

SNS OPERATIONS PROCEDURES MANUAL



SNS-OPM-ATT 2.B-10.a Reviewed Safety Issue Documentation Form

Before using a printed copy, check the *last modified date and revision number* against the **OFFICIAL COPY** on the SNS-OPM website.

Signed archival copies are maintained by the SNS Document Control Center.

SNS OPM Procedures in which this Attachment is used.		
2.B-10		

Hand Processed Changes

<u>HPC No.</u>	<u>Date</u>	<u>Page Nos.</u>	<u>Initials</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Approved: _____
Accelerator Safety Program Lead Date

Approved: _____
Neutron Technologies Division Director Date

Approved: _____
Research Accelerator Division Director Date

Approved: _____
SNS Operations Manager Date

Contact: Accelerator Safety Program Lead
[SNS-OPM Editor](#)

SNS-OPM-ATT 2.B-10.a
Reviewed Safety Issue Documentation Form

Document Number

Title

Question: Does the proposed activity or discovered condition introduce accelerator-specific hazards that are not adequately managed by the current FSADs and approved ASE?

Answer: YES NO

For a proposed activity, if answer is YES:

- DOE approval is required prior to implementation of proposed activity.

For a discovered condition, if answer is YES:

- Suspend impacted operations and put in a safe and stable configuration.
- Prepare a response plan to address the discovered condition and submit it to DOE for approval.
- Once all required actions from the DOE-approved response plan have been completed, evidence of completion must be submitted to DOE with a request for approval to resume suspended operations.

<u>Required Signatures</u>	<u>Additional SME Signatures</u>
<hr/> Preparer <i>To be completed and signed by personnel that have completed USI Preparer Training</i>	<hr/> Title:
<hr/> Reviewer <i>To be completed and signed by personnel that have completed USI Reviewer Training</i>	<hr/> Title:
<hr/> Approver <i>SNS Operations Manager or delegate</i>	<hr/> Title: <hr/> Title:

Once approved, a USI becomes an RSI

Executive Summary

USI Identification and Recognition Form Document Number

RSI Actions

#	Action	ACTS
1		
2		
3		
4		
5		
6		

Question: Does the proposed activity or discovered condition affect information presented in the current FSADs?

Answer: YES NO

If answer is YES, list affected sections and suggested changes in the blank provided