



# **Contamination Control**



### Objectives



- Discuss the terms "removable and fixed surface contamination", state the difference between them, and common methods used to measure each.
- Discuss the components of an effective contamination control program, and common methods used to accomplish them.



### Objectives



- Discuss the basic goal of a contamination control program and actions that contribute to its success.
- Discuss the basic principles of contamination control and give examples of implementation methods.
- List the basic factors which determine protective clothing requirements for personnel protection.



### Objectives



- Discuss some of the methods for personnel decontamination.
- Discuss some of the methods for decontaminating areas and tools/equipment
- Discuss how to handle personnel who are injured and radiologically contaminated.



#### BASIC GOAL OF CONTAMINATION CONTROL



- Minimize contaminated areas
- Maintain contamination levels As Low As Reasonably Achievable





# TYPES OF CONTAMINATION



- Contamination is radioactive material in an unwanted or undesirable location (i.e., on the floor of a work area, on a worker's clothing, on the outside of a radioactive package, etc.)
  - Fixed
    - radioactive material that <u>CANNOT</u> be readily removed from surfaces by nondestructive means, such as casual contact, wiping, brushing, or laundering.
  - Removable
    - radioactive material that <u>CAN</u> be removed from surfaces by non-destructive means, such as casual contact, wiping brushing, or washing.



#### METHODS OF MEASUREMENT



#### REMOVABLE CONTAMINATION

- Disk Smear Surveys
  - To determine activity of nuclides present
    - units of Bq/cm<sup>2</sup> or Bq/area smeared
  - IAEA contamination limits are identified in Application of the Concepts of Exclusion, Exemption and Clearance [IAEA Safety Guide RS-G-1.7,]







# TYPES OF CONTAMINATION



- REMOVABLE CONTAMINATION
  - Large area wipes
    - used as indication of removable surface contamination
  - Disk smears required if contamination levels are to be quantified
- Direct Survey Instruments
  - Used to measure presence of contamination on floor or other surfaces
  - Will detect both fixed and removable contamination
  - Fixed = Total Removable





- AREA & EQUIPMENT SURVEYS
  - Large Area Wipes
    - Typically use Large cloth
      - Sticky rollers sometimes used
        - » good for discrete particle surveys
    - Intended use
      - Detect low levels of removable contamination over large surface areas
        - » Collection efficiency reduced if too large of an area surveyed

RULE of THUMB: 2.5 times largest dimension of swipe material







- AREA & EQUIPMENT SURVEYS
  - Large Area Wipes (LAW)
    - Intended use
      - Indication of removable contamination
      - Build-up of removable contamination in areas where no contamination is expected
      - Indication of effectiveness of contamination controls
      - Presence of discrete particles







- Effective program includes:
  - Constant monitoring
  - Area and Equipment surveys
  - External personnel surveys
  - Personnel internal dosimetry





- CONSTANT MONITORING
  - Continuous Air Monitor (CAM)
    - Provides both visual and audible information to warn personnel of airborne conditions







- CONSTANT MONITORING
  - Process Monitoring Systems
    - Alert operators of abnormal conditions





### External Personnel Contamination Surveys



- Personnel Monitors
  - sensitive hand held detectors (e.g., "friskers")









- EXTERNAL PERSONNEL SURVEYS
  - Personnel Contamination Monitors
    - Whole body monitoring systems
- EXTERNAL PERSONNEL SURVEYS
  - Hand & Foot Monitors -
    - Provides simultaneous check of hands & feet
    - Effective for exiting transitional areas between radiologically contaminated areas and "clean" areas







- EXTERNAL PERSONNEL SURVEYS
  - Portal Monitors -
    - Provides final monitoring point to ensure contamination is not spread
- EXTERNAL PERSONNEL SURVEYS
  - Upon detecting personnel contamination
    - area and/or equipment surveys may be necessary







- PERSONNEL INTERNAL DOSIMETRY
  - Breathing Zone -
    - Primary method to monitor internal dose
      - Work activities in:
        - » High Contamination Area
        - » Airborne Radioactivity Area







- PERSONNEL INTERNAL DOSIMETRY
  - In Vivo Bioassay -
    - Whole Body Counting
      - Individual placed inside array of Sensitive detectors
      - measures activity and energies of gamma emissions from <u>inside</u> boo
  - In-Vitro Bioassays
    - Collection of urine or fecal samples from individual to determine type/activity of nuclides present in bodily waste







- Actions Contributing to Success
  - Good Housekeeping
  - Confine spread of radioactive materials to smallest possible area
  - Preventive maintenance programs can eliminate radioactive material releases

