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**OAK RIDGE
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MARTIN MARIETTA

**Twenty-First Nuclear Accident
Dosimetry Intercomparison Study:
August 6-10, 1984**

R. E. Swaja
G. E. Ragan
C. S. Sims

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MARTIN MARIETTA ENERGY SYSTEMS, INC.
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Date Published - May 1985

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TWENTY-FIRST NUCLEAR ACCIDENT DOSIMETRY INTERCOMPARISON STUDY:

AUGUST 6-10, 1984

R. E. Swaja

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Highlights

The twenty-first in a series of nuclear accident dosimetry (NAD) intercomparison (NAD) studies was conducted at the Oak Ridge National Laboratory's Dosimetry Applications Research Facility during August 6-10, 1984. The Health Physics Research Reactor operated in the pulse mode was used to simulate three criticality accidents with different radiation fields. Participants from five organizations measured neutron doses between 0.53 and 4.36 Gy and gamma doses between 0.19 and 1.01 Gy at area monitoring stations and on phantoms. About 75% of all neutron dose estimates based on foil activation, hair activation, simulated blood sodium activation, and thermoluminescent methods were within $\pm 25\%$ of reference values. Approximately 86% of all gamma results measured using thermoluminescent (TLD-700 or CaSO_4) systems were within $\pm 20\%$ of reference doses which represents a significant improvement over previous studies. Improvements observed in the ability of intercomparison participants to estimate neutron and gamma doses under criticality accident conditions can be partly attributed to experience in previous NAD studies which have provided practical tests of dosimetry systems, enabled participants to improve evaluation methods, and standardized dose reporting conventions.

INTRODUCTION

The twenty-first in a series¹⁻⁶ of nuclear accident dosimetry (NAD) intercomparison studies was conducted at the Oak Ridge National Laboratory's (ORNL) Dosimetry Applications Research (DOSAR) Facility during August 6-10, 1984. Participants measured neutron doses between 0.53 and 4.36 Gy and gamma doses between 0.19 and 1.01 Gy at area monitoring locations (air stations) and on phantoms for three simulated criticality accidents. These accidents were simulated by operating the Health Physics Research Reactor (HPRR)⁷ in the pulse mode with and without spectral modifying shields. Results of individual agencies were

compared with those of other participants who made similar measurements under identical conditions and to reference doses based on reactor characteristic data. This week-long study also included lectures, discussions, and demonstrations on subjects concerning neutron activation principles, foil activation analysis, biological dosimetry, accident dose conventions, medical aspects of radiation accidents, analysis of the Japanese bomb survivor data, and problems associated with nuclear accident monitoring at participating facilities. The intercomparison study program is included in Appendix A of this report.

PARTICIPATION

A total of 15 people from 5 different organizations participated in this study. Four agencies reported final dose estimates. Appendix B lists individual participants, their affiliations, mailing addresses, and the abbreviations used in this report to identify participating organizations.

DESCRIPTION OF EXPERIMENTS

A summary of experimental conditions for the three pulses considered in this study is given in Table 1. The three pulses had fission yields between 6.12 to 9.05×10^{16} fissions for the HPRR with the following shield conditions: unshielded, shielded with 20-cm of concrete, and shielded with 13-cm of steel. Details of the shield construction and associated neutron and gamma spectra have been reported in the literature⁶.

Accident dosemeters were mounted on ring stands or tables for area monitoring station measurements and on BOMAB⁹ phantoms for personnel monitoring. Dosimeters at air stations and phantom centerlines were located 3 m from the reactor vertical centerline. Horizontal

centerlines of the HPRR, area monitors, and personnel dosimeters were positioned 1.5 m above the floor. All phantoms were arranged with their fronts facing the HPRR. One phantom was filled with a saline solution with a sodium content approximating that found in human blood (1.5 mg/ml). The activated saline solution was made available to participants after each pulse for dose measurements based on simulated blood sodium activation analysis⁹⁻¹⁰. Two other phantoms used for personnel monitoring studies were filled with tap water.

