

# Oregon Radiation Protection Services

## Community Reception Center Toolkit

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# Introduction

A radiation incident that exposes or potentially exposes a large number of people to radioactive material will require the establishment of one or more Community Reception Centers (CRCs). According to the Centers for Disease Control and Prevention (CDC), “CRCs are locations where public health personnel and response partners conduct population monitoring following a radiation emergency” (1).

Incident scene emergency response is managed by local first responders and hazardous material (HAZMAT) personnel. When a large number of people are exposed or potentially contaminated with radioactive material, a CRC can be established to screen, decontaminate, assess, and monitor people and pets for short-and long-term effects (population monitoring). Local Public Health Authorities (LPHAs) are the lead agency for CRCs with support from other agencies and volunteer organizations. Oregon Radiation Protection Services (RPS) and other radiation subject matter experts provide technical assistance and equipment to support CRCs.

For additional planning guidance, see *Population Monitoring in Radiation Emergencies: A Guide for State and Local Public Health Planners* (2) and *Planning for Community Reception Centers: A Tool for Transforming Point of Dispensing Plans into Community Reception Center Plans for Radiation Emergencies* (3).

## Purpose

This “CRC Toolkit” provides information, resources, and templates that local jurisdictions can use or adapt to support the operation of a CRC.

## Scope

This CRC Toolkit is limited to the operation of a CRC. Decisions that need to be made prior to operating the CRC, risk communications including public protective actions, and other activities that occur outside the scope of CRC operation, are not included in this Toolkit. However, they are important elements to include in local emergency response plans.

## General Information

### Radiation Contamination Versus Radiation Exposure

Radiation Contamination is when ionizing radioactive material is deposited on or in an object, a person, or pet. Radiation Exposure (also called irradiation) is when a person (or pet) is exposed to

ionizing radiation (e.g., when a person goes to the doctor for an X-ray). The amount of ionizing radiation a person (or pet) is exposed to, depends on three principles:

1. How much **time** they spent near the source,
2. Their **distance** from the source during the exposure time, and
3. If there was anything **shielding** them from the source (packaging, clothing, walls, etc.).

## Types of Radiation Contamination

### Internal Contamination

Occurs when radioactive materials enter the body through ingestion, inhalation, or through open wounds. Some types of radioactive isotopes stay in the body and are deposited in different body organs. Other types of radioisotopes are excreted from the body in blood, sweat, urine, and feces.

### External Contamination

Occurs when radioactive material, in the form of dust, powder, or liquid comes into contact with a person's skin, hair, or clothing. External contamination can become internal contamination if it enters the body. For example, external contamination on the skin could spread internally if a person touches their face or an open wound.

## Populations at Risk for Long-Term Health Issues

According to the CDC (4), everyone is susceptible to long-term health effects from radiation exposure but fetuses, infants, children, pregnant individuals, older adults (aged  $\geq 65$  years), and people with compromised immune systems are especially vulnerable.

## Self-Decontamination

Guidance should be given to those who self-evacuate from the impacted area on what actions to take and procedures on self-decontamination, decontaminating service animals and pets, personal belongings, and personal vehicles. Guidance on how to self-decontaminate after a

radiation emergency can be found on the CDC Radiation Emergencies [website](#)<sup>1</sup> (5). Self-decontamination is encouraged, and most radioactive contamination can be washed off with soap and water. Removing the outer layer of clothing and shoes typically removes about 90% of **external** contamination (5). Asking people to self-decontaminate at home will reduce the amount of contamination found on persons coming into the CRC. The sooner they are able to decontaminate, the better their health outcome (6).

If a very large number of people were affected, and it appears that it could take hours to process everyone at the CRC, consider sending them home to self-decontaminate, and then return for screening and registration. Consider establishing a schedule for them to return in stages.

## Practical Considerations and Planning Assumptions

- People arriving at the CRC may be coming from the scene, from home, work, recreation, or may be visitors from outside the area.
- Shelter or temporary housing may need to be set up to house persons displaced from the exposure area.
- Cars, public transportation, and other transportation modalities may be contaminated.
- Assistance and resources like mobility devices, psychological support, or transportation assistance may be needed in addition to screening and decontamination.
- Some people may have injuries related to the incident, or may be experiencing mild or more severe Acute Radiation Syndrome (ARS).
- Many people may be confused, upset, anxious and/or angry.
- Long waiting or processing times may escalate an emotional response.
- People may have had to wait in cold, heat, or wet conditions prior to coming to the CRC.
- Many will not speak English and require language assistance.
- It may have been many hours since people have eaten anything or drank water.

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<sup>1</sup> <https://www.cdc.gov/radiation-emergencies/prevention/self-decontaminate.html#:~:text=Taking%20off%20your%20outer%20layer,from%20other%20people%20and%20pets> (accessed on 2025, Jun 13)

- Eating, drinking, and smoking when contaminated, can spread external contamination to the internal organs.

## Service Animals and Pets

In 2006, Congress passed the *Pets Evacuation and Transportation Standards (PETS) Act* (7), requiring states and local disaster plans to include provisions for household pets and service animals in the event of a major disaster or other emergency. Service animals and pets are allowed in the CRC for screening and decontamination. Consider that not all pets are dogs and cats. People may bring in small ponies (service animals), birds, snakes, rodents, and other animals. Consider asking Animal Services personnel, veterinary technicians, and animal handlers to assist with the screening and decontamination/wash process.

Livestock and other farm animals are not included in this Toolkit. The Oregon Department of Agriculture working with RPS, and other state and federal experts will determine how to monitor these populations.

## Clothing/Body Coverings

Clothing or body coverings will be needed for people who had to remove and bag their clothing. Tyvek suits, hospital scrubs, sweat suits, paper clothing, and blankets for warmth can be used (modesty clothing). Flip-flops or some sort of footwear will be needed. Consider planning ahead with community organizations active in disaster (COAD) or major retailers in the area. Some people may have additional religious or other requirements for modestly clothing that should be accommodated.

## Personal Belongings

People's personal belongings like purses, wallets, keys, cell phones, may need to be screened and decontaminated. People may be asked to decontaminate their own items at the CRC, or instructions provided on how to decontaminate them at home.

## Vehicles/Transportation Decontamination

Talk to RPS about vehicle decontamination and the determination to provide/not provide this service at the CRC. Transportation vehicles that brought people to the CRC may be contaminated. Consider providing supplies (wipes and garbage bags) for people to clean their vehicles before reentering. Provide direction to mass transit agencies on cleaning busses and light rail after all passengers have been transported, prior to resuming routine service.

## Evacuation Shelters

Evacuation shelters or temporary housing will be needed for people (and their pets) who have been instructed to evacuate. Local authorities will need to provide instructions to people on what to do and bring. Information on what should be made available to evacuees at a shelter can be found on the CDC Radiation Emergencies Evacuation [website](#)<sup>2</sup>. Shelters can be co-located with CRCs. Shelter registration staff are in the Discharge area.

## Concept of Operations

### Site Selection

Determine the number, size, and location of CRC(s) needed; the hours of operation, shifts, and resources, based on:

1. Population affected (e.g., the number affected, languages spoken, the facilities in the impacted area)
2. Geographic location of the population affected
3. The facility/location:
  - a. Must be outside of the affected area but easily accessible from affected area
  - b. Outdoors vs. indoors
  - c. Adequate ingress and egress
  - d. Adequate restroom facilities
  - e. Accommodations for people with functional and access needs
  - f. Shower/decontamination facilities
  - g. Obtain a written agreement for use of the facility
  - h. Contact the Oregon Department of Environmental Quality (DEQ) Duty Officer through the Oregon Emergency Response System (OERS) at (800) 452-0311, to understand any laws or regulations related to runoff from decontamination units or showers.

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<sup>2</sup> <https://www.cdc.gov/radiation-emergencies/response/evacuation.html> (accessed on 2025, Jun 13)

4. Transportation needs (e.g., is it close to bus service or light rail?)
5. The radiological agent
6. Technical or procedural guidance
7. Equipment and internet needs (e.g., computer-based registration forms vs. paper)

## Objectives

The following objectives can be adapted to fit a local jurisdiction's CRC operation. Consider adding in numbers of people to be screened per hour or per shift and other details to make each one Specific, Measurable, Achievable, Realistic, and Time-Bound (SMART). Not all objectives may apply to your CRC.

1. Activate and manage a CRC with the appropriate command structure, personnel, equipment, and other resources, to handle XXXX persons per hour.
2. Evaluate the affected population for the need for immediate medical treatment.
3. Screen the affected population and their pets for the presence of external contamination.
4. Decontaminate persons and pets with identified external contamination.
5. Provide first aid for minor injuries.
6. Evaluate the exposure dosage received and risk of health effects (short and long term).
7. Provide psychological first aid as needed.
8. Refer individuals for additional medical, psychological, or health physics assistance, as necessary.
9. Address the communication and information needs related to the operation of the CRC.
10. (Unlikely to need) Following the procedures outlined in the Physician's Standing Orders, CRC staff administer pharmaceutical countermeasures to people who are contaminated with radiation.

## Risk Communications

Use risk communications to inform the public of CRC location(s), what to do (e.g., self-decontaminate at home prior to arrival), what to bring, and what they can expect when they arrive at the CRC. Here are some risk messaging resources:

- CDC Radiation Emergencies Community Reception Centers [website](https://www.cdc.gov/radiation-emergencies/response/community-reception-centers.html)<sup>3</sup> (8) has information and instructions for the public on what to do.
- CDC Communication and Media Tools resources [website](https://www.cdc.gov/radiation-emergencies/php/communication-resources/index.html)<sup>4</sup> (9) has resources, infographics, FAQs, and other tools to support radiological emergency response.
- CDC Crisis and Emergency Risk Communications (CERC): Radiation Emergencies [website](https://www.cdc.gov/radiation-emergencies/php/communication-resources/cerc-rad.html)<sup>5</sup> (10) includes lessons from CERC that can be applied to a radiological emergency.
- The Association of State and Territorial Health Officials (ASTHO) with U.S. EPA Radiation Protection Division and National Alliance for Radiation Readiness presentation, *Communicating in the Immediate Aftermath of a Nuclear Detonation* (ASTHO, 2025) (11). This presentation highlights principles and actions outlined in FEMA's Nuclear Detonation Preparedness: Communicating in the Immediate Aftermath (FEMA, 2024) (12).
- FEMA RadResponder: inside the RadResponder portal is a [PIO Resource Library](https://www.radresponder.net/#resources/library?rltf=104)<sup>6</sup> (13) containing resources, documents, videos for public communications during a radiological or nuclear event. It is open to the public and does not require a login.

