Facility Radiation Safety Procedures & Rules

Facility Name: _____

Facility IDOH Registration #: _____

Effective Date: _____

1. Operator Qualifications & Compliance

Authorized Personnel: Only individuals who hold a valid, unexpired Indiana Department of Health (IDOH) Radiologic Operator License/Certificate (or licensed practitioners/dentists) are permitted to operate radiation-producing equipment.

Supervision of Permitholders: Temporary permit holders or students must operate equipment strictly under the direct supervision of a licensed operator.

Regulatory Compliance: Operations shall conform to all applicable requirements of 410 IAC 5 (Radiological Health) and 410 IAC 5-6.1 (X-Rays in the Healing Arts).

2. Operator & Personnel Protection

Protected Position: During every exposure, operators must remain behind a permanent protective barrier, a whole-body protective booth, or stand at least 6 feet (2 meters) away from the useful beam and tube head.

Visual/Auditory Monitoring: Operators must maintain constant visual observation and communication with the patient throughout the exposure.

Personal Protective Equipment (PPE): Lead aprons and thyroid collars (\ge 0.25\text{ mm} lead equivalent) must be readily available and utilized by any personnel required to remain in the room during an exposure.

Patient Holding Restriction: Personnel shall not routinely hold patients during exposures. Holding is strictly restricted to emergency clinical necessities, and any individual holding a patient must wear protective aprons and gloves (\ge 0.25\text{ mm} lead equivalent).

3. Patient Safety & ALARA Principles

Beam Limitation (Collimation): The x-ray beam shall be restricted to the clinical area of interest to minimize unnecessary exposure.

Technique Parameters: Standardized technique charts (kVp, mA, exposure time) must be posted or stored directly at the control panel to ensure consistent, optimized exposures.

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Patient Shielding: Protective aprons and shielding should be utilized in accordance with clinical protocol, particularly for pediatric patients and individuals of childbearing potential.

Retake Analysis: Accidental or diagnostic retakes must be minimized and reviewed to identify underlying equipment or technique issues.

4. Pregnancy Screening Policy

Patient Screening: Patients of childbearing potential shall be verbally screened regarding the possibility of pregnancy prior to radiographic examination.

Occupational Protocol: Staff members who voluntarily declare a pregnancy in writing will be managed in accordance with state occupational dose limit guidelines.

5. Equipment Safety & Incident Protocol

Pre-Use Inspection: Operators must visually check positioning arms, cables, tube housings, and control switches for mechanical or electrical defects prior to daily use.

Emergency Shutdown: If an exposure switch fails to terminate automatically, or if any electrical or mechanical fault occurs, immediately disconnect or power down the system.

Out-of-Service Tagging: Defective or unsafe equipment must be immediately tagged out of service, reported to the facility manager or Radiation Safety Officer (RSO), and logged in the facility maintenance records before being returned to clinical use.

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