DOSEMETERS USED IN THE INTERCOMPARISON

A general description of the types of radiation dosimeters used in this study and the abbreviations used to identify them are given below. Neutron doses were measured using foil activation systems or thermoluminescent dosimeters (TLD's) at air stations and foil activation, TLD, TLD-albedo, sodium activation, or hair activation on phantoms. All gamma measurements were made using thermoluminescent dosimeters with TLD-700 (^7LiF) or CaSO_4 phosphors. Detailed descriptions of the accident dosimetry systems and evaluation methods are available in the literature¹¹⁻¹².

Neutron Dosimeters

1. Foil Activation Systems (Act) - Some materials (e.g., gold, copper, indium, sulfur) become radioactive when exposed to neutrons. By measuring the activity of exposed foils, neutron fluences over differential energy ranges can be estimated for the incident spectrum. Associated neutron doses can be obtained by applying fluence-to-dose conversion factors to the estimated fluences and summing over the range of energies encompassed by the activation foils. Some activation systems also use foils made of

fissionable materials (e.g., plutonium, neptunium, uranium) which have fission cross sections with thresholds at different neutron energies. These systems are called Threshold Detector Units (TDU's) and are generally used for area monitoring.

2. Thermoluminescent (TLD) and TLD-albedo dosimeters - In some substances metastable states are produced when these materials are irradiated and, upon heating, light is emitted in proportion to the absorbed dose. For neutron monitoring, two types of TL materials, one sensitive to gammas (^7LiF) and the other sensitive to neutrons and gammas (^6LiF), are simultaneously exposed to the simulated nuclear accident radiation fields. The response due to neutrons can be determined after both chips are analyzed. The thermoluminescent neutron systems considered in this study were of the direct interaction (TLD) type, which respond mostly to directly incident neutrons, and the TLD-albedo type, which respond mostly to neutrons reflected from the body. Both systems are also used for routine personnel neutron monitoring.
3. Sodium Activation (NaAct) - Samples from irradiated, saline-filled phantoms are analyzed for ^{24}Na activity by any of a variety of counting techniques. The dose received by a phantom is proportional to the activity per unit volume of solution.
4. Human Hair Activation (HAct) - Samples of human hair are analyzed for ^{32}P activity following irradiation. This method is used to determine the dose due to neutrons with energies greater than the $^{32}\text{S}(n,p)$ threshold of about 2.5 MeV. The total neutron dose can be determined if the fast neutron dose fraction is known.

Gamma Dosemeters

All gamma dosemeters used in this study were TLD's containing TLD-700 or CaSO_4 phosphors. These dosemeters are also used for routine gamma personnel monitoring at participating agencies.

REFERENCE DOSIMETRY

Reference neutron and gamma doses in air and on phantoms are given in Tables 2 and 3, respectively. Reference neutron doses in air (Table 2) were obtained using fission yields determined by measuring the ^{32}P beta activity in a 22 gram sulfur pellet located at a fixed position near the reactor core and applying dose-per-fission conversion factors at 3 m from the reactor for the various HPRR spectra⁸. Reference neutron doses in air are given in terms of wet tissue kerma ¹³ and element 57 absorbed dose¹⁴ with the capture gamma component excluded. Element 57 refers to the central volume element of a tissue-equivalent cylindrical phantom used to calculate the average absorbed dose per unit incident neutron fluence. Neutron dose in volume element 57 is the highest for all volume elements in the phantom and represents the expected maximum measured value for each exposure in this study. Reference neutron doses at air stations varied from 0.53 to 4.15 Gy for this study. Reference gamma doses in air were obtained by dividing neutron kerma in air by the neutron-to-gamma dose ratio at 3 m from the reactor. The neutron-to-gamma dose ratio is based on measured results from the first nineteen NAD intercomparison studies. For this intercomparison, reference gamma doses at air stations varied from 0.19 to 0.59 Gy.

The reference neutron and gamma doses on phantoms given in Table 3 were calculated by multiplying doses in air by appropriate air-to-phantom conversion factors developed from measured results of the first nineteen NAD intercomparison studies. These factors were applied only

to neutron kerma and gamma dose values since element 57 dose already represents the absorbed dose in a particular volume element of a tissue equivalent phantom. Reference neutron and gamma doses on phantoms ranged from 0.64 to 4.36 Gy and from 0.33 to 1.01 Gy, respectively, for this study. For comparison with measured results, reference neutron doses will be given in terms of wet tissue kerma at air stations and element 57 absorbed dose on phantoms¹.