## Layout and Process Flow

A CRC is separated into two major zones, the Contamination Control Zone and the Clean Zone. The **Contamination Control Zone** is where people first arrive and are sorted and escorted (if necessary) to the appropriate station. In the Contamination Zone, people are screened, decontaminated (if necessary), receive first aid or are sent via ambulance to the hospital for emergency medical care. The **Clean Zone** is where people register for short-and long-term monitoring, radiation doses are assessed, referrals provided if necessary, and then discharged. In Figure 1, a simplified flow diagram depicts the movement through the CRC from Entry to Discharge.

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<sup>3</sup> <https://www.cdc.gov/radiation-emergencies/response/community-reception-centers.html>

<sup>4</sup> <https://www.cdc.gov/radiation-emergencies/php/communication-resources/index.html> (accessed on 2025, Jun 13)

<sup>5</sup> <https://www.cdc.gov/radiation-emergencies/php/communication-resources/cerc-rad.html> (accessed on 2025, Jun 13)

<sup>6</sup> <https://www.radresponder.net/#resources/library?rltf=104>

**Figure 1.** Simplified Community Reception Center flow diagram

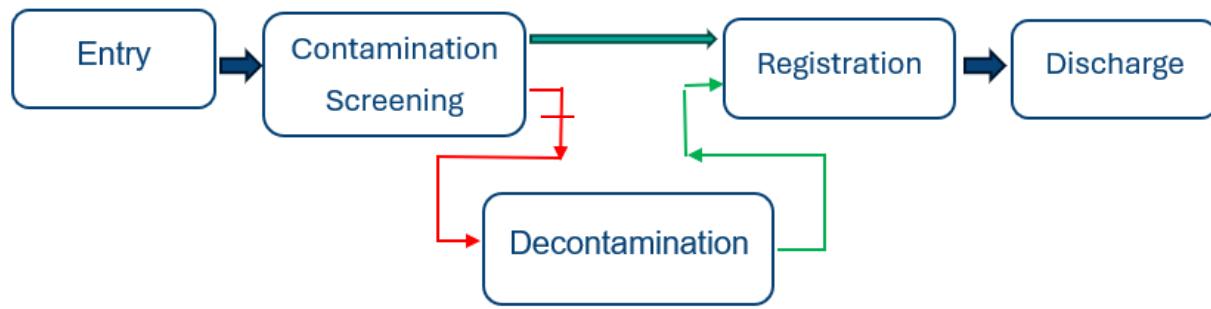


Table 1, below, shows the stations within each zone. Descriptions of each station are below the table.

**Important:** Clean and contamination walkways need to be established between zones for escorting people between stations.

**Table 1.** The stations within each Zone at a Community Reception Center

Zone	Station
CONTAMINATION CONTROL ZONE	<ul style="list-style-type: none"> <li>Initial Sorting</li> <li>First Aid/Medical</li> <li>Portal Monitors</li> <li>Decontamination/Wash</li> <li>Service Animal/Pet Services (optional)</li> </ul>
CLEAN ZONE	<ul style="list-style-type: none"> <li>Registration</li> <li>Radiation Dose Assessment (optional)</li> <li>Discharge (shelter registration, referrals)</li> </ul>

## Contamination Control Zone

### Initial Sorting

Greeters determine if a person has an urgent medical need, is highly contaminated with radioactive material, or requires special assistance. People who appear to be highly

contaminated and need to be decontaminated right away are escorted directly to Decontamination/Wash. People who have an urgent medical need are directed to the 1<sup>st</sup> Aid/Medical Station. Arrangements are made for people who need assistance moving through the CRC, need interpreters, or minors who need adult supervision. People with service animals and pets should also be directed through the portal monitors.

**Figure 2.** Initial Sorting flow at a Community Reception Center



Individual identification numbers may be assigned to people as they enter (can be used to track people with their bagged belongings).

- Wristbands are one method for identifying people. One number should be issued per person or family. For family members, write an A, B, C after the number. For example, 101A, 101B, 101C for each member of the family.

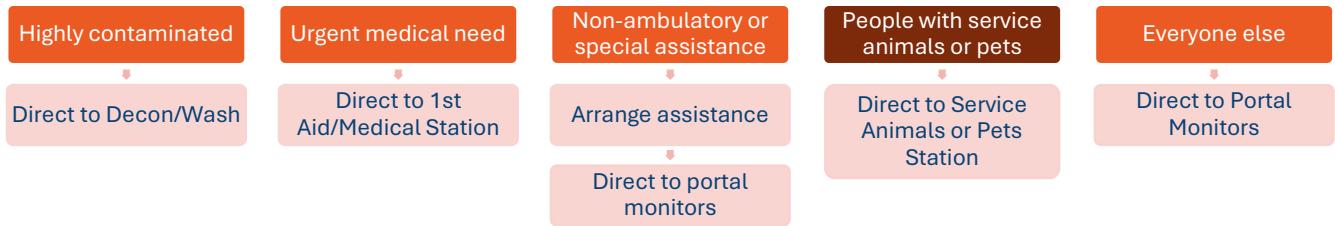
## First Aid/Medical Care

**Life-saving medical treatment takes priority over radiological surveys.** People with an urgent need for medical care should be directed to the First Aid/Medical Care station to assess patient for immediate medical needs or basic first aid. If patient requires immediate medical care, call 9-1-1 or follow directions in the Medical Plan developed by the local jurisdiction for the CRC.

## (Optional) Service Animal and Pet Services

If large numbers of pets are expected, consider establishing a separate Service Animals and Pet Services Station that provides both screening and decontaminate/wash to service animals and pets, as shown in brown color, in Figure 2.

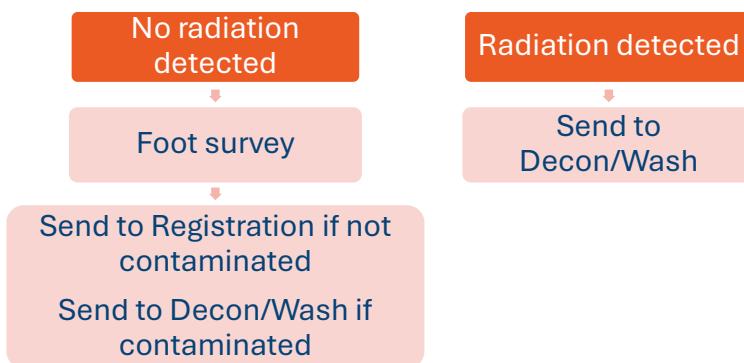
**Figure 3.** Initial Sorting flow at a Community Reception Center that includes an optional Service Animals and Pets Station



## Portal Monitor Station

Each person must undergo a full body screening before entering the Clean Zone. This is done either by portal monitors or by hand survey. If no contamination is detected, people should receive a hand stamp, wristband, or some other method of identifying a non-contaminated individual and then sent to Registration. If contamination is detected, people are directed to the Decontamination/Wash Station.

**Figure 4.** Sorting at the Portal Monitor Station



## Decontamination/Wash Station

Upon entering the Decontamination/Wash Station, a full body survey is conducted to identify the specific area(s) contaminated. People who are contaminated are decontaminated using the method prescribed by radiation specialists or RSO. This may include wipes, tape to spot remove off of clothing, indoor showers, or outdoor wash stations. Do not attempt to catch or retain wastewater. All wastewater can run down the drain (2,8,14).

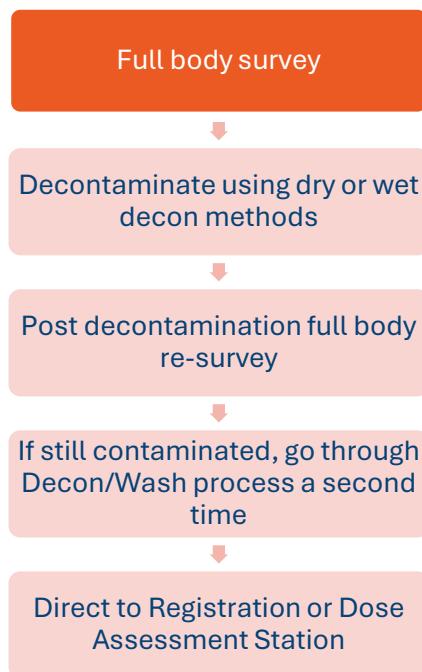
- Contaminated clothing needs to be bagged, labeled, and given back to the individual.
- Durable medical equipment and personal belongings such as wallets, purses, keys, and jewelry should be decontaminated, labeled, and returned to owner.

- Cross-contamination from animal to human and vice versa in the CRC is a concern. Pet and service animal owners should be instructed on how to wash their own pet or service animal, if able to do so, unless appropriately trained and equipped staff are available to perform this service.

After decontamination, a second full body re-survey is conducted to ensure no contamination is present.

- If contamination is still present, a second round of decontamination is necessary.
- If radiation is still registering on the monitors after a second round of decontamination, they may have internal contamination. Direct to Registration and then to the Radiation Dose Assessment station, if provided. If dose assessment is not provided at the CRC, follow the procedures outlined in your Incident Action Plan or protocol.
- If no radiation is present (or levels at background) they can enter the Clean Zone. People can then be directed to Registration.

**Figure 5.** Decontamination/Wash Station process



## Clean Zone

### Registration Station

Collect demographic and event-specific information for every person who has been cleared to enter the Clean Zone. This information may be used for follow-up interviews, or epidemiological or law enforcement investigations. See Data Collection Tools.

### (Optional) Radiation Dose Assessment Station

Specialized staff and equipment are needed for the Radiation Dose Assessment station. The purpose of this station is to screen people for internal contamination, assess their need for treatment, and prioritize people for further care. Urine or blood specimens are collected for bioassay. A physician and health physicist should be assigned to oversee this station.

- Screening people for internal contamination may not be possible at a local CRC. People may need to be referred to hospitals for dose assessment.
- Specimens need to be shipped to labs for processing.

## Discharge

People may need referrals for additional care or discharged to their home, home of friend or family member, or shelter. People should be asked if they have any needs like food or prescriptions that they had to leave behind when they evacuated. Discharge can be its own “station”, or it can be an area designated near the exit where people can receive information and sign up for shelter or other assistance. Shelter registration staff are located here.

