

CABINET X-RAY RADIOGRAPHY CHECKLIST

(A FACILITY checklist is not required with this form.)

Facility _____ Date Surveyed _____

Registration number _____ - _____ Room number _____ Control number _____ Inspector _____

Facility Email Address _____ Person Interviewed _____

Control panel manufacturer and serial no. _____

Tubehead manufacturer and serial no. _____

Choose Y for yes (compliant), N for no (noncompliant) and N/A for not applicable. (All reg references preceded by 0400-02-)

- | | Y | N | N/A | | |
|-----|-----------------------|-----------------------|-----------------------|---|---|
| 1. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | Copy of registration form available for this unit? (04-.11(1)(d)) | <input type="checkbox"/> Unit is in storage and not being used. |
| 2. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | Is the information on the registration form for this unit accurate as to address, ownership, possessor and location? (10-.24(5)) | |
| 3. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | Are all of the units registered under this registration possessed by the registrant? (10-.24(5)) | |
| 4. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | Are all of the units possessed at this facility registered? (10-.24(1)) | |
| 5. | <input type="radio"/> | <input type="radio"/> | | Regulations Present. (04-.11(1)(a)) | |
| 6. | <input type="radio"/> | <input type="radio"/> | | “Notice to Employees” (RHS 8-3) posted. (04-.11(1)(g)) | |
| 7. | <input type="radio"/> | <input type="radio"/> | | Switch at control panel and any remote switch labeled “CAUTION – RADIATION, THIS EQUIPMENT PRODUCES RADIATION WHEN ENERGIZED”. (05-.111(11)) | |
| 8. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | Operation not possible unless all openings are closed with interlocks activated. (08-.03(3)(a))
<i>[For airport baggage system type units, entrance and exit openings need not be interlocked – All other openings shall be interlocked. (08-.03(3)(d))]</i> | |
| 9. | <input type="radio"/> | <input type="radio"/> | | Cabinet is shielded such that every exterior location meets the conditions for an unrestricted area. (05-.60(1) and 08-.03(3)(b)) | |
| 10. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | The cabinet is so constructed or arranged as to exclude the entrance of any body part on an individual during radiation. (08-.03(3)(c))
<i>[Airport baggage system type units excluded from this requirement; however, the operator shall be present during operation to ensure no individual enters the device through the baggage entrance or exit openings. (08-.03(1)(d))]</i> | |
| 11. | <input type="radio"/> | <input type="radio"/> | | Operator has copy of operating procedures. (08-.08(1)(a)) | |
| 12. | <input type="radio"/> | <input type="radio"/> | | Operator has been instructed in the operating procedures. (08-.08(1)(b)) | |
| 13. | <input type="radio"/> | <input type="radio"/> | | X-ray machine secured when unattended <i>[room or device locked]</i> . (06-.04(5)) | |

Describe the use of this machine (i.e., airport baggage unit, looking at structural flaws, biopsy unit, etc.).