MEASUREMENT RESULTS AND ANALYSIS

Tables 4-9 summarize final results of measurements reported by participants for the Twenty-first NAD Study. Air station results including neutron and gamma dose estimates, neutron-to-gamma dose ratios, and detection systems are given in Tables 4-6 for each reporting agency. Tables 7-9 summarize results of measurements made on phantoms for each organization. Data contained in these tables include neutron doses, gamma doses, and the basis for the reported dose estimates.

Table 10 summarizes results of neutron dose measurements at air stations and on phantoms based on data shown in Tables 4-9. The table gives average measured neutron doses and experimental standard deviations about the mean for each basic dosimeter type (foil activation, blood sodium and/or hair activation, and TLD and TLD-albedo systems) and for the composite of all measurements. Reference values given in terms of wet tissue kerma for air station results and element 57 absorbed dose for phantom measurements are also included.

Average measured neutron doses normalized to the reference values and associated percent standard deviations about the mean (in parenthesis) based on data shown in Table 10 are given in Table 11 for each basic dosimeter type and for the composite of all measurements.

Normalized doses indicate the accuracy of the mean of a set of measurements relative to the reference value. Standard deviation about the mean is a measure of precision and reflects agreement among individual measurements of the same dose.

Considering all dosemeter types (column labeled "All"), neutron doses were underestimated by an average of about 11% for air stations and 15% for phantom measurements. With the exception of the air station results for the concrete-shielded pulse, average neutron doses were about 15% lower than reference values. No significant variations in average measurement accuracy with neutron spectrum average energy or neutron-to-gamma dose ratio is observable based on the results obtained for the composite of all measurements. Standard deviations associated with these data were lower for air stations (average = 11% of the mean) than for phantoms (average = 17%). For each pulse, measurements made at air stations were equally precise or more precise than corresponding measurements made on phantoms.

Neutron dose measurements at air stations were made using foil activation methods (the most popular type of area monitor used in this study) or TLD systems. Average activation-measured neutron doses varied between 0.81 to 1.00 times the reference values (average = 0.90) with the magnitude increasing with increasing neutron spectrum softness (i.e., decreasing mean energy). Associated standard deviations averaged 11% of the means for the three pulses. Since only one agency reported air station results based on TL monitors, no detailed analysis of the data is possible. However, TLD-measured neutron doses were within 25% of reference values for all three pulses.

With regard to phantom measurements, personnel accident dosimeters based on foil activation produced average neutron doses which varied from 0.71 to 0.82 times reference values (average = 0.78). Associated standard deviations varied from 12 to 22% of the means with an average of 16% for the three pulses. Average results obtained for blood sodium and hair activation varied between 0.79 and 0.95 times reference doses (average = 0.87) with an average standard deviation of 13% of the mean. The TLD and TLD-albedo personnel dosimeters, which were used by two agencies, provided average neutron doses between 0.89 and 0.98 times reference values (average = 0.94) with an average standard deviation of 17% of the mean. Thus, of the basic systems used to estimate personnel neutron doses in this study, TL and albedo systems provided the most accurate estimates (within 11% of references) followed by blood sodium and/or hair activation (within 21% of references) and foil activation (within 29% of references). This indicates that TL-based neutron dosimeters used for routine personnel monitoring can provide accurate dose estimates under accident conditions.

Table 12 summarizes average gamma dose measurements at air stations and on phantoms, associated experimental standard deviations about the mean, reference doses, and measured and reference neutron-to-gamma dose ratios (D_n/D_γ) at air stations for each of the three pulses. All gamma measurements were made using either ^7LiF (TLD-700) or CaSO_4 phosphors. Measured dose ratios are within one experimental standard deviation of the reference values for all three pulses.