## Staffing and Training

CRCs are multi-agency efforts staffed by government personnel and volunteers. The CDC recommends that shifts be no longer than 8 hours, and for those conducting decontamination, consider shorter shifts (4-6 hours) to “minimize physical and mental fatigue” (2) (p.H-1). See Table 1 for recommended staffing levels based on processing 350 per hour model, based on the CRC-STEP tool (2) (p.H-1 and H-2), with modifications for leadership, safety, logistics, and other critical personnel. The specifics of the incident, number of people requiring screening, and availability of resources will determine staffing levels. Staff may need to shift from station to station when bottlenecks occur.

## Lead Position Title

The person in charge of the CRC needs a title. Every incident is unique and requires a response structure that meets the needs of the incident. If one CRC is established among the many other responsibilities of the county (e.g., the protecting people from the incident scene, evacuation, sheltering, risk communications, etc.), a county/region may decide to establish a CRC Branch. If two or more CRCs are stood up, then they may consider each CRC to be a Division (geographically divided), all under the same Branch Director. A county may use the title, Incident Commander or CRC Manager. The functions of the role are the same: manage the CRC.

## CRC Staffing Chart

**Table 2.** Community Reception Center staffing example for processing 350 people per hour

CRC Staffing to process 350 people per hour (example)		
Role	Number of Staff per 8-hr Shift	Recommended Credentials or Experience
<b>CRC Branch Director</b> (Choose a title based on your structure.)	1	County or public health official delegated authority to make decisions at the CRC. Experience managing shelters, points-of-dispensing or similar large-scale emergency response operations are a plus.
<b>Public Information Officer (PIO)</b>	1	A PIO with experience managing onsite media
<b>Media Spokesperson</b>	1	A health official from local or state public health.
<b>Site Safety Officer</b>	1	Experienced Safety Officer for overall site safety
<b>Radiation Safety Officer (RSO) (Technical Specialist)</b>	1	Radiation health physicist
<b>Radiation Technical Specialists</b>	2	Radiation health physicists, Radiation Operations Support Specialists (ROSS), Oregon National Guard 102 <sup>nd</sup> Civil Support Team
<b>Logistics Support</b>	4	A variety of personnel are needed to support logistics for the CRC. Those with experience supporting public health operations, who can carry and move equipment and supplies, Information Technology, runners.

<b>Interpreters</b>	Varies	Certified health care interpreters per <a href="#">ORS 413.552<sup>7</sup></a> . The number and type of interpreters will depend on the populations of the impacted area.
<b>Psychological 1<sup>st</sup> Aid and/or Mental Health/Behavioral Health</b>	6	People trained in Psychological 1 <sup>st</sup> Aid. If possible, also include mental/behavioral health professionals.
<b>Greeters* at Initial Sorting</b>	5	People who can quickly determine if people are sick and need to go to 1 <sup>st</sup> Aid/Medical, are heavily contaminated with radiation, who match people up with interpreters or other assistance. Public health, MRC volunteers, Oregon National Guard 102 <sup>nd</sup> CST, Fire/HAZMAT personnel
<b>Portal Monitor Screeners*</b>	5	Radiation health physicists, Oregon National Guard 102 <sup>nd</sup> CST, Fire/HAZMAT personnel
<b>Contamination Screeners*</b>	10	Radiation health physicists, Oregon National Guard 102 <sup>nd</sup> CST, Fire/HAZMAT personnel
<b>Portal Monitor and Decon/Wash Scribes*</b>	10	Public health, human services, MRC volunteers
<b>Runners/Sweepers*</b>	5	Survey path, mop floor, replace paper on ground. Keep area safe and clean. Radiation health physicists, Oregon National Guard 102 <sup>nd</sup> CST, Fire/HAZMAT personnel
<b>First Aid/Medical Care Medical Personnel*</b>	4	EMS or health care: MD, PA, NP, RN, EMT-P, DO
<b>Escorts* for people with special needs</b>	4	Local or state public health, human services, emergency management, or volunteer organizations that can provide support to people with access or functional needs, including minors who need adult supervision.
<b>Decontamination/Wash*</b>	10	Radiation health physicists, Oregon National Guard 102 <sup>nd</sup> CST, Fire/HAZMAT personnel
<b>Service Animals and Pets</b>	2	Animal Control personnel, veterinary technicians, or animal handling experience
<b>Registration*</b>	5	Public health and human services personnel, MRC volunteers

<sup>7</sup> [https://oregon.public.law/statutes/ors\\_413.552](https://oregon.public.law/statutes/ors_413.552) (accessed on 2025, Jun 13)

<b>Radiation Dose Assessment Medical Personnel*</b>	5	Radiation health physicist to oversee station, clinicians, trained laboratory staff
<b>Discharge (evacuation shelter registration, human and social services)</b>	5	Shelter registration staff. Human and social service providers, transportation coordinators.
<b>Security</b>	As needed	Facility public safety personnel, law enforcement, local security for hire
<b>Traffic Control</b>	As needed	Facility public safety personnel, community volunteers with traffic control experience
<b>TOTAL</b>	87 plus interpreters, security, traffic control	

\*Job Action Sheets are available only for the positions marked with an asterisk, in Appendix B.

## Training

Technical, non-technical, and clinical staff are needed. Enlisting technical staff trained in radiation detection equipment for contamination screening, decontamination, urine sample collection and packaging to train others, is essential.

- RPS, the 102<sup>nd</sup> Civil Support Team, and other Radiation Operations Support Specialists (ROSS) can provide training on radiation detection equipment and processes for decontamination.
- Regional Hazardous Material (HAZMAT) response teams can provide training in decontamination.
- Clinicians and laboratory staff trained in urine specimen collection and packaging can provide training to other clinicians.

## Operational Briefing

It is recommended that the CRC Manager, along with the Safety Officer, PIO, and other leads within the CRC conduct an operational briefing to all CRC staff prior to start of shift, covering:

- Details of the incident and the populations affected
- What to expect
- Layout and process flow

- Shift length, rest breaks, training oncoming shift, demobilization
- Tactical communications within the CRC
- Health information disclosures during emergency situations (15), security of the registration forms, security of any contaminated items
- Logistical updates
- The Public Information Officer informs staff where the media can be directed
- Safety Officer provides a safety briefing addressing at a minimum, the following:
  - Personal protective equipment (PPE) requirements
  - Medical requirements (e.g., Potassium Iodide, vaccinations)
  - Prior training or credentials needed (e.g., blood borne pathogen training)
  - Behavioral Health resources for responders.
  - Procedures to report exposure or injury (referring to the Site Safety Plan)

## Just-in-Time (JITT) Training

JITT is needed to address roles and responsibilities for their assigned position. Technical experts shall provide JITT on radiation detection equipment, dosimetry devices, PPE, decontamination, and handling of contaminated items. See Appendix B, Job Action Sheets for a description of the essential responsibilities and tasks of each station. Staff and volunteers need to assess their ability to perform the duties assigned and let their designated leader know if they cannot safely perform them.

Radiation training videos recorded by Homeland Security/Emergency Response 13 Task Force for the Development of Population Monitoring Train-the-Trainer Workshops conducted in 2022, are available on the Conference of Radiation Control Program Director, Inc. [Youtube channel](#)<sup>8</sup>(16). These videos cover radiation fundamentals, population monitoring, risk communications, meter and portal operations, and instrumentation.

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<sup>8</sup> <https://www.youtube.com/@crcpd9207/videos>

# Equipment and Supplies

RPS maintains the following equipment that could support a local/regional CRC:

## Radiation Detection Equipment

- 2 Beta/Gamma portal monitors
- 17 Geiger-Mueller pancake meters/probe (detect alpha, beta, gamma)
- 14 Ludlum ion chambers (measure dose rate of beta and gamma)
- (For car monitoring) 2 Telescan ion chambers (survey meters on a long stick)

## PPE (for RPS Staff Only)

- Personal Radiation Detector (PRD) for measuring dosimetry (for RPS staff only)
- Universal precautions PPE (for RPS staff only)

## Additional items

- Garbage cans or bags for radiation waste
- Extension cords for portal monitors
- UHF hand-held radios (for RPS staff only)

The following is a list of suggested equipment and supplies that counties may need for a CRC operation. Local jurisdictions are encouraged to adapt as needed. A location/facility with electricity, Wi-Fi, adequate indoor and outdoor lighting, potable water, and restrooms is a must.

**Table 3.** Recommended equipment and supply list for a Community Reception Center

Recommended Equipment and Supply List for a CRC	
Category	Item
Personal Protective Equipment	Plastic (vinyl, nitrile) gloves
	Gowns
	Scrubs
	Coveralls (e.g., Tyvek® suits) or waterproof surgical gowns
	Surgical masks
	Disposable shoe covers
	N-95 respirators
	Face shields
	Duct tape
	Masking tape

<b>Decontamination and contamination control equipment</b>	A potable water source. Indoor showers are ideal. Water containment system if using outdoor shower/wash method Moist towels or disposable (baby) wipes Paper towels Plastic bags (variety of sized to hold clothing) Black permanent markers to label plastic bags Zipper-style bags to hold small personal items Adhesive labels (for individual identification number labeling) Black markers Soap (mild, neutral pH, not antibacterial soap) Baby shampoo (no conditioner) Waterless hand sanitizer Soft sponges Soft nail brushes Body towels(for decon showers) Flip-flops, slides, or shoe coverings Modesty clothing (e.g., coveralls, scrubs, t-shirts, shorts, head coverings, gloves, socks) Blankets or heaters for warmth (heaters should not blow air across contaminated area) Sanitary garments like adult and child diapers, sanitary napkins, tampons Step-off pads (tacky mats) Butcher paper (or absorbent floor covering such as disposable painting cloths) Plastic sheeting Tape to secure floor coverings Privacy screens/partitions
<b>Sample collection (if occurring at CRC)</b>	Consent and other forms Urine sample collection kits Blood sample collection kits Storage and transport containers for samples Chain-of-custody documentation
<b>Procedural documents</b>	Copies of Incident Action Plan Just-in-Time training materials (e.g., Job Action Sheets, RPS procedural documents) Community Reception Center Radiation Screening Form Personnel Contamination Monitoring Record Individual Dosimetry KI Record Dosimeter Issue Log Radiological Survey Report
<b>Risk communications tools (in multiple languages)</b>	Sandwich boards Masking/painter's tape What to Expect/FAQs in poster size Large and small directional signage Maps depicting the impacted area and evacuation zones (if any)
<b>Information technology</b>	Internet access

