

School Radon Testing Reporting Form

According to Minnesota Statute 123B.571 subd. 3, a school district that has tested its school buildings for the presence of radon shall report the results of its tests to the Department of Health. Please use this form to submit information about the most recent round or cycle of testing conducted for each building.

Instructions

1. Complete one form for each building tested. In this case, a building is defined as an occupied facility with a unique address. This includes administrative buildings.
2. Include this form, raw data (e.g. laboratory report) and a building map.
3. Submit this form when all work is completed for a round of testing. This includes reporting to the school board, and follow-up testing and post-mitigation testing, if applicable.
4. Email information to health.indoorair@state.mn.us.

Contact Information

(Submitting this report)

Name Wendy German

Mailing Address 7362 E Point Douglas Rd Cottage Grove, MN 55016

Phone 651-425-6277 Email wgerman@sdwashhd.org

Person(s) Deploying or Retrieving Test Devices¹

Name Wendy German Organization/Company Meridian. RMEA-0047

Name _____ Organization/Company _____

Name _____ Organization/Company _____

School Board Reporting

Were all the results reported at a school board meeting? Yes No

¹ List all individuals that deployed (placed) or retrieved (picked up) test devices including initial, follow-up, and post-mitigation testing. Additional names can be added to notes at end of this form.

SCHOOL RADON TESTING REPORTING FORM

Initial Radon Testing

School Building Name Newport Elementary

School District & District Number South Washington County - District 833

Building Address 851 6th Ave, Newport, MN 55055

Test Kit Manufacturer Air Check Device name PRD Check

Date of Kit Retrieval (MM/DD/YY) 03/31/22 Length of Test (days) 2

How many rooms were tested? 34

Does the test period include weekends? Yes No

Does the test period include school breaks or holidays? Yes No

Was HVAC operating under occupied conditions? Yes No

Were test devices deployed in all occupied and intended to be occupied rooms in contact with the ground, and, if applicable, 10% of upper floor rooms? Yes No

Were valid measurements obtained in all occupied and intended to be occupied rooms in contact with the ground, and, if applicable, 10% of upper floor rooms?² Yes No

If no, were all results obtained under 2.0 pCi/L and were there sufficient valid measurements obtained that allowed for no further testing?³ Yes No

How many rooms had results ≥ 4 pCi/L? 0

* missing test, gymnasium - retest in november

² This includes rooms, offices, classrooms, and other general use areas. Ground contact means: 1) rooms that have floors or walls in contact with the ground; and 2) rooms that are closest to the ground over untested ground-contact locations, such as a crawl space, utility tunnel, parking garage and other non-habitable space that is in contact with ground. Intended to be occupied rooms are locations where there are plans to occupy rooms even though they are unoccupied at the time of the testing. In addition, if the building has upper floors, at least 10% of these rooms must be tested.

³ Section 6.2 of the ANSI/AARST standard allows for a specific small number of invalid measurements (e.g., test kits missing, damaged, etc) if all the valid test results were under 2.0 pCi/L. Review this section of the standard and evaluate how many rooms needed testing and how many had valid results. If there were too many invalid results, this means additional testing was required in these locations and answer this question as 'no'.

SCHOOL RADON TESTING REPORTING FORM

Follow-up Testing, Mitigation, & Post-Mitigation Testing

If one or more rooms tested ≥ 4 pCi/L, please answer the questions below.

How many rooms had follow-up testing? _____

Number of rooms with follow-up results:

≥ 4 pCi/L _____ < 4 pCi/L _____

Of the rooms that had test results ≥ 4 pCi/L, how many rooms were:

mitigated by diluting or pressurizing the soil or indoor air

(not active soil depressurization)? _____

mitigated by installing active soil depressurization system(s)? _____

reduced by adjusting the HVAC system? _____

Individual who installed mitigation

Name _____ Organization/Company _____

What was the cost of the installation and/or HVAC service work, to mitigate radon? _____

What is the known or anticipated annual operating cost of mitigation (estimate)? _____

After radon mitigation, how many rooms were re-tested?⁴ _____

Post-mitigation results (# of rooms):

≥ 4 pCi/L _____ < 4 pCi/L _____

Notes

Minnesota Department of Health | Environmental Health | Indoor Air Unit

health.indoorair@state.mn.us

www.health.state.mn.us

June 2021

To obtain this information in a different format, call: 651-201-4601.

⁴ The building must be tested, to verify reduction and ensure mitigation has not increased radon in rooms that used to be low.

April 4, 2022

**** LABORATORY ANALYSIS REPORT ****

Radon test result report for:

