KSC Radiation Protection Program FL2955-1

Radiography Notification Record

If completed by other than Environmental Health, prepare in duplicate. Original copy MUST be sent to BOC Health Physics Branch.

Notification Given By Name DAN Dupuy Organization SGS530/WYLE
Date 2/25/00 Time 0930
Taken By DOUGLAS KRAUSS

Job Location ☐ KSC ■ CCAFS Area/Building METB3
Organization WYLE LABORATORIES Radiographers A. VOOR
Phone Number 321-861-5131 R. WHITCHFORD
Operation Date 2/29, 3/1
Time (From/To) 0800-1530
Operation RADIOGRAPH STRET CARTRIDGES (3) EACH

☐ Machine Manufacturer/Model _____
kV _____
mA _____

■ Material Isotope Iridium 192
Activity 69 ci

Number of Exposures 20 Exposure Time TBD

Completion/Cancellation Notification

Given By _____ Time _____ Date _____
Taken By _____

LA/7 # 000000
2/25/00
Diane Heim

Pocket Dosimeter Exposure Data

Name _____ Net Total (mR) _ D. M. Heim LA/DNMS
_____ - TOTAL 2 dueze
_____
_____

Received in Region II NE 5
2/25/00 cc P.X

HP Support ☐ Yes ☐ No Supervisor _____ Technician _____
Date _____ Time (From/To) _____
Comments _____

MK 00348347

KSC FORM 28-184 (REV. 6/98)

NE05