	<p>Laptop computers and mice</p> <p>Extension cords (50+ feet)</p> <p>Surge protectors</p> <p>Printers, if needed</p> <p>Photocopier, if needed</p> <p>Extension cords (50+ feet)</p> <p>Surge protectors</p> <p>Portable power supply for remote areas.</p> <p>Cord covers / tape for floor</p>
<b>Tactical communications</b>	<p>Radios for internal and external communications</p> <p>Cell phones and chargers for CRC leadership</p> <p>(optional) various types of cell phone charging cords for use by staff and public</p> <p>Bull horn with batteries or microphone</p>
<b>Safety and Traffic Control</b>	<p>Reflective vests for staff (indoors and outdoors)</p> <p>Traffic cones</p> <p>Barriers (stanchions and rope)</p> <p>Emergency medical kits</p> <p>Blood borne pathogen kits</p> <p>First aid supplies</p> <p>Automated External Defibrillator (AED)</p> <p>Whistles</p>
<b>Durable medical equipment</b>	<p>Wheelchairs</p> <p>Hearing amplifiers</p> <p>Hand-held magnifiers for reading</p> <p>Canes</p> <p>Shower stools</p> <p>Oxygen tanks</p> <p>Commode chairs</p> <p>Slide transfer board (for transferring from wheelchair to chair/shower chair/toilet)</p>
<b>Office supplies</b>	<p>Tables</p> <p>Chairs (metal or plastic washable chairs are preferred)</p> <p>Masking tape</p> <p>Clear tape</p> <p>Floor tape for directional marking</p> <p>Ball point pens</p> <p>Dry erase boards</p> <p>Dry erase markers (dark colors)</p> <p>Staplers and staples</p> <p>Scissors</p> <p>Locked containers to secure completed forms</p> <p>Name badges or stickers for staff</p> <p>Clip boards</p> <p>Portable toilet facilities (outside area only)</p>

<b>Cleaning supplies and hygiene</b>	Portable sink or tubs (outside area only)
	Bucket and mop
	Bottle of bleach
	Spray bleach
	Paper towels
	Sponges
	Long gloves for cleaning
	Alcohol-based hand sanitizer
	Soap (for restrooms)
	Toilet paper
	Facial tissue/Kleenex
	Large garbage bags
	Large garbage cans
	Small garbage bags (optional)
	Small waste receptacles for stations (optional)
<b>Food/Refreshments</b>	Potable water for drinking
	Snacks for staff and public
	Meals for staff
	Paper napkins or paper towels
	Paper/plastic cups
	Plastic cutlery
<b>Other</b>	Outdoor canopies

## Worker Protection

It is recommended that jurisdictions plan to have both a Site Safety Officer and a Radiation Safety Officer (RSO) for any CRC operation. The RSO is a radiation technical specialist.

The Site Safety Officer should conduct a site assessment and develop a Site Safety Plan (SSP). A SSP is a supplement to the Incident Command System (ICS) form 208 (Safety Message/Plan). A Safety and Risk Analysis is also needed to identify the specific hazards and risks associated with operating the CRC and the facility, and the mitigation measures needed to eliminate or reduce those hazards/risks. The RSO will evaluate the need for PPE, personal dosimetry devices, and other safety precautions to keep workers and the public safe from radiation.

## Personal Protective Equipment

**Contamination Zone:** Universal medical precautions will provide adequate protection to prevent cross-contamination and the potential risk of inhalation for people working in the Contamination Zone. Universal precautions include gowns/scrubs/Tyvek suits, plastic (vinyl, nitrile) examination gloves, disposable shoe covers, surgical face mask, N-95 respirator, safety glasses, face shields,

duct tape and masking tape. Hand surveys should be performed frequently and gloves changed as needed.

**Clean Zone:** Because people entering the Clean Zone have been decontaminated, minimal or no protective equipment is required. The RSO will make this decision.

## Data Collection Tools

Data collection tools (paper and/or electronic) are needed for:

- Characterization of injuries and external contamination levels on individuals, pre- and post-decontamination.
- Laboratory tests conducted for internal contamination (bioassay).
- Provision of epidemiological data that can be entered into short- and long-term registries for follow-up or latent health effects after radiation exposure.
- Identification of risk factors associated with particular environments or activities (proximity, being outdoors, etc.).

Two forms are used for data collection in Oregon:

- The **Personnel Contamination Monitoring Record** is for notating injuries and external contamination. This form captures pre- and post-decontamination survey results and decontamination methods.
  - This form is only needed for those who came into the CRC with external contamination.
  - RPS will determine what form to use. An example is included at the end of this Toolkit in Appendix C.
- The **Community Reception Center Radiation Screening Form** collects information on everyone coming into the CRC for short-term medical follow-up or long-term health monitoring.
  - In 2025, using the Population Monitoring in Radiation Emergencies: A Guide for State and Local Public Health Planners (CDC, 2014) (2), RPS worked with the OHA Public Health Division, Preparedness, Surge, and Epidemiology Team (PSET) and Portland metropolitan area LPHAs to determine what information was most critical to collect during a radiation contamination emergency. The *Community Reception Center Radiation Screening Form* attached to this document in Appendix C, was

the result. **During a real event, check with PSET and RPS to agree what data needs to be collected and what form to use.**

- It is recommended that the form be available in both paper and electronic format. There is no electronic version of this form – someone would need to create it. A Quick Response or “QR” code could be created that links to an electronic version so people could use their cell phone or computers/tablets to fill out the information. If using electronic methods, computer stations would also need to be available to Registrars so they can ensure completion and accuracy. It is estimated to take between 5-15 minutes to fill out the English version of the form (other languages have yet to be developed).

Information must be stored securely, whether using paper forms or electronic-based forms. This means access to the data should be limited to a small number of staff, and stored on a secure network (3).

## Radiation Medical Management

The Radiation Emergency Assistance Center/Training Site ([REAC/TS<sup>9</sup>](#)) has 24/7 response capability to provide advice and subject matter expertise on rapid dose assessment, triage, diagnosis, and medical management of radiological/nuclear incidents (17).

## Rapid Dose Assessment

The decision to collect urine and/or blood samples at the CRC must be made by LPHAs, in collaboration with RPS. The Radiation Center at Oregon State University (OSU) supports radiological analysis for emergencies for the Oregon Department of Energy and Oregon Health Authority (OHA) RPS (18). Specimens should be packaged and shipped according to hazardous material protocols provided by the Oregon State Public Health Laboratory (OSHPL). OSU offers guidance on packaging samples for shipment at their [website<sup>10</sup>](#) (18).

## Pharmaceutical Countermeasures

The decision to administer pharmaceutical countermeasures at a CRC must be made by local and state public health authorities, in consultation with medical experts. REAC/TS’ Radiation

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<sup>9</sup> <https://orise.orau.gov/reacts/index.html> (accessed on 2025, Jun 13)

<sup>10</sup> <https://ehs.oregonstate.edu/services/shipping-hazardous-materials> (accessed on 2025, Jun 13)

Countermeasures [website](#)<sup>11</sup> (19) contains clinical information on radiation pharmaceutical countermeasures and how to obtain them. See also *Treatment of Radiation Exposure and Contamination* (20).

## Waste Management

LPHAs should develop a waste management guideline for the CRC, in consult with RPS, to ensure compliance with state and federal waste management regulations. A contaminated waste storage area will need to be identified. It will need to be clearly marked, where only authorized personnel can enter.

## References

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<sup>11</sup> <https://orise.orau.gov/reacts/resources/radiation-countermeasures.html> (accessed on 2025, Jun 13)

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## Additional Resources

### Training and Exercises

- Austin Public Health, Williamson County and Cities Health District, Hays County Health Department. (n.d.). *Central Texas Community Reception Center Toolkit, v1.1*. <https://www.naccho.org/uploads/resource-hub-images/CentralTexasCRC Toolkit11Update-id6006.pdf>
- National Association of County & City Health Officials (NACCHO). (2019). *Radiation Emergency Exercise Resource Guide*. <https://www.naccho.org/resource-hub-articles/radiation-emergency-exercise-resource-guide>

## Appendix A: Acronyms

**Table 4.** Acronym list

Acronym	
<b>AED</b>	Automated External Defibrillator
<b>ARS</b>	Acute Radiation Syndrome
<b>ASL</b>	American Sign Language
<b>ASTHO</b>	Association of State and Territorial Health Officials
<b>CDC</b>	Centers for Disease Control and Prevention
<b>CERC</b>	Crisis Emergency and Risk Communications
<b>COAD</b>	Community Organizations Active in Disasters
<b>CRC</b>	Community Reception Center
<b>CRC-STEP</b>	Community Reception Center – Simulation Training and Exercise Program
<b>CST</b>	Civil Support Team
<b>Decon</b>	Decontaminate
<b>DEQ</b>	Department of Environmental Quality
<b>EMT</b>	Emergency Medical Technician
<b>EPA</b>	Environmental Protection Agency
<b>FAQ</b>	Frequently Asked Questions
<b>FEMA</b>	Federal Emergency Management Agency
<b>HAZMAT</b>	Hazardous material
<b>ICS</b>	Incident Command System
<b>JAS</b>	Job Action Sheet
<b>JITT</b>	Just-in-Time Training
<b>KI</b>	Potassium Iodide
<b>LPHA</b>	Local Public Health Authority
<b>MRC</b>	Medical Reserve Corps
<b>N-95</b>	The N95 is a disposable filtering face respirator that meets the U.S. National Institute for Occupational Safety and Health standards for air filtration, filtering at least 95% of airborne particles with a mass medium aerodynamic diameter of 0.3 micrometers under 42 CFR 84. “N” stands for “not resistant to oil.”
<b>OERS</b>	Oregon Emergency Response System

<b>OHA</b>	Oregon Health Authority
<b>OSPHL</b>	Oregon State Public Health Laboratory
<b>OSU</b>	Oregon State University
<b>P100 APR</b>	The P100 Air-Purifying Respirator is a face respirator that filters out at least 99.97% of airborne particles. The “P” means it is “oil-proof” providing protection against most oil and non-oil contaminants and particles including vapors, chemicals, gases, fumes, mists, and dusts.
<b>PETS</b>	Pets Evacuation and Transportation Standards
<b>pH</b>	pH is a logarithmic scale used to specify the acidity or basicity of aqueous solutions
<b>PPE</b>	Personal Protective Equipment
<b>PRD</b>	Personal Radiation Detector
<b>PIO</b>	Public Information Officer
<b>PSET</b>	Preparedness, Surveillance, and Epidemiology Team
<b>QR</b>	Quick Response
<b>REAC/TS</b>	Radiation Emergency Assistance Center/Training Site
<b>RN</b>	Registered Nurse
<b>ROSS</b>	Radiation Operations Support Specialist
<b>RPS</b>	Radiation Protection Services
<b>RSO</b>	Radiation Safety Officer
<b>SMART</b>	Specific, Measurable, Achievable, Realistic, and Time-bound
<b>SSP</b>	Site Safety Plan
<b>Wi-Fi</b>	Wireless fidelity

## Appendix B: Job Action Sheets

Community Reception Center Job Action Sheet templates were developed for certain positions within the CRC. Local jurisdictions are encouraged to adapt or add more, as needed. Specific procedures for how to perform highly technical tasks are not included. RPS personnel, HAZMAT, or other technical specialists will provide Just-in-Time training to local responders, when necessary.

