# University Health and Safety Form

# Ionising Radiation critical exam

The following information is required upon the installation or movement of any existing equipment that is used to generate Ionising Radiation, and where there is doubt regarding the effectiveness of built in safety devices or shielding. This information is a legal requirement of Regulation 32(2) of the Ionising Radiation Regulations 2017.

Once the form has been completed, it must be sent to the University Radiation Protection Officer for review. A copy is to be retained with the relevant equipment for a minimum period of 2 years.

|  |  |
| --- | --- |
| **1. DEVICE DETAILS** | |
| **Department:** |  |
| **Faculty** |  |
| **Equipment Location:** |  |
| **Equipment Model:** |  |
| **Serial No:** |  |

|  |  |  |
| --- | --- | --- |
| **2. X-RAY INDICATOR LAMPS** | | |
| **Warning lamps should correctly indicate the current condition of the device.** | | |
| **Device Off / Safe** | **Device about to operate?** | **Radiation being emitted?** |
| Yes / No | Yes / No | Yes / No |

|  |  |
| --- | --- |
| **3. INTERLOCK OPERATION** | |
| **The opening of each door / hatch should cause the emission to cease, and the emission should not resume on closing the door / hatch.** | |
| **Interlock 1** | |
| Description: | Pass / Fail |
| **Interlock 2** | |
| Description: | Pass / Fail |
| **Interlock 3** | |
| Description: | Pass / Fail |

|  |  |
| --- | --- |
| **4. RADIATION SURVEY** | |
| **A full survey of the device must be completed, with any appropriate