833

NES

Kit #	Room Id	Started	Ended	pCi/L	Analyzed
11152896	101	2022-03-29 @ 11:00 am	2022-03-31 @ 12:00 pm	1.7 ± 0.4	2022-04-04
11152895	102	2022-03-29 @ 11:00 am	2022-03-31 @ 12:00 pm	0.8 ± 0.4	2022-04-04
11152894	103	2022-03-29 @ 11:00 am	2022-03-31 @ 12:00 pm	0.8 ± 0.4	2022-04-04
11152589	106	2022-03-29 @ 11:00 am	2022-03-31 @ 12:00 pm	< 0.3	2022-04-04
11152586	107	2022-03-29 @ 11:00 am	2022-03-31 @ 12:00 pm	< 0.3	2022-04-04
11152585	108	2022-03-29 @ 11:00 am	2022-03-31 @ 12:00 pm	< 0.3	2022-04-04
11152595	109	2022-03-29 @ 11:00 am	2022-03-31 @ 12:00 pm	0.9 ± 0.4	2022-04-04
11152583	110	2022-03-29 @ 11:00 am	2022-03-31 @ 12:00 pm	0.6 ± 0.4	2022-04-04
11152584	111	2022-03-29 @ 11:00 am	2022-03-31 @ 12:00 pm	0.7 ± 0.4	2022-04-04
11152900	112	2022-03-29 @ 11:00 am	2022-03-31 @ 12:00 pm	1.0 ± 0.4	2022-04-04
11152899	113	2022-03-29 @ 11:00 am	2022-03-31 @ 12:00 pm	0.5 ± 0.4	2022-04-04
11152582	114	2022-03-29 @ 11:00 am	2022-03-31 @ 12:00 pm	0.6 ± 0.4	2022-04-04
11152581	115	2022-03-29 @ 11:00 am	2022-03-31 @ 12:00 pm	< 0.3	2022-04-04
11152580	116	2022-03-29 @ 11:00 am	2022-03-31 @ 12:00 pm	< 0.3	2022-04-04
11152579	117	2022-03-29 @ 11:00 am	2022-03-31 @ 12:00 pm	0.7 ± 0.4	2022-04-04
11152578	118	2022-03-29 @ 11:00 am	2022-03-31 @ 12:00 pm	0.5 ± 0.4	2022-04-04
11152577	118A	2022-03-29 @ 11:00 am	2022-03-31 @ 12:00 pm	0.9 ± 0.4	2022-04-04
11152576	119	2022-03-29 @ 11:00 am	2022-03-31 @ 12:00 pm	< 0.3	2022-04-04
11152575	120	2022-03-29 @ 11:00 am	2022-03-31 @ 12:00 pm	< 0.3	2022-04-04
11152572	121	2022-03-29 @ 11:00 am	2022-03-31 @ 12:00 pm	1.0 ± 0.4	2022-04-04
11152571	121	2022-03-29 @ 11:00 am	2022-03-31 @ 12:00 pm	0.8 ± 0.4	2022-04-04
11152570	122	2022-03-29 @ 11:00 am	2022-03-31 @ 12:00 pm	0.9 ± 0.4	2022-04-04
11152569	123	2022-03-29 @ 11:00 am	2022-03-31 @ 12:00 pm	< 0.3	2022-04-04
11152568	124	2022-03-29 @ 11:00 am	2022-03-31 @ 12:00 pm	< 0.3	2022-04-04
11152567	125	2022-03-29 @ 11:00 am	2022-03-31 @ 12:00 pm	< 0.3	2022-04-04
11152566	126	2022-03-29 @ 11:00 am	2022-03-31 @ 12:00 pm	0.7 ± 0.4	2022-04-04
11152565	127	2022-03-29 @ 11:00 am	2022-03-31 @ 12:00 pm	< 0.3	2022-04-04
11152597	135	2022-03-29 @ 11:00 am	2022-03-31 @ 12:00 pm	< 0.3	2022-04-04
11153082	301Z	2022-03-29 @ 2:00 pm	2022-03-31 @ 3:00 pm	< 0.3	2022-04-04
11153080	302Z	2022-03-29 @ 2:00 pm	2022-03-31 @ 3:00 pm	< 0.3	2022-04-04
11153085	303Z	2022-03-29 @ 2:00 pm	2022-03-31 @ 3:00 pm	< 0.3	2022-04-04
11152897	CAFETERIA	2022-03-29 @ 11:00 am	2022-03-31 @ 12:00 pm	0.6 ± 0.4	2022-04-04
11152898	CAFETERIA	2022-03-29 @ 11:00 am	2022-03-31 @ 12:00 pm	0.8 ± 0.4	2022-04-04
11152596	CUSTODIAN	2022-03-29 @ 11:00 am	2022-03-31 @ 12:00 pm	2.1 ± 0.4	2022-04-04
11152591	GYM	2022-03-29 @ 11:00 am	2022-03-31 @ 12:00 pm	0.9 ± 0.4	2022-04-04
11152573	LOUNGE	2022-03-29 @ 11:00 am	2022-03-31 @ 12:00 pm	1.0 ± 0.4	2022-04-04
11152574	LOUNGR	2022-03-29 @ 11:00 am	2022-03-31 @ 12:00 pm	1.0 ± 0.4	2022-04-04

April 4, 2022

**** LABORATORY ANALYSIS REPORT ****

Radon test result report for:

833
NES

Kit #	Room Id	Started	Ended	pCi/L	Analyzed
11152564	MEDIA CENTER	2022-03-29 @ 11:00 am	2022-03-31 @ 12:00 pm	0.6 ± 0.4	2022-04-04
11152893	NURSE	2022-03-29 @ 11:00 am	2022-03-31 @ 12:00 pm	0.7 ± 0.4	2022-04-04
11152891	OFFICE	2022-03-29 @ 11:00 am	2022-03-31 @ 12:00 pm	< 0.3	2022-04-04
11152892	PRINCIPAL	2022-03-29 @ 11:00 am	2022-03-31 @ 12:00 pm	< 0.3	2022-04-04

Air Chek 1936 Butler Bridge Rd, Mills River, NC 28759-3892 Phone: (828) 684-0893 Fax: (828) 684-8498