### Contamination Control Zone

- Greeter
- Escort
- Portal Monitor Screener
- Portal Monitor Scribe
- Runners/Sweepers
- First Aid/Medical Care: Medical Personnel
- Contamination Screener
- Contamination Scribe
- Decontamination/Wash

### Clean Zone

- Registration: Registrar
- Radiation Dose Assessment: Medical Personnel

## INITIAL SORTING STATION: GREETER

### Job Action Sheet

<p><b>Supplies needed:</b></p> <ol style="list-style-type: none"><li>1. Signs directing people into the CRC.</li><li>2. Signs providing information about what happens within the CRC.</li><li>3. List of frequently asked questions and map(s) of impacted area.</li><li>4. Washable chairs for those who need to sit/rest.</li><li>5. Wheelchairs.</li></ol> <p><b>Personal Protective Equipment:</b></p> <ol style="list-style-type: none"><li>1. Universal precautions, per RSO instructions.</li><li>2. Dosimetry devices (to be determined by radiation health physicist).</li></ol>	<p><b>REPORTS TO:</b></p> <p>Title: _____</p> <p>Phone: _____</p> <p><b>RESPONSIBILITIES:</b></p> <ul style="list-style-type: none"><li>• Welcome and direct people into the CRC.</li><li>• Determine if a person has an urgent medical need, is highly contaminated with radioactive material, or requires special assistance and direct them to the appropriate station.</li><li>• Provide basic information about what to expect.</li></ul>
	<p><b>START OF SHIFT:</b></p> <ul style="list-style-type: none"><li>• Sign in.</li><li>• Collect assigned Personal Protective Equipment (PPE), dosimetry devices, and radiation detection instruments.</li><li>• Attend operational briefing.</li><li>• Report to Station Lead for Just-in-Time Training.</li></ul>
	<p><b>DURING SHIFT:</b></p> <ul style="list-style-type: none"><li>• Wear assigned PPE and dosimetry devices at all times.</li><li>• Limit physical contact with arrivals to limit cross-contamination. If you touch someone, change your gloves or have them checked for contamination.</li><li>• Screen arrivals for highly contaminated people and direct these individuals to the appropriate stations, per the Decision-Action chart below.<ol style="list-style-type: none"><li>a. Direct people with urgent medical needs to 1<sup>st</sup> Aid/Medical Station.</li><li>b. Direct people who appear highly contaminated with radiation to Decontamination/Wash (via an Escort).</li><li>c. Match people who are non-ambulatory or require special assistance (e.g., interpreters) with those services.</li></ol></li></ul>

- If directed to do so, assign individual identification numbers to people as they enter, to track people with their bagged belongings.
- Monitor traffic flow and patient throughput in the Contamination Zone.
- Answer general questions regarding CRC operations.
- Report problems to the Station Lead.

**END OF SHIFT:**

- Provide just-in-time training to your replacement.
- Remove your PPE and undergo contamination screening per direction of the RSO.
- Turn in your dosimetry device.
- Turn in any assigned equipment.
- Participate in debriefing session.
- Sign out.

**Table 5.** Decision-Action Chart for Greeters at a Community Reception Center.

Decision	Action
<b>Urgent medical need</b> (any injury or illness that requires immediate medical attention)	→ <b>Escort to First Aid/Medical Care Station</b>
<b>Highly contaminated</b>	→ <b>Escort to Decontamination/Wash Station</b>
<b>Non-ambulatory or special needs</b> (requires assistance, translation services, or adult supervision)	→ <b>Arrange assistance or escort through CRC</b>
<b>Everybody else</b> (and their service animals or pets)	→ <b>Go through portal monitors</b>

## INITIAL SORTING STATION: ESCORT

### Job Action Sheet

<p><b>Supplies needed:</b></p> <p>1. List of frequently asked questions and map(s) of impacted area.</p> <p><b>Personal Protective Equipment:</b></p> <p>1. Universal precautions, per RSO instructions.</p> <p>2. Dosimetry devices (to be determined by radiation health physicist).</p>	<p><b>REPORTS TO:</b></p> <p>Title: _____</p> <p>Phone: _____</p>
	<p><b>RESPONSIBILITIES:</b></p> <ul style="list-style-type: none"><li>• Working with Greeters and other CRC staff, escort people to and from stations within the CRC, as needed.</li><li>• Limit cross-contamination between zones.</li></ul>
	<p><b>START OF SHIFT:</b></p> <ul style="list-style-type: none"><li>• Sign in.</li><li>• Collect assigned Personal Protective Equipment (PPE), dosimetry devices, and radiation detection instruments.</li><li>• Attend operational briefing.</li><li>• Report to Station Lead for Just-in-Time Training.</li></ul>
	<p><b>DURING SHIFT:</b></p> <ul style="list-style-type: none"><li>• Wear assigned PPE and dosimetry devices at all times.</li><li>• Limit physical contact with arrivals to limit cross-contamination. If you touch someone, change your gloves or have them checked for contamination.</li><li>• Escort individuals to the appropriate stations, per the direction of the Greeters and other CRC staff.</li><li>• Answer general questions regarding CRC operations.</li><li>• Report problems to the Station Lead.</li></ul>
	<p><b>END OF SHIFT:</b></p> <ul style="list-style-type: none"><li>• Provide just-in-time training to your replacement.</li><li>• Remove your PPE and undergo contamination screening per direction of the RSO.</li><li>• Turn in your dosimetry device.</li><li>• Turn in any assigned equipment.</li><li>• Participate in debriefing session.</li><li>• Sign out.</li></ul>

## PORTAL MONITOR STATION: PORTAL MONITOR SCREENERS

### Job Action Sheet

<p><b>Station supplies needed:</b></p> <ol style="list-style-type: none"><li>1. Portal monitors.</li><li>2. Step-off pads (tacky mats).</li><li>3. Garbage cans and can liners.</li></ol> <p><b>Personal Protective Equipment:</b></p> <ol style="list-style-type: none"><li>1. Universal precautions, per RSO instructions.</li><li>2. Dosimetry devices (to be determined by radiation health physicist).</li></ol>	<p><b>REPORTS TO:</b></p> <p>Title: _____</p> <p>Phone: _____</p>
	<p><b>RESPONSIBILITIES:</b></p> <p>Survey people for radiation using portal monitors, direct to Registration or Decontamination/Wash.</p>
	<p><b>START OF SHIFT:</b></p> <ul style="list-style-type: none"><li>• Sign in.</li><li>• Collect assigned Personal Protective Equipment (PPE), dosimetry devices, and radiation detection instruments.</li><li>• Attend operational briefing.</li><li>• Report to Station Lead for Just-in-Time Training.</li></ul>
	<p><b>DURING SHIFT:</b></p> <ul style="list-style-type: none"><li>• Wear assigned PPE and dosimetry devices at all times.</li><li>• Limit physical contact with arrivals to limit cross-contamination. If you touch someone, change your gloves or have them checked for contamination.</li><li>• Direct persons through portal monitor to determine if contaminated.</li><li>• Coordinate with Contamination Screeners to perform hand, feet, or full body surveys as needed.</li><li>• If not contaminated, direct to Registration.</li><li>• If contaminated, direct to Decontamination/Wash.</li><li>• Report any problems to the Station Lead.</li></ul>
	<p><b>END OF SHIFT:</b></p> <ul style="list-style-type: none"><li>• Provide just-in-time training to your replacement.</li><li>• Remove your PPE and undergo contamination screening per direction of the RSO.</li><li>• Turn in your dosimetry device and radiation detection instruments (unless detection devices are being used in the next shift).</li></ul>

- Turn in any assigned equipment.
- Participate in debriefing session.
- Sign out.

# PORTAL MONITOR STATION: PORTAL MONITOR SCRIBE

## Job Action Sheet

<p><b>Station supplies needed:</b></p> <ol style="list-style-type: none"><li>1. Personnel Contamination Monitoring Record.</li><li>2. Black or blue ball point pens.</li><li>3. Clipboards.</li><li>4. Chairs and a table at each station.</li></ol> <p><b>Personal Protective Equipment:</b></p> <ol style="list-style-type: none"><li>1. Universal precautions, per RSO instructions.</li><li>2. Dosimetry devices (to be determined by radiation health physicist).</li></ol>	<p><b>REPORTS TO:</b></p> <p>Title: _____</p> <p>Phone: _____</p> <p><b>RESPONSIBILITIES:</b></p> <ul style="list-style-type: none"><li>• Assist Portal Monitor Screeners by documenting survey readings on the Personnel Contamination Monitoring Record.</li><li>• Escort persons with contamination to Decontamination/Wash.</li></ul>
	<p><b>START OF SHIFT:</b></p> <ul style="list-style-type: none"><li>• Sign in.</li><li>• Collect assigned Personal Protective Equipment (PPE), dosimetry devices, and radiation detection instruments.</li><li>• Attend operational briefing.</li><li>• Report to Station Lead for Just-in-Time Training.</li></ul>
	<p><b>DURING SHIFT:</b></p> <ul style="list-style-type: none"><li>• Wear assigned PPE and dosimetry devices at all times.</li><li>• Limit physical contact with arrivals to limit cross-contamination. If you touch someone, change your gloves or have them checked for contamination.</li><li>• Working with the Portal Monitor Screener, notate readings on the <i>Personnel Contamination Monitoring Record</i>, then escort persons to Decontamination/Wash Station. Hand paperwork over to the Scribe at the Decontamination/Wash Station. (Keeping paper forms free of radiation contamination.)</li><li>• Report any problems to the Station Lead.</li></ul>
	<p><b>END OF SHIFT:</b></p> <ul style="list-style-type: none"><li>• Provide just-in-time training to your replacement.</li><li>• Remove your PPE and undergo contamination screening per direction of the RSO.</li></ul>

- Turn in your dosimetry device.
- Turn in any assigned equipment.
- Participate in debriefing session.
- Sign out.