Average measured gamma doses normalized to the reference values and associated percent standard deviations from the mean (in parenthesis) for air station and phantom locations are given in Table 13. Average

measured results were within 14% and 7% of the reference values for air stations and phantoms, respectively. Most accurate measurements were obtained for the unshielded pulse while least accurate were obtained for the steel-shielded spectrum. Air station measurements were more precise (average standard deviation = 9% of the mean) than corresponding phantom results (average standard deviation = 17% of the mean) for each pulse. These results indicate that personnel gamma dosimeters are capable of providing very accurate and precise estimates of gamma doses under accident conditions.

Measured and reference phantom-to-air station dose ratios are given in Table 14 for neutrons and gammas. Neutron doses measured on phantoms are larger than air stations due to neutrons reflected from the phantom. Gamma doses on phantoms are higher than at air stations because of the contribution of gamma rays from neutron capture reactions in hydrogen in phantom materials. In all cases, measured phantom-to-air dose ratios are within one experimental standard deviation of reference results.

DOSEMETER PERFORMANCE RELATIVE TO REGULATORY CRITERIA

Guidelines¹⁵⁻¹⁶ for criticality accident dosimetry suggest accuracies of $\pm 25\%$ for neutron dose and $\pm 20\%$ for gamma dose measurements. Table 15 summarizes the performance of neutron and gamma measurements made in this study relative to these criteria for air stations, phantoms, and the composite of all measurements. Data shown in the table include the number of measurements reported, the number satisfying the appropriate criterion, and the percent of results satisfying the criterion (in parenthesis).

A total of 75% of all neutron measurements was within $\pm 25\%$ of reference values. Participants had greater success satisfying the guidelines at air stations where a total of 91% of the results was within $\pm 25\%$ of references compared to 70% of the phantom measurements. The same degree of success was exhibited for unshielded and shielded spectrum measurements which indicated 77% and 76% of the results, respectively, meeting the criterion. This performance is consistent with that observed in the most recent intercomparisons¹⁻³ which produced about 75% of all neutron measurements within the suggested limits.

With regard to gamma data, 86% of all reported results was within $\pm 20\%$ of reference values. All measurements made at air stations satisfied the criterion while 75% of the phantom results was within the limits. Gamma measurement performance exhibited in this study is considerably improved over that found in the most recent intercomparisons¹⁻³ which produced only 39% of the gamma dose estimates within $\pm 20\%$ of reference values.

CONCLUSIONS

Results of the Twenty-first NAD Intercomparison indicated that 75% of all neutron measurements and 86% of all gamma measurements made under simulated criticality accident conditions satisfied suggested accident dosimetry guidelines relative to reference doses. Neutron doses measured at air stations using foil activation systems, the most popular type used in this study, provided average neutron doses within 20% of reference values for all three pulses. Foil activation and blood sodium and/or hair neutron activation measurements on phantoms provided results within 30% of references for the simulated criticality accidents. Neutron dose estimates based on TLD or TLD-albedo systems which are also

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used for personnel monitoring were within 25% of reference values for areal and phantom measurements. Gamma dose estimates based on TLD-700 or CaSO_4 phosphors were within 14% of references for all pulses and monitoring locations. Improvements observed in the ability of intercomparison participants to estimate neutron and gamma doses under accident conditions can be partly attributed to experience in previous NAD studies which have provided practical tests of dosimetry systems, enabled participants to improve evaluation methods, and standardized dose reporting conventions.

RECOMMENDATIONS

The number of participating agencies in the past few NAD studies has been relatively consistent at about six organizations per intercomparison. This number represents a slight decrease in total number of participants relative to the Fifteenth through Eighteenth NAD Intercomparisons. Based on discussions with dosimetrists at agencies which maintain accident monitoring systems, interest in these intercomparisons is still great but travel funding has decreased significantly at most participating facilities. To provide a relatively high number of participants (at least eight agencies) and to ensure significant interaction among accident dosimetrists, the DOSAR staff should consider conducting these intercomparisons every two years instead of annually. Significant interest in the Criticality Accident Dosimetry Training Course sponsored by the DOSAR staff is also indicated. This course could be conducted during the years between NAD intercomparisons.

