

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 the tests to the Department of Health. Please use this form to submit information about the most recent round or cycle of testing for each building.

Instructions

1. Complete one form for each building tested. A building is defined as an occupied facility with a unique address. This includes administrative buildings. Please report the MDE School Number.
2. Include this form, reports, 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, follow-up testing, and mitigation if applicable.
4. Email information to health.indoorair@state.mn.us

Contact Information

(Person submitting this report)

Name: _____

Mailing Address: _____

Phone: _____ Email: _____

Person(s) Deploying or Retrieving Test Devices

List all individuals the placed or picked-up test devices during initial, follow-up, and post-mitigation testing. Additional names can be added in the notes at the end of the form.

Name: _____ Organization/Company: _____

Name: _____ Organization/Company: _____

Name: _____ Organization/Company: _____

School Board Reporting

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

Initial Radon Testing

School Building Name: _____ MDE School No.¹: _____

School District Name & District Number: _____

Building Address: _____

Test Kit Manufacturer & Device Name: _____

Date of Kit Retrieval (MM/DD/YYYY): _____ Length of Test (days): _____

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 or intended to be occupied rooms in contact with the ground, and, if applicable, 10% of upper floor rooms?² Yes No

Were sufficient valid measurements obtained that allow for no further testing?³ Yes No

How many rooms were tested? _____

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

¹ The MDE school number is a 9-digit number in the format XXXX-XX-XXX. The first 4 digits are the organization number, followed by a 2-digit organization type, followed by a 3-digit site/school number. If you are unsure of the school ID number, please search [MDE-ORG \(https://public.education.mn.gov/MdeOrgView/search/tagged/MDEORG_DISTRICT_SCHOOL\)](https://public.education.mn.gov/MdeOrgView/search/tagged/MDEORG_DISTRICT_SCHOOL) by district/charter name and click District View to see a list of the associated schools/find the school number. Example: Anoka High School is 0011-01-0001.

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 the ground. Intended to be occupied rooms are locations where there are plans to occupy rooms even though they are unoccupied at the time of testing. In addition, if the building has upper floors, at least 10% of those upper rooms need to be tested.

³ Section 6.2 of the ANSI/AARST standard allows for a specific small number of invalid measurements (e.g. missing or damaged test kits). 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 mean additional testing was required in these locations and answer this question as 'no'

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

If one or more rooms tested ≥ 4.0 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 with follow-up 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? _____

Individuals Who Installed Mitigation:

Name: _____ Organization/Company: _____

Name: _____ Organization/Company: _____

What was the cost of the installation and/or HVAC service work to mitigation 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

February 12, 2025

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

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