# PORTAL MONITOR STATION: RUNNER/SWEEPER

## Job Action Sheet

<p><b>Station supplies needed:</b></p> <ol style="list-style-type: none"><li>1. As directed by RSO, flat wet mops with disposable pads and/or large paper rolls.</li><li>2. Tape that can be used on floor surfaces.</li><li>3. Air and surface monitoring equipment.</li><li>4. <i>Radiological Survey Report.</i></li></ol> <p><b>Personal Protective Equipment:</b></p> <ol style="list-style-type: none"><li>1. Universal precautions, per RSO instructions</li><li>2. Dosimetry devices (to be determined by radiation health physicist).</li></ol>	<p><b>REPORTS TO:</b></p> <p>Title: _____</p> <p>Phone: _____</p> <p><b>RESPONSIBILITIES:</b></p> <ul style="list-style-type: none"><li>• Monitor air and surfaces for radiation contamination.</li><li>• Clean floors and equipment as needed.</li><li>• Support stations with the CRC by running errands as needed.</li></ul>
	<p><b>START OF SHIFT:</b></p> <ul style="list-style-type: none"><li>• Sign in.</li><li>• Collect assigned Personal Protective Equipment (PPE), dosimetry devices, and radiation detection instruments.</li><li>• Attend operational briefing.</li><li>• Report to Station Lead for Just-in-Time Training.</li></ul>
	<p><b>DURING SHIFT:</b></p> <ul style="list-style-type: none"><li>• Wear assigned PPE and dosimetry devices at all times.</li><li>• Limit physical contact with arrivals to limit cross-contamination. If you touch someone, change your gloves or have them checked for contamination.</li><li>• Keep area safe and clean through the following measures:<ul style="list-style-type: none"><li>○ Survey contamination pathways, mop floor or replace paper on floor frequently to prevent cross-contamination.</li><li>○ Monitor air for contamination and note findings on the <i>Radiological Survey Report</i> (see Appendix C).</li></ul></li><li>• Act as runners supporting stations throughout the CRC, replenishing supplies as needed.</li><li>• Report any problems to the Station Lead.</li></ul>
	<p><b>END OF SHIFT:</b></p> <ul style="list-style-type: none"><li>• Provide just-in-time training to your replacement.</li></ul>

- Remove your PPE and undergo contamination screening per direction of the RSO.
- Turn in your dosimetry device and radiation detection instruments (unless detection devices are being used in the next shift).
- Turn in any assigned equipment.
- Participate in debriefing session.
- Sign out.

## FIRST AID/MEDICAL CARE STATION: MEDICAL PERSONNEL

### Job Action Sheet

<p><b>Station supplies needed:</b></p> <ol style="list-style-type: none"><li>1. Major trauma supplies: Israeli trauma bandages, tourniquet, abdominal pads, rolls of gauze, food-type plastic wrap (for sealing a wound).</li><li>2. Medical kits.</li><li>3. Chairs and tables.</li></ol> <p><b>Personal Protective Equipment:</b></p> <ol style="list-style-type: none"><li>1. Universal precautions, per RSO instructions.</li><li>2. Dosimetry devices (to be determined by radiation health physicist).</li></ol>	<p><b>REPORTS TO:</b></p> <p>Title: _____</p> <p>Phone: _____</p>
	<p><b>RESPONSIBILITIES:</b></p> <ul style="list-style-type: none"><li>• Evaluate arrivals with urgent medical needs.</li><li>• Treat persons in need of immediate medical care.</li><li>• Arrange transports to hospital or alternate care site, as needed.</li><li>• Escort people to the appropriate station.</li></ul>
	<p><b>START OF SHIFT:</b></p> <ul style="list-style-type: none"><li>• Sign in.</li><li>• Collect assigned Personal Protective Equipment (PPE), dosimetry devices, and radiation detection instruments.</li><li>• Attend operational briefing.</li><li>• Report to Station Lead for Just-in-Time Training.</li></ul>
	<p><b>DURING SHIFT:</b></p> <ul style="list-style-type: none"><li>• Wear assigned PPE and dosimetry devices at all times.</li><li>• Limit physical contact with arrivals to limit cross-contamination. If you touch someone, change your gloves or have them checked for contamination.</li><li>• Assess persons for urgent medical needs including:<ul style="list-style-type: none"><li>○ Life-threatening conditions</li><li>○ Open wounds</li><li>○ Symptoms of acute radiation syndrome</li></ul></li><li>• Stabilize patient in order to finish decontaminating (if possible).</li><li>• Seal wounds with radioactive material in order to keep it from spreading.</li><li>• Arrange transports to hospital or alternate care site, as needed.</li><li>• Report any problems to the Station Lead.</li></ul>
	<p><b>END OF SHIFT:</b></p>

- Provide just-in-time training to your replacement.
- Remove your PPE and undergo contamination screening per direction of the RSO.
- Turn in your dosimetry device.
- Turn in any assigned equipment.
- Participate in debriefing session.
- Sign out.

## DECONTAMINATION/WASH STATION: CONTAMINATION SCREENER

### Job Action Sheet

<b>Station supplies needed:</b> 1. Hand survey equipment. 2. Plastic bags/containers for personal items.	<b>REPORTS TO:</b> Title: _____ Phone: _____
	<b>RESPONSIBILITIES:</b> Screen persons for external contamination and then direct people to appropriate station
<b>Personal Protective Equipment:</b> 1. Universal precautions, per RSO instructions. 2. Dosimetry devices (to be determined by radiation health physicist).	<b>START OF SHIFT:</b> <ul style="list-style-type: none"><li>• Sign in.</li><li>• Collect assigned Personal Protective Equipment (PPE), dosimetry devices, and radiation detection instruments.</li><li>• Attend operational briefing.</li><li>• Report to Station Lead for Just-in-Time Training.</li></ul> <b>DURING SHIFT:</b> <ul style="list-style-type: none"><li>• Wear assigned PPE and dosimetry devices at all times.</li><li>• Limit physical contact with arrivals to limit cross-contamination. If you touch someone, change your gloves or have them checked for contamination.</li><li>• Conduct full body surveys or hand and/or foot surveys to detect contamination area and levels, following the screening protocols established by the Station Lead or RSO.</li><li>• Communicate findings with Scribe.</li><li>• Resurvey after decontamination or wash has occurred to ensure levels are below the protocols established by the Station Lead or RSO.</li><li>• Assess personal belongings for contamination.</li><li>• Direct contaminated people to be decontaminated and non-contaminated people to Registration.</li><li>• As necessary, conduct contamination screenings for CRC staff.</li><li>• Report any problems to Station Lead.</li></ul>

	<p><b>END OF SHIFT:</b></p> <ul style="list-style-type: none"><li>• Provide just-in-time training to your replacement.</li><li>• Remove your PPE and undergo contamination screening per direction of the RSO.</li><li>• Turn in your dosimetry device and radiation detection instruments (unless detection devices are being used in the next shift).</li><li>• Turn in any assigned equipment.</li><li>• Participate in debriefing session.</li><li>• Sign out.</li></ul>
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# DECONTAMINATION/WASH STATION: CONTAMINATION SCRIBE

## Job Action Sheet

<p><b>Station supplies needed:</b></p> <ol style="list-style-type: none"><li>1. Personnel Contamination Monitoring Record.</li><li>2. Black or blue ball point pens.</li><li>3. Clipboards.</li></ol> <p><b>Personal Protective Equipment:</b></p> <ol style="list-style-type: none"><li>1. Universal precautions, per RSO instructions.</li><li>2. Dosimetry devices (to be determined by radiation health physicist).</li></ol>	<p><b>REPORTS TO:</b></p> <p>Title: _____</p> <p>Phone: _____</p>
	<p><b>RESPONSIBILITIES:</b></p> <p>Assist Decontamination/Wash station by documenting survey readings on the Personnel Contamination Monitoring Record.</p>
	<p><b>START OF SHIFT:</b></p> <ul style="list-style-type: none"><li>• Sign in.</li><li>• Collect assigned Personal Protective Equipment (PPE), dosimetry devices, and radiation detection instruments.</li><li>• Attend operational briefing.</li><li>• Report to Station Lead for Just-in-Time Training.</li></ul>
	<p><b>DURING SHIFT:</b></p> <ul style="list-style-type: none"><li>• Wear assigned PPE and dosimetry devices at all times.</li><li>• Limit physical contact with arrivals to limit cross-contamination. If you touch someone, change your gloves or have them checked for contamination.</li><li>• Work with Contamination Screener and notate readings on the Personnel Contamination Monitoring Record.</li><li>• Once decontaminated, hand the Personnel Decontamination Monitoring Record to the patient that they can hand to Registration.</li><li>• Report any problems to the Station Lead.</li></ul>
<p><b>END OF SHIFT:</b></p> <ul style="list-style-type: none"><li>• Provide just-in-time training to your replacement.</li><li>• Remove your PPE and undergo contamination screening per direction of the RSO.</li><li>• Turn in your dosimetry device.</li><li>• Turn in any assigned equipment.</li><li>• Participate in debriefing session.</li><li>• Sign out.</li></ul>	

# DECONTAMINATION/WASH STATION: DECONTAMINATION/WASH PERSONNEL

## Job Action Sheet

<p><b>Station supplies needed:</b></p> <ol style="list-style-type: none"><li>1. Dry or wet decon supplies.</li><li>2. Partitions or screens.</li><li>3. Water collection equipment.</li><li>4. Garbage can and can liners.</li><li>5. Body and head coverings/clothing.</li><li>6. Heating/cooling equipment.</li></ol> <p><b>Personal Protective Equipment:</b></p> <ol style="list-style-type: none"><li>1. Minimal PPE for wet and dry decon at CRC is level B protective suit with a P100 Ammonia/Methylamine/Particulate (APR), or per RSO instructions.</li><li>2. Dosimetry devices (to be determined by radiation health physicist).</li></ol>	<p><b>REPORTS TO:</b></p> <p>Title: _____</p> <p>Phone: _____</p> <p><b>RESPONSIBILITIES:</b></p> <ul style="list-style-type: none"><li>• Facilitate decontamination by providing verbal directions and supplies to persons in need of decontamination.</li><li>• Conduct dry or wet decon, as needed.</li><li>• Assess and decontaminate personal belongings (purses, wallets, phones, keys).</li></ul>
	<p><b>START OF SHIFT:</b></p> <ul style="list-style-type: none"><li>• Sign in.</li><li>• Collect assigned Personal Protective Equipment (PPE), dosimetry devices, and radiation detection instruments.</li><li>• Attend operational briefing.</li><li>• Report to Station Lead for Just-in-Time Training.</li></ul>
	<p><b>DURING SHIFT:</b></p> <ul style="list-style-type: none"><li>• Wear assigned PPE and dosimetry devices at all times.</li><li>• Limit physical contact with arrivals to limit cross-contamination. If you touch someone, change your gloves or have them checked for contamination.</li><li>• Direct decon efforts; assist as needed</li><li>• If contamination is on clothing, instruct person to remove clothing and place in plastic bags; support as needed. The bags stay with the person.</li><li>• Provide body coverings in alignment with modesty and spiritual requirements.</li></ul>

- Working with Contamination Screeners, assess personal belongings for contamination and either provide instruction, or decontaminate personal belongings.
- Working with Contamination Screeners, ensure post-decontamination surveys are conducted.
- Direct or provide secondary decon/wash if necessary
- Direct persons to appropriate station.
- Report any problems to the Station Lead.

