3385

232 VALIDATION OF ORNL INCIDENTS/UNUSUAL OCCURRENCES(AEC-HMS) DATE RUN 03/07/74 REPORT R096

SERIAL NUMBER	PER ORIE	AREA/FACILITY NUMBER	DATE OCCURRED	TIME OCCURRED	DURATION	WORK AREA OR PART FURTHER DEFINED	DESCRIPTION OF INCIDENT
00232		3005	06-30-55	1100	002H	MIDRIFF	PRESSURE ON OFFGAS SYSTEM RELEASED GASES

RADIATION ENCOUNTERED A B G NF NI NT	MATERIALS INVOLVED	SPECIFIC RADIONUCLIDES	(AIR ACTIVITY) PEV MIS	(MAX UCI/CC *) CF	10(-X)	RAD B/G MAX MR/H *	---------- TACTILE (MAX PROBE READING) ALP((C/M)/(D/M))	B-G(C/M)	CONTAMINATION MAX SMEAR ALP(D/M)	DATA SAMP B-G(D/
	ENRICHED U	F GASES		R.1	00				20	100

ID	NAME	(EXP TYPE) EX RA	CL CO	PE CO	(EXT EXP INV) WB	TR	HD NE	FT LG	HA AR	(INT EXP) VIA RE	OR	SK	(SPEC SERV) UR SM	FE SM	WB CT	ME OB	(MAX CON OF PERS C/M,D/M *) PRIMARILY A	B-G	FP	PE	(EXT DOS MAX MR)* NORM SKIN	BROK SKIN	NASL SMER	HNDS	HEAD TRNK	WHOL BODY	INT DOSE	SK IR	SK ER	(MED O
[redacted]	[redacted]		X	X						X																				
[redacted]	[redacted]		X	X						X																				

** N O T E S

A-NO ACTION REQUIRED
B-ENTIRE AREA ZONED
C-AREA PART ZONED
D-ALL WORK STOP
E-NORMAL WORK CONT.
F-AREA NORM C MIN.
G-AREA NORM C MAX.
H-CLEANUP REQUIRED
I-AIR ACTIVITY PRESENT
J-SURFACE CONTAMINATION PRESENT
K-PERSONNEL EXPOSURE LIST

* H = 100X, M = 1000X,R = MR/HR, WHERE C/M, D/M, UCI/CC ARE SHOWN IN COLUMN HEADINGS

CIDENT DR
INITIAL