### BASIC GOAL OF CONTAMINATION CONTROL



- Decontamination not always possible:
  - Economical Conditions
  - Radiological Conditions
  - Operating Conditions
- Other means of control must be initiated
  - Allow time for natural decay of short lived isotopes
  - Engineered controls
  - Administrative controls
    - Procedures
    - Radiological Posting
  - Personal Protective Equipment (PPE)

## BASIC GOAL OF CONTAMINATION CONTROL



- Actions Contributing to Success
  - Controlling material taken into and out of Contamination Areas
  - Routine surveys in and around Contamination Areas



- Be alert for potential violations to basic contamination control
  - Improper contamination control methods
  - Bad work practices
  - Procedure violations
  - Radioactive material releases or dry/liquid spills





- Access/Admin Control
  - Boundary to controlled areas clearly marked with radiological postings/signs and rope
  - Items labeled with radiological tags
  - Step Off Pads create a sharp line of distinction between a contaminated area and

"clean" areas







- Preventive Methods
  - When conducting pre-job briefs
    - discuss measures that will help reduce or prevent contamination spread
  - Change gloves or protective clothing as necessary to prevent cross-contamination
  - Cover piping/equipment below work area to prevent spreading contamination into less contaminated areas.





- Preventive Methods
  - Cover/tape tools or equipment to minimize decontamination efforts after the job.
  - Follow good work practices
    - <u>GOOD HOUSEKEEPING</u>
    - Cleaning up after the jobs
    - Control and minimize all material taken into/out of contaminated areas.





- Engineered Controls Ventilation
  - Permanent or temporary
  - Air flow
    - from Clean to Controlled Areas
    - Low or moderate contamination to higher contamination
  - Exhaust system filtered





#### Protective Clothing Considerations

- Factors to consider:
  - type & form of contamination
    - liquid
    - dust
    - surface vs. airborne
    - vapor/gas
  - level of contamination
  - nature of the work being performed









- Additional factors to consider:
  - potential for increase in contamination levels
  - body part(s) at risk for contamination
  - competing hazards
    - Heat stress
    - Asbestos
    - Chemicals
    - Fire hazards, etc.



Source: http://www.weiku.com/products/12099728/Nuclear\_radi ation\_Lakeland\_protective\_clothing.html



#### BASIC FACTORS for Consideration of Personnel Decontamination



- 1. Physical condition of the individual
- 2. Location of the radioactive contamination
- 3. How much contamination is present



# **BASIC FACTORS**



- Physical condition of the individual
  - Is the individual suffering from a life threatening illness or injury?
  - If YES  $\rightarrow$  MEDICAL TREATMENT TAKES PRIORITY
  - If no, identify conditions
    - any open or puncture wounds
    - sprains
    - bruises
    - strains
    - simple fractures or multiple fractures?



# **BASIC FACTORS**



- Location of contamination
  - Once physical (non-life threatening) condition of individual has been identified, location of contamination must be determined, is contamination
    - localized on general skin surface?
    - located at a body orifice or is a body orifice in close proximity?
    - located in or around a break in skin?



## **BASIC FACTORS**



- Determine how much radioactive contamination is present:
  - Beta-gamma emitters
  - Alpha emitters
- Save a sample if possible for lab analysis



## Radiological Incident Response Considerations



- Safety & Health Concerns (theirs and yours)
  - Health vs. Contamination
  - Is it safe to enter the area?
    - Fire
    - Toxic chemicals
    - High voltage
    - High pressure gases
    - Explosives
    - Debris, etc.



# Performing Personnel Survey



- Establish a contaminated area at person's location
- Use floor coverings or decontamination pool
- Restrict access
- Take actions to prevent cross-contamination of other areas of body and surfaces
- Contain and collect ALL decontamination materials



## Radiological Incident Response Considerations



- Performing Survey
  - Perform detailed survey of exposed surfaces.
  - Start at head and proceeding to feet
    - Nose, mouth, head
    - Hands, elbows and arms
    - Knees, legs, and feet
    - pay particular attention to
      - skin folds
      - injured area/open wounds if possible

#### HOW LONG DOES IT TAKE TO PERFORM AN ADEQUATE SURVEY?



## Radiological Incident Response Considerations



- Performing Survey (cont.)
  - 1 cm from surface being surveyed for beta contamination, approximately 0.5 cm from surface being surveyed for alpha contamination
  - Move probe slowly over surface
    - 2 5 cm/s
  - If count rate increases
    - pause for 5 10 seconds over area to verify presence of contamination



Response to Contaminated Personnel Clothing



- Carefully remove any clothing, coverings, etc., necessary to expose contaminated skin/hair
- Bag and identify owner of contaminated clothing (as available) for further analysis
- When clothing has been removed, perform an additional whole body survey to determine contamination has spread to the skin.