**END OF SHIFT:**

- Provide just-in-time training to your replacement.
- Remove your PPE and undergo contamination screening per direction of the RSO.
- Turn in your dosimetry device.
- Turn in any assigned equipment.
- Participate in debriefing session.
- Sign out.

## REGISTRATION STATION: REGISTRAR

### Job Action Sheet

<p><b>Station supplies needed:</b></p> <ol style="list-style-type: none"><li>1. The <i>CRC Radiation Screening Form</i> (paper and electronic), chosen by state and federal officials for this event.</li><li>2. Black or blue ball point pens.</li><li>3. Clipboards.</li><li>4. Computers or other electronic devices for electronic form.</li><li>5. Computer accessories and assistive devices.</li><li>6. Map of the contaminated or impacted area.</li><li>7. Chairs and tables.</li></ol> <p><b>Personal Protective Equipment:</b></p> <ol style="list-style-type: none"><li>1. No PPE required. Gloves and face mask are optional. Follow RSO instructions.</li></ol>	<p><b>REPORTS TO:</b></p> <p>Title: _____</p> <p>Phone: _____</p> <p><b>RESPONSIBILITIES:</b></p> <p>Register people who come to the CRC for short- and long-term population monitoring</p>
	<p><b>START OF SHIFT:</b></p> <ul style="list-style-type: none"><li>• Sign in.</li><li>• Collect assigned Personal Protective Equipment (PPE) (if any).</li><li>• Attend operational briefing.</li><li>• Report to Station Lead for Just-in-Time Training.</li></ul>
	<p><b>DURING SHIFT:</b></p> <ul style="list-style-type: none"><li>• Wear assigned PPE (if any).</li><li>• Ask people to fill out the <i>CRC Radiation Screening Form</i>. One form for each person. Both members of the public and workers should complete the form.</li><li>• Registrars, interpreters, or family members can assist in completing the form.</li><li>• Direct people to the Discharge area where Evacuation Shelter registration and other resources may be located.</li><li>• Report any problems to the Station Lead.</li></ul>
	<p><b>END OF SHIFT:</b></p> <ul style="list-style-type: none"><li>• Provide just-in-time training to your replacement.</li><li>• Remove your PPE and undergo contamination screening per direction of the RSO (if worn).</li><li>• Turn in any assigned equipment.</li><li>• Participate in debriefing session.</li><li>• Sign out.</li></ul>

# RADIATION DOSE ASSESSMENT: MEDICAL PERSONNEL

## Job Action Sheet

<b>Station supplies needed:</b> <ol style="list-style-type: none"><li>1. Blood or urine sample collection kits.</li><li>2. Consent and other forms.</li><li>3. Storage and transport containers for samples.</li><li>4. Chain-of-Custody documentation.</li><li>5. Black or blue ball point pens.</li><li>6. Computers or other electronic devices for electronic form.</li><li>7. Computer accessories and assistive devices.</li><li>8. Chairs and tables.</li><li>9. Table coverings.</li></ol> <b>Personal Protective Equipment:</b> <ol style="list-style-type: none"><li>1. PPE appropriate for bloodborne pathogen specimen handling, and per RSO instructions.</li><li>2. Dosimetry devices (to be determined by radiation health physicist).</li></ol>	<b>REPORTS TO:</b> Title: _____ Phone: _____
	<b>RESPONSIBILITIES:</b> Assess each person's radiation exposure and screen for internal contamination through blood or urine sample collection.
	<b>START OF SHIFT:</b> <ul style="list-style-type: none"><li>• Sign in.</li><li>• Collect assigned Personal Protective Equipment (PPE).</li><li>• Attend operational briefing.</li><li>• Report to Station Lead for Just-in-Time Training.</li></ul>
	<b>DURING SHIFT:</b> <ul style="list-style-type: none"><li>• Wear assigned PPE.<ul style="list-style-type: none"><li>○ Under the direction of the Oregon State Public Health Laboratory (OSPHL): Collect blood or urine specimens for laboratory analysis.</li><li>○ Package and ship specimens according to hazardous material protocols, and directed by the OSPHL.</li></ul></li><li>• Assess people's need for treatment and prioritize people for further care.</li><li>• Direct people to appropriate station.</li><li>• Report any problems to the Station Lead.</li></ul>
	<b>END OF SHIFT:</b> <ul style="list-style-type: none"><li>• Provide just-in-time training to your replacement.</li><li>• Remove your PPE and undergo contamination screening per direction of the RSO.</li><li>• Turn in any assigned equipment.</li><li>• Participate in debriefing session.</li><li>• Sign out.</li></ul>



## Appendix C: Forms

The following forms are needed when operating a CRC. They are attached at the end of this Toolkit. After an incident occurs, work with RPS to understand if you have the most up-to-date form, and who is responsible for making copies of the forms.

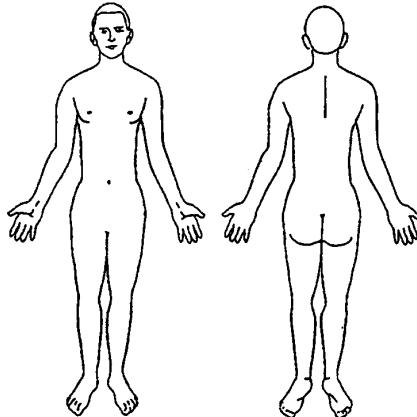
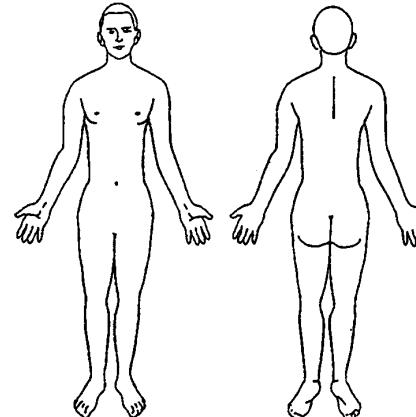
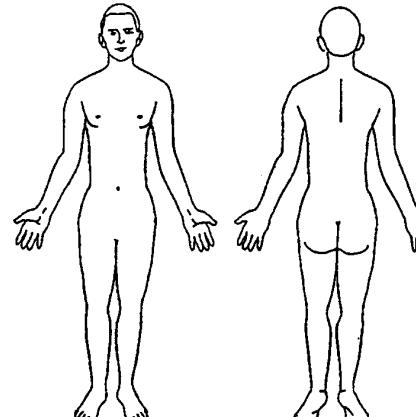
- Personnel Contamination Monitoring Record
- Community Reception Center Radiation Screening Form
- Dosimeter Issue Log
- Individual Dosimetry/KI Record
- Radiological Survey Report

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You can get this document in other languages, large print, braille or a format you prefer free of charge. Contact the Radiation Protection Services at 971-673-0553. We accept all relay calls.

Public Health Division  
Radiation Protection Services  
800 NE Oregon Street, Suite 640  
Portland, OR 97232  
(971) 673-0553; TTY: 711  
<https://www.oregon.gov/oha/ph/healthyenvironments/radiationprotection/pages/index.aspx>



PERSONNEL CONTAMINATION MONITORING RECORD		INCIDENT NAME			
PERSONAL INFORMATION					
NAME		DATE OF BIRTH			
ADDRESS		SEX (M/F)			
CITY, STATE, ZIP		TELEPHONE NUMBER			
INJURIES/EXTERNAL CONTAMINATION					
1 <sup>st</sup> MONITORING		2 <sup>nd</sup> MONITORING		3 <sup>rd</sup> MONITORING	
DATE		DATE		DATE	
TIME		TIME		TIME	
		<input type="checkbox"/>	REMOVE CLOTHING WASH AT SINK SHOWER	<input type="checkbox"/>	REMOVE CLOTHING WASH AT SINK SHOWER
METER MODEL	BACKGROUND	METER MODEL	BACKGROUND	METER MODEL	BACKGROUND
METER SERIAL		METER SERIAL		METER SERIAL	
 <input type="checkbox"/> UNCONTAMINATED SENT TO 2 <sup>ND</sup> MONITOR		 <input type="checkbox"/> DECONTAMINATED SENT TO 3 <sup>RD</sup> MONITOR		 <input type="checkbox"/> DECONTAMINATED REFERRED TO HOSPITAL	
THYROID MONITORING					
DATE	TIME	METER MODEL		READING	
MONITOR NAME		METER SERIAL		REFERRED TO:	

## Community Reception Center Radiation Screening Form

Public health needs to collect some information about you in case we need to follow-up with you, and to track any possible long-term health effects.

**Minors under the age of 15:** obtain consent from parent or guardian before completing form.

**Your rights:** you have the right to refuse to answer some or all of the information. You can select "Don't know" or "Don't want to answer". Your responses are confidential.