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Table 1. Summary of experimental conditions^a

Pulse No.	Date	Eastern Daylight Time	Pulse yield, ^b 10 ¹⁶ fissions	Shield	Reactor to shield distance, m
1	3/7/84	1020	9.05	None	-
2	8/8/84	1020	6.12	20-cm concrete	1
3	8/9/84	1023	8.38	13-cm steel	2

^aDosimeters at area monitoring stations were located 3 m from the centerline of the HPRR. The centerlines of phantoms on which personnel dosimeters were exposed were 3 m from the centerline of the HPRR.

^bBased on sulfur pellet activation analysis.

Table 2. Reference neutron and gamma doses at air stations

Pulse No.	Shield	Pulse yield, 10 ¹⁶ fissions	Neutron dose, 10 ⁻² Gy ^a		Neutron-to-gamma dose ratio ^b	Gamma dose, 10 ⁻² Gy ^c
			Kerma	Element 57		
1	None	9.05	362	415	6.1	59
2	20-cm concrete	6.12	53	61	2.6	20
3	13-cm steel	8.38	146	150	7.8	19

^aCalculated dose at 3 m from the reactor centerline based on HPRR reference dosimetry document ORNL/TM-7748. Units are 10⁻² Gy (1 rad).

^bDose ratio at 3 m from the reactor based on measured results from the first nineteen nuclear accident dosimetry intercomparison studies.

^cNeutron kerma divided by neutron-to-gamma dose ratio.

Table 3. Reference neutron and gamma doses on phantoms

Pulse No.	Neutron air-to-phantom	Neutron dose, 10^{-2} Gy		Gamma air-to-phantom	Gamma dose,
	conversion ^a	Kerma ^b	Element 57	conversion ^a	10^{-2} Gy ^b
1	1.05	380	436	1.70	101
2	1.20	64	73	1.62	33
3	1.19	174	179	2.33	44

^aRatio of phantom-to-air dose based on measured results from the first nineteen nuclear accident dosimetry intercomparison studies.

^bProduct of conversion factor times the dose in air given in Table 2.

Table 4. Measurements at air stations for pulse no. 1

Yield: $9.05 (10^{16})$ fissions

Shield: none

Group	Neutron dose, 10^{-3} Gy ^a	Gamma dose, 10^{-3} Gy	Dn/D γ	Detector system	
				neutron	gamma
Reference	362	59	6.1	-	-
Reference	415 ^b	-	-	-	-
DOSAR	357	59	6.1	Act	TLD-700
GAT	280	68	4.1	TLD	TLD-700
GAT	290	68	4.3	Act	TLD-700
SRP	237	57	4.2	Act	TLD-700
SRP	-	57	4.2	-	TLD-CaSO ₄

^aNeutron doses represent wet tissue kerma unless otherwise indicated and are given in units of 10^{-3} Gy (1 rad).

^bNeutron dose represents element 57 dose with the $^1\text{H}(n,\gamma)^2\text{H}$ component excluded.

Table 5. Measurements at air stations for pulse no. 2

Yield: $6.12 (10^{16})$ fissions

Shield: 20-cm concrete

Study group	Neutron dose, 10^{-2} Gy ^a	Gamma dose, 10^{-2} Gy	Dn/D γ	Detector system	
				neutron	gamma
Reference	53	20	2.7	-	-
Reference	61 ^b	-	-	-	-
DOSAR	48	17	2.8	Act	TLD-700
GAT	57	24	2.4	TLD	TLD-700
GAT	60	24	2.5	Act	TLD-700
SRP	51	21	2.4	Act	TLD-700
SRP	-	22	2.3	-	TLD-CaSO ₄

^aNeutron doses represent wet tissue kerma unless otherwise indicated and are given in units of 10^{-2} Gy (1 rad).

^bNeutron dose represents element 57 dose with the $^1\text{H}(n,\gamma)^2\text{H}$ component excluded.