- Avoid abrading or breaking skin by not brushing or rubbing affected areas
- Ensure that all personnel involved don appropriate PPE before starting.
  - Wipe from clean areas towards contaminated areas
  - If contamination is located near an open wound or body orifice – Wipe AWAY from wound or orifice





- Perform cursory decontamination of skin and/or hair:
  - Ensure that all water, wipes, and other decontamination materials are collected and analyzed if necessary;
  - Use only lukewarm (body temperature) water and mild soap to clean/decontaminate affected areas.
    - Alternative alcohol-free wipes may be used or tape presses may be used





- Perform cursory decontamination of skin and/or hair:
  - Stop decon process if skin becomes irritated
  - Gently pat dry affected area(s) and resurvey for residual contamination.





- Repeat previous steps, as necessary.
  - If contamination levels do not continue to decrease with repeated cleanings, or affected areas become irritated, stop;
- Cover and identify (as appropriate) any contaminated skin/hair;
- Address modesty concerns as necessary; and



#### **Contaminated Personnel**



- If decon successful or not successful
  - recommend individual report to their supervision/medical personnel for additional evaluation and/or paperwork
- Recommend contacting REAC/TS for assistance at 001-202-581-8100



#### Discrete "Hot Particle" Concerns



 Decontaminate - Discrete "hot particles" not directly associated with injuries should be removed immediately using tape or similar nonabrasive methods. Ensure "hot particles" are retained for analysis. <u>DO NOT</u> attempt to decontaminate the area around any wound.



## Post Incident Surveys



 At conclusion of response/treatment/ decontamination activities, perform contamination surveys of all individuals who were directly involved, as well as any vehicles, stretchers, blankets, etc., used in transporting injured individual to medical facilities.



# Post Incident Surveys



- Perform contamination surveys of any room(s), equipment, and supplies (e.g., gauze bandages, towels, PPE) used during treatment and/or decontamination of individual
  - **NOTE:** Handle biological/radioactive contaminated waste with caution.
- Assist in any additional personnel, equipment, and facility decontamination activities, as needed or required.



# Post Incident Surveys



 Ensure that all contaminated items, articles, etc., are removed, collected, bagged, labeled, and segregated for later inspection, analysis and disposition.



#### PERSONNEL DECONTAMINATION SUMMARY



- Personnel Decontamination
  - Rule of Thumb
    - 90% of contamination is removed by proper removal of protective clothing
    - Another 7% of contamination is removed with the first shower using lukewarm water and a mild soap
    - Avoid using a decontamination method that will harm the skin
    - Pay attention to skin folds, body openings and under the finger nails
    - Control the waste water to prevent the spread of contamination



# DECONTAMINATION



- Area/Equipment Decontamination
  - Vacuuming
  - Strippable Paint
  - Tape/Sticky Rollers
  - Water and Cleanser
  - Abrasive Techniques





• First Aid is applied <u>PRIOR</u> to contamination control whenever it is considered to have life-saving value, or for the relief of pain or prevention of disability.







- The first individual to access the scene should
  - **STOP WORK** immediately,
  - EVALUATE the condition of incident site and the condition of the personnel involved,
  - CHECK FOR HAZARDS in the area and
  - CALL FOR ASSISTANCE



- Survey for contamination (clothing, skin, and wounds). If possible, without interfering with First Aid treatment, determine whether wounds are contaminated.
- Record the injured person's name, and the location and level of contamination.
- Inform Medical personnel about location and extent of contamination.





### Transport of Contaminated Personnel



- Provide radiological control support as needed or requested.
- Follow instructions of medical professionals.
- Take precautions to prevent spread of contamination during transport and movement of individual, as applicable.





- Upon arrival at the medical facility:
  - Inform the medical personnel about radiological issues.
  - Assist the medical personnel to control the spread of contamination.
  - Assist the medical personnel regarding the collection of bioassay samples.
  - Survey all clothing, equipment, and instruments used in the transport vehicle, and recommend decontamination or disposal of items.





#### • WHAT WOULD YOU DO?

A person has a piece of metal sticking out of their arm in a contaminated area. The bleeding has been slowed so that it does not appear to be life threatening. The piece of metal has contact radiation levels of 0.10 Sv/hr beta and 0.05 Sv/hr gamma. Medical personnel arriving at the scene ask you, "Should we remove the piece of metal prior to transporting the patient?"

What would you tell them?





#### • WHAT WOULD YOU DO?

A person has fallen off of a ladder and is unconscious. There are no other outward signs of serious injury. The entire area is a posted contamination area, with approximately 6,000,000 Bq/cm<sup>2</sup>, also the immediate area has a neutron radiation level of 0.15 Sv/hr and 1 Sv/hr gamma. Upon learning of the radiation and contamination levels in the area, the rescue personnel asks if it is safe to extract victim.

How would you respond?



# Questions?