<b>For Internal Use Only</b>		
Attach ID band barcode label here OR enter ID Number.	Date: (MM/DD/YYYY)	Time: (24-hour clock)
Barcode or ID Number: _____	_____ : _____	

### START HERE:

<b>Language</b>	
What is your preferred spoken language? <input type="checkbox"/> English <input type="checkbox"/> Other: _____	
Do you need or want an interpreter? <input type="checkbox"/> Yes <input type="checkbox"/> No <b>If yes, select all that apply:</b>	
<input type="checkbox"/> Spoken language interpreter <b>Sign Language:</b> <input type="checkbox"/> American Sign Language <input type="checkbox"/> Mexican Sign Language <input type="checkbox"/> Tactile/Pro-Tactile Sign Language	<input type="checkbox"/> Contact sign language (PSE) <input type="checkbox"/> Another sign language not listed. Specify: _____ <input type="checkbox"/> Certified Deaf Interpreter for DeafBlind, additional barriers, or both
<b>Do you need or want any of the following for us to communicate with you?</b> <input type="checkbox"/> Yes - Assistive Listening Device such as an FM System or Loop. Specify: _____ <input type="checkbox"/> Yes - CART/Captioning <input type="checkbox"/> No	
<b>Personal Information</b>	
What full name would you like us to use?	
First name(s): _____ MI: _____ Last name(s): _____	
Who is answering these questions? (Select all that apply.)	
<input type="checkbox"/> Self	<input type="checkbox"/> Interpreter or other support person

<input type="checkbox"/> Parent, guardian, or other family member	<input type="checkbox"/> Not listed, specify: _____
<b>Is anyone here with you?</b> <input type="checkbox"/> No <input type="checkbox"/> Family <input type="checkbox"/> Non-relative <input type="checkbox"/> Don't know <input type="checkbox"/> Don't want to answer	
If individual is present with family, total number of family members (including individual): _____	
<b>Date of birth:</b> (MM/DD/YYYY) _____	
<b>Age:</b> _____	If infant, record age in months.
<b>Check here in case of</b> <input type="checkbox"/> <b>Unaccompanied minor</b>	
<b>What is your sex?</b>	
<input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Intersex <input type="checkbox"/> Not listed, my sex is: _____ <input type="checkbox"/> Don't know <input type="checkbox"/> Don't want to answer	
<b>Are you currently pregnant?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know <input type="checkbox"/> Don't want to answer	
<b>Are you currently breastfeeding?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Contact Information</b>	
<b>Phone number:</b> (____) ____ - _____ <input type="checkbox"/> None <input type="checkbox"/> Don't know <input type="checkbox"/> Don't want to answer	
<b>Email address:</b> _____ <input type="checkbox"/> None <input type="checkbox"/> Don't know <input type="checkbox"/> Don't want to answer	
<b>Home address or place you are staying:</b> (full address including zip code)    <input type="checkbox"/> None <input type="checkbox"/> Don't know <input type="checkbox"/> Don't want to answer	
<b>Emergency Contact:</b>	
First and Last Name:	Phone number:
Email address:	Physical address:

<b>Service Animals or Pets</b>	
<b>Check if you have any</b> <input type="checkbox"/> <b>service animals or</b> <input type="checkbox"/> <b>pets with you.</b>	
Type of service animal(s) or pet: #1: _____ #2: _____ #3: _____ #4: _____	Name of service animal or pet: #1: _____ #2: _____ #3: _____ #4: _____

## Incident-Related Questions

**Were you within the area (shown on the map) after [insert TIME on DATE]?**

Yes  No  Don't know  Don't want to answer

**At the time of the incident [insert DATE around TIME], were you:**

- Inside a single-story building, but not in the basement
- Inside a multi-story building, but not in the basement; specific floor location \_\_\_\_\_
- Basement or underground facility
- Inside a car or other vehicle
- Outside
- Don't know
- Don't want to answer

**Were you present at the time and place of the incident as a (check all that apply):**

- Resident
- Passerby
- Responder or rescue worker
- Deployed government official
- Clean-up worker
- Non-governmental organization/site volunteer
- Other, specify: \_\_\_\_\_
- Don't know
- Don't want to answer

For responders, rescue workers, deployed government officials, non-governmental/site volunteers: what is the name of your employer/volunteer organization?  
\_\_\_\_\_

**How many locations have you been since the incident occurred?** \_\_\_\_\_

Please list all locations you visited, since the incident occurred until now.

**First location visited:** \_\_\_\_\_

Address (if known): \_\_\_\_\_

When were you at this location (date/time)? \_\_\_\_\_

How long did you stay at this location? \_\_\_\_\_

**Second location visited:** \_\_\_\_\_

Address (if known): \_\_\_\_\_

When were you at this location (date/time)? \_\_\_\_\_

How long did you stay at this location? \_\_\_\_\_

**Third location visited:** \_\_\_\_\_

Address (if known): \_\_\_\_\_

When were you at this location (date/time)? \_\_\_\_\_

How long did you stay at this location? \_\_\_\_\_

**Additional space for locations:** \_\_\_\_\_

**Since the incident, have you experienced any of the following symptoms?**

- Vomiting once
- Vomiting more than once
- Diarrhea
- Fever
- None
- Don't know
- Don't want to answer

**If you vomited, when did it start (after the incident)?**

- less than 1 hour
- 1-2 hours
- 3-6 hours
- more than 6 hours
- Don't know
- Don't want to answer
- N/A



**STOP HERE**

**For Internal Use Only**

**Instructions:**

- Staple the individuals ***Personal Contamination Monitoring*** Record to the back of this sheet, if they have one.
- Keep all family members' and caregivers' forms together.

**Additional notes:**

DOSIMETER ISSUE LOG						TEAM NAME								
INCIDENT NAME						OPERATIONAL PERIOD								
NAME	MODEL	SERIAL NUMBER	ISSUE TIME	INITIAL READING	DOSIMETER PERIODIC READINGS AND TIMES								TOTAL EXPOSURE	
					Time instructed to administer KI:			time:	time:	time:	time:	time:		time:
	PRD													
	EPD													
	0-200 mR													
	0-5 R													
	0-20 R													
	PRD													
	EPD													
	0-200 mR													
	0-5 R													
	0-20 R													
	PRD													
	EPD													
	0-200 mR													
	0-5 R													
	0-20 R													
	PRD													
	EPD													
	0-200 mR													
	0-5 R													
	0-20 R													
	PRD													
	EPD													
	0-200 mR													
	0-5 R													
	0-20 R													
	PRD													
	EPD													
	0-200 mR													
	0-5 R													
	0-20 R													
Permanent Record Dosimeter (PRD) may be Film Badge, TLD, OSLD, or DISD														
PREPARED BY														

## INDIVIDUAL DOSIMETRY/KI RECORD

### Worker Identification

Name		Organization	
DOB	Sex	Address	
Phone		City	State

### Mission Assignment

Date	Time	Activity/Location	Dosimeter Limit	Revised Dosimeter Limit

### Dosimeter Record

OSLD/TLD serial		EPD serial		0-200 mR DRD serial		0-5 R DRD serial		0-20 R DRD serial			
	Initial Reading	Record readings at specified intervals								Ending Reading	Total Exposure
EPD											
0-200 mR											
0-5 R											
0-20 R											

### Potassium Iodide Record (Two 65 mg KI tablets = one 130 mg tablet)

Dosage	1 (130 mg)	2 (130 mg)	3 (130 mg)	4 (130 mg)	5 (130 mg)	6 (130 mg)	7 (130 mg)
Date:							
Time:							

RADIOLOGICAL SURVEY REPORT		INCIDENT NAME	
TEAM NAME	OPERATIONAL PERIOD		
INSTRUMENTATION			
METER MODEL	METER SERIAL	PROBE MODEL	PROBE SERIAL
METER MODEL	METER SERIAL	PROBE MODEL	PROBE SERIAL
METER MODEL	METER SERIAL	PROBE MODEL	PROBE SERIAL
AIR SAMPLER TYPE	SAMPLER SERIAL	CAL DUE DATE	
SURVEY RESULTS			
SMEAR RESULTS (cpm per 100 cm <sup>2</sup> )			
No.	SMEAR LOCATION	GROSS COUNT	
NA	BKGD		
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
AIR SAMPLE RESULTS (cpm on contact)			
No.	LOCATION	COUNT	
1	BKGD		
2			
3			

(Exposure rates are mR/hr 1 meter above ground unless otherwise noted)

PREPARED BY

SURVEY LEGEND		POSTING LEGEND																									
SURVEY SYMBOLS																											
<b>XXX</b>	EXPOSURE RATE ONE METER ABOVE GROUND (mR/hr UNLESS NOTED)	RRA	RADIOLOGICAL RESTRICTED AREA																								
<b>XXX/YY</b>	CONTACT EXPOSURE RATE & 30 cm EXPOSURE RATE (mR/hr UNLESS NOTED)	RA	RADIATION AREA																								
<b>#ZZZ</b>	DIRECT FRISK; POUND SIGN FOLLOWED BY cpm READING, ASSUMED LOOSE	HRA	HIGH RADIATION AREA																								
<b>*ZZZ</b>	DIRECT FRISK, BUT SMEAR NEGATIVE (FIXED): ASTERISK FOLLOWED BY cpm READING	VHRA	VERY HIGH RADIATION AREA																								
<b>○</b>	SMEAR LOCATIONS - CIRCLES NUMBERED CONSECUTIVELY	CA	CONTAMINATION AREA																								
<b>△</b>	AIR SAMPLE LOCATIONS - TRIANGLES NUMBERED CONSECUTIVELY	HCA	HIGH CONTAMINATION AREA																								
<b>□</b>	SOIL SAMPLE LOCATIONS - SQUARES NUMBERED CONSECUTIVELY	AAA	AIRBORNE ACTIVITY AREA																								
<b>◇</b>	VEGETATION SAMPLE LOCATIONS - PENTAGONS NUMBERED CONSECUTIVELY	RMA	RADIOACTIVE MATERIAL AREA																								
<b>★</b>	WATER SAMPLE LOCATIONS - STARS NUMBERED CONSECUTIVELY	<b>S</b>	STEP-OFF PAD																								
<b>○</b>	FLOOR DRAIN	<b>-X--X-</b>	RADIOLOGICAL BOUNDARY																								
REMARKS/NARRATIVE																											
EXAMPLE		SMEAR RESULTS																									
		<table border="1"> <thead> <tr> <th>LOCATION</th> <th>COUNT</th> </tr> </thead> <tbody> <tr> <td>N/A</td> <td>50</td> </tr> <tr> <td>1</td> <td>50</td> </tr> <tr> <td>2</td> <td>200</td> </tr> <tr> <td>3</td> <td>100</td> </tr> <tr> <td>4</td> <td>5K</td> </tr> <tr> <td>5</td> <td>1K</td> </tr> <tr> <td>6</td> <td>4K</td> </tr> <tr> <td>7</td> <td>600</td> </tr> <tr> <td>8</td> <td>50</td> </tr> <tr> <td>9</td> <td></td> </tr> <tr> <td>10</td> <td></td> </tr> </tbody> </table>		LOCATION	COUNT	N/A	50	1	50	2	200	3	100	4	5K	5	1K	6	4K	7	600	8	50	9		10	
LOCATION	COUNT																										
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AIR SAMPLE RESULTS																											
No.	LOCATION	COUNT																									
1	BKGD - HALL	100																									
2	PUMP ROOM	100																									
3																											