Table 6. Measurements at air stations for pulse no. 3

Yield: 8.38 (10^{16}) fissions

Shield: 13-cm steel

Study group	Neutron dose, 10^{-2} Gy ^a	Gamma dose, 10^{-2} Gy	Dn/D γ	Detector system	
				neutron	gamma
Reference	146	19	7.7	-	-
Reference	150 ^b	-	-	-	-
DOSAR	128	17	7.5	Act	TLD-700
GAT	110	16	6.9	TLD	TLD-700
SRP	132	16	8.3	Act	TLD-700

^aNeutron doses represent wet tissue kerma unless otherwise indicated and are given in units of 10^{-2} Gy (1 rad).

^bNeutron dose represents element 57 dose with the $^1\text{H}(n,\gamma)^2\text{H}$ component excluded.

Table 7. Measurements on phantoms for pulse no. 1

Yield: $9.05 (10^{16})$ fissions

Shield: none

Study group	Neutron dose, 10^{-3} Gy ^a	Gamma dose, 10^{-3} Gy	Basis for estimating	
			neutron dose	gamma dose
Reference	415	101	-	-
Reference	380 ^b	-	-	-
DOSAR	439	104	NaAct ^c	TLD-700
DOSAR	438	-	HAct ^d	-
GAT	285 ^b	128	Act	TLD-700
GAT	390	-	TLD	-
LLNL	390	117	ACT	TLD-700
LLNL	390	-	TLD-albedo	-
LLNL	390	-	Na+HAct ^e	-
SRP	260 ^b	84	Act	TLD-700
SRP	390 ^b	95	NaAct	TLD-CaSO ₄

^aNeutron doses represent element 57 values unless otherwise indicated and are given in units of 10^{-3} Gy (1 rad).

^bNeutron dose represents wet tissue kerma.

^cBlood sodium activation.

^dHair activation.

^eCombination of hair and sodium activation.

Table 8. Measurements on phantoms for pulse no. 2

Yield: $6.12 (10^{16})$ fissions

Shield: 20-cm concrete

Study group	Neutron dose, 10^{-2} Gy ^a	Gamma dose, 10^{-2} Gy	Basis for estimating	
			neutron dose	gamma dose
Reference	61	33	-	-
Reference	64 ^b	-	-	-
DOSAR	52	32	NaAct ^c	TLD-700
DOSAR	50	-	HAct ^d	-
GAT	57 ^b	41	Act	TLD-700
GAT	63	-	TLD	-
LLNL	69	46	ACT	TLD-700
LLNL	80	-	TLD-albedo	-
LLNL	61	-	Na+HAct ^e	-
SRP	54 ^b	32	Act	TLD-700
SRP	68 ^b	29	NaAct	TLD-CaSO ₄

^aNeutron doses represent element 5% values unless otherwise indicated and are given in units of 10^{-2} Gy (1 rad).

^bNeutron dose represents wet tissue kerma.

^cBlood sodium activation.

^dHair activation.

^eCombination of hair and sodium activation.

Table 9. Measurements on phantoms for pulse no. 3

Yield: $8.38 (10^{16})$ fissions

Shield: 13-cm steel

Study group	Neutron dose, 10^{-3} Gy ^a	Gamma dose, 10^{-3} Gy	Basis for estimating	
			neutron dose	gamma dose
Reference	150	44	—	—
Reference	174 ^b	—	—	—
DOSAR	141	33	NaAct ^c	TLD-700
DOSAR	125	—	HAct ^d	—
GAT	130 ^b	41	Act	TLD-700
GAT	130	37	TLD	TLD-700
LLNL	140	51	ACT	TLD-700
LLNL	210	—	TLD-albedo	—
LLNL	170	—	Na+HAct ^e	—
SRP	165 ^b	46	Act	TLD-700
SRP	188 ^b	38	NaAct	TLD-CaSO ₄

^aNeutron doses represent element 57 values unless otherwise indicated and are given in units of 10^{-3} Gy (1 rad).

^bNeutron dose represents wet tissue kerma.

^cBlood sodium activation.

^dHair activation.

^eCombination of hair and sodium activation.

