



Marshall University Radiation Safety Office AND REPORT

Records of Contamination Survey and Report

Authorized User: _____ Lab: _____ - _____

Radionuclides: _____

Radioactive Contamination Tests (yes/no):

1. Survey with meter:
2. Wipe tests at selected areas on keyed floor plan and listed below:

Date	Counting Instrument	Background(CPM)	Location Code	Wipe test (CPM)	Wipetest dpm/100 cm ²
	Beckman LS-5801 Scintillation Counter	a.)			
		b.)			
		c.)			
		BKG Avg.			

Results and Comments: minimum detectable activity (mda) =

Surveyed by: _____ Date: _____