SL-1
10	AX	31	STPF
11	CX	65	ECF
12	EX	66	Non-Security
13	SPERT	67	Div. of Compliance
14	MORE	68	STEP
15	SX	69	LPTF (GE)
16	SL-1	70	LPTF (Phillips & AEC)
17	MX	71	CADRE

Table 6A-2: Reasons Codes (Column 68-69) .

01	Regular Pull	11	Lost Pencil (or damaged)
02	H.P. Request	12	H.P. Check
03	High Dosimeter Reading	13	Late Pull
04	Recover Lost Badge	14	Withdrawn Badge
05	Ring Reading	15	Termination
06	Wrist Badge Reading	16	Correction
07	Recovered Lost Badge & Withdrawn	17	Records Withdrawn
08		18	Lost Film Reading
09	Miscellaneous Pull	19	X-Ray Exposure
10	Temporary Film	20	Exi mat Exposure

Table 6A-3: Irregularity Codes (Columns 70-71) .

01	Defective Film	12	Dropped in Canal or Reactor
02	Impossible to Read	13	
03	Light Leak	14	Not in Area
04	Water Soaked	15	
05		16	
06	O.W. Shot with X-Ray	17	Old Lot Film
07	Lost in Processing	18	Stuck Film
08	Heat Exposure	19	Not Available
09	Recovered Lost Badge	20	Lost Badge
10	Contaminated Badge	21	No Film
11	Wore Two Badges at one Time		

Table 6A-4: Column 20 Codes.

"X"	Master Card	6	Fast Neutron
1	Summary Card	7	Urinalysis
3	Sens. Beta-Gamma	8	Summary Card
4	Insen. Gamma	9	Summary Card
5	Slow Neutron	0	Total Body Results Card

## ATTACHMENT 6B: OCCUPATIONAL EXTERNAL DOSE FOR MONITORED WORKERS

Table 6B-1. INEEL beta/photon dosimeter period of use, type, minimum reporting level, exchange frequency, and potential annual missed dose

Period of use <sup>a</sup>	Dosimeter	MRL <sup>b</sup> (mrem)	Exchange frequency	Max. annual missed dose (mrem) <sup>c</sup>
August 1951–March 1958	INEEL Initial Film 552 Dupont Film	30	Weekly (n=52)	780
			Monthly (n=12)	180
March 1958–December 1966	INEEL Multi-Element Dupont 508 Film	10	Weekly (n=52)	260
			Biweekly (n=26)	130
			Monthly (n=12)	60
December 1966–February 1974	INEEL Multi-Element Dupont 508 Film	10	Weekly (n=52)	260
			Biweekly (n=26)	130
			Monthly (n=12)	60
	INEEL LiF TLD	15	Quarterly (n=4)	30
			Semi-ann (n=2)	15
Annual (n=1)	7.5			
February 1974–May 1975 <sup>d</sup>	INEEL Atlas TLD LiF in Teflon	30	Monthly (n=12)	180
			Quarterly (n=4)	60
			Semi-ann(n=2)	30
			Annual (n=1)	15
December 1974 through December 1985 <sup>d</sup>	INEEL Harshaw Two-chip TLD	15	Monthly (n=12)	90
			Quarterly (n=4)	30
			Annual (n=1)	7.5
January 1986 to present	INEEL Panasonic Four-chip TLD	15 <sup>e</sup>	Monthly (n=12)	90
			Quarterly (n=4)	30
		10 <sup>e</sup>	Monthly (n=12)	60
			Quarterly (n=4)	20

- a. For many years, INEEL workers had a dosimeter assigned to each operating area where they worked, or were issued visitor dosimetry. All Area dosimetry was issued beginning in January 2000.
- b. Minimum reporting levels (MRL) are based on Cipperley (1958), Cipperley (1968), Cusimano (1963), Kalbeitzer (1983), Gesell (1986), Gesell (1992), Perry et al. (1993), and Ruhter (2002).
- c. Maximum annual missed dose calculated using  $N \times \text{MRL}/2$  from NIOSH (2002).
- d. ICPP began using the Harshaw in December 1974, the prime contractor in February 1975, and Argonne in May 1975.
- e. The MRL was 15 mrem from January 1, 1986, to July 7 1986, 10 mrem from July 7, 1986 to about September 1989, and 15 mrem until 1993 when it returned to 10 mrem.

Table 6B-2. Neutron dosimeter type, period of use, exchange frequency, laboratory minimum detectable limit, and maximum annual missed dose.

Dosimeter	Period	Exchange frequency	Laboratory MRL (mrem)	Maximum annual missed dose (mrem)
NTA film	1951-1958	Weekly	14	364
NTA film	1959–September 1976	Weekly	20	520
		Biweekly	20	260
		Monthly	20	120
TLD	October 1976–present	Biweekly	15	195
		Monthly	15	90
		Quarterly	15	30

Table 6B-3. Recommended IREP neutron energy fractions and correction factors for INEEL facilities.

Process	Description	Operations		Neutron energy	Default dose (%)	Ambient Dose	
						Equiv / dose equiv	Net correction factor
Instrument calibration	Alpha Be source calibrations	1951	1993	0.1-2 MeV	20%	1.4	0.28
	Cf-252 source calibrations	1993	2003	2-20 MeV	80%	1.1	0.88
Waste characterization	RWMC SWEPP 14 MeV neutron generator	~1980	2003	0.1-2 MeV	5%	1.4	0.07
				2-20 MeV	95%	1.1	1.05
Neutron source based research			2003	0.1-2 MeV	20%	1.4	0.28
				2-20 MeV	80%	1.1	0.88
MTR, ZPPR, and TREAT reactors	Experiment floor and adjacent rooms during operation	1953	1970	< 10 keV	20%	1	0.20
				10 -100 keV	5%	1.1	0.06
				0.1-2 MeV	50%	1.4	0.7
				2-20 MeV	25%	1.1	0.28