Table 10. Summary of results of neutron measurements at air stations and on phantoms

Pulse No.	Dosemeter location (spectrum)	Neutron dose, 10^{-2} Gy ^a				Reference ^e
		Activation ^b	Sodium/Hair ^c	TLD and albedo	All ^d	
1	Air (bare)	294 \pm 60 (3) ^f	-	280(1)	291 \pm 50 (4)	362
2	Air (concrete)	53 \pm 6 (3)	-	57 (1)	54 \pm 5 (4)	53
3	Air (steel)	130 \pm 3 (2)	-	110 (1)	123 \pm 12 (3)	146
1	Phantom (bare)	312 \pm 69 (3)	414 \pm 28 (4)	390 \pm 0 (2)	375 \pm 62 (9)	436
2	Phantom (concrete)	60 \pm 8 (3)	58 \pm 8 (4)	72 \pm 12 (2)	62 \pm 10 (9)	73
3	Phantom (steel)	145 \pm 18 (3)	156 \pm 28 (4)	170 \pm 57(2)	155 \pm 30 (9)	179

^aValues are average doses based on data shown in Tables 4-6 (air) and Tables 7-9 (phantom) and are given in units of 10^{-2} Gy (1 rad).

^bIncludes only foil activation and threshold detector unit data.

^cBlood sodium and hair activation data.

^dIncludes data from all detector types.

^eReference values given in terms of wet tissue kerma for air station measurements and in terms of element 57 dose for phantom measurements.

^fMean of reported results \pm one standard deviation (number of reported measurements).

Table 11. Normalized average measured neutron doses and associated percent standard deviations^a

Pulse No.	Dosemeter location (spectrum)	Normalized neutron dose (percent standard deviation) ^b			
		Activation ^b	Sodium/Hair ^c	TLD and albedo	All ^c
1	Air (bare)	0.81 (20)	-	0.97 ^d	0.80 (17)
2	Air (concrete)	1.00 (11)	-	1.08 ^d	1.02 (9)
3	Air (steel)	0.89 (2)	-	0.75 ^d	0.84 (9)
1	Phantom (bare)	0.71 (22)	0.95 (7)	0.89 (0)	0.86 (16)
2	Phantom (concrete)	0.82 (13)	0.79 (14)	0.98 (17)	0.84 (16)
3	Phantom (steel)	0.81 (12)	0.87 (18)	0.95 (33)	0.87 (19)

^aBased on data shown in Table 10.

^bAverage reported measured dose divided by the reference value (percent of standard deviation about the mean).

^cIncludes results for all measurement methods.

^dOne measurement reported.

Table 12. Summary of results of gamma dose measurements at air stations and on phantoms

Pulse No.	Dosemeter location (spectrum)	Gamma dose, 10^{-3} Gy ^a		D_n/D_γ	
		TLD ^b	Reference	Measured ^c	Reference ^d
1	Air (bare)	62 ± 6^e	59	4.7 ± 1.5	6.1
2	Air (concrete)	22 ± 3	20	2.4 ± 0.4	2.6
3	Air (steel)	16 ± 1	19	7.7 ± 0.8	7.8
1	Phantom (bare)	106 ± 17	101		
2	Phantom (concrete)	36 ± 7	33		
3	Phantom (steel)	41 ± 7	44		

^aValues are average doses based on data shown in Tables 4-6 (air) and Tables 7-9 (phantoms) and are given in units of 10^{-3} Gy (1 rad).

^bAll reported gamma measurements were made with TLD-700 or CaSO_4 dosimeters.

^cAverage of all reported neutron kerma measurements divided by the average of all reported gamma dose measurements.

^dData from Table 2.

^eMean \pm one standard deviation.

Table 13. Normalized average measured gamma doses and associated percent standard deviations^a

Pulse No.	Shield	Dosemeter Location	Normalized dose (percent standard deviation) ^b
1	None	air	1.05 (9)
2	Concrete	air	1.08 (13)
3	Steel	air	0.86 (4)
1	None	phantom	1.05 (16)
2	Concrete	phantom	1.09 (19)
3	Steel	phantom	0.93 (17)

^aBased on data given in Table 12.

^bAverage reported measured dose divided by the reference value (percent of standard deviation about the mean).

Table 14. Comparison of doses measured on phantoms with those measured at air stations

Pulse No.	Shield	Ratio of phantom dose to air station dose			
		Neutron		Gamma	
		Measured ^a	Reference ^b	Measured ^c	Reference ^b
1	None	1.29 \pm 0.28 ^d	1.05	1.71 \pm 0.36	1.70
2	Concrete	1.14 \pm 0.43	1.20	1.63 \pm 0.44	1.62
3	Steel	1.26 \pm 0.41	1.19	2.56 \pm 0.35	2.33

^aBased on data given in Table 10 for all reported dose measurements.

^bBased on experimental data obtained during the previous 19 intercomparison studies.

^cBased on data given in Table 12 for all reported dose measurements.

^dPhantom dose divided by air dose \pm one standard deviation about the mean.

Table 15. Summary of final measured results relative to regulatory criteria^a

Pulse number	Dosemeter location (shield)	Neutron measurements		Gamma measurements	
		Number of measurements	Number meeting criterion ^b	Number of measurements	Number meeting criterion ^b
1	Air (none)	4	3 (75)	5	5 (100)
2	Air (concrete)	4	4 (100)	5	5 (100)
3	Air (steel)	3	3 (100)	3	3 (100)
1	Phantom (none)	9	7 (78)	5	4 (80)
2	Phantom (concrete)	9	6 (67)	5	3 (60)
3	Phantom (steel)	9	6 (67)	6	5 (83)
Total		38	29 (75)	29	25 (86)

^aCriteria presented in ANSI N13.3 which suggest accuracies of $\pm 25\%$ for neutron doses and $\pm 20\%$ for gamma doses.

^bNumber of measurements meeting the above mentioned criteria (percent meeting criteria).

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APPENDIX A

PROGRAM**TWENTY-FIRST NUCLEAR ACCIDENT DOSIMETRY INTERCOMPARISON STUDY**

August 6-10, 1984

<u>Date</u>	<u>Time</u>	<u>Activity</u>
August 6 (Monday)	9:00 AM	Welcome and Orientation, C. S. Sims (ORNL)
	9:30	Review of the study program, R. E. Swaja (ORNL)
	10:00	Tour of DOSAR Facility and HPRR
		LUNCH
	1:00 PM	Lecture: <u>Introduction to Criticality Accident Dosimetry</u> , R. E. Swaja (ORNL)
	2:00	Lecture: <u>Neutron Activation Principles</u> , R. T. Greene, (ORNL)
	3:00	Preparation for Pulse No. 1
<hr/>		
August 7 (Tuesday)	8:30 AM	Final setup of dosimetry for Pulse No. 1
	9:00	Lecture: <u>Reporting Accident Doses</u> , C. S. Sims (ORNL)
	10:00	Observation of Pulse operation of HPRR
	10:30	Pulse No. 2 (unshielded)
	11:00	Group photograph
	11:30	Collect dosimeters
		LUNCH
August 8 (Wednesday)	1:00 PM	Analysis of data and preparation for Pulse No. 2 - Demonstration of foil activation analysis
<hr/>		
August 8 (Wednesday)	8:30 AM	Final setup of dosimeters for Pulse No. 2
	9:00	Lecture: <u>Biological Perspective of Occupational Exposures</u> , T. D. Jones, (ORNL)
	10:00	Lecture: <u>Medical Aspects of Radiation Accidents</u> , S. A. Fry (ORAU)

10:30 Pulse No. 2 (20-cm concrete shield)
11:00 Collect dosimeters

 LUNCH

1:00 PM Analysis of data and preparation for Pulse No. 3
 Demonstration of hair and blood sodium activation
 analysis

August 9 8:00 AM Final setup of dosimeters for Pulse No. 3
(Thursday)
 9:00 Lecture: Progress in the Analysis of the Japanese
 Bomb Survivor Data, G. D. Kerr, (ORNL)

 10:00 Pulse No. 3 (13-cm steel shield)

 Discussion: Requirements and problems associated
 with nuclear accident monitoring at
 participating facilities

 11:00 Collect dosimeters

 LUNCH

 1:00 Analysis of data

August 10 9:00 AM Presentation of preliminary dose estimates and
(Friday) discussion of results

 10:00 Discussion: The future of accident monitoring
 and dosimetry

 11:00 Final critique

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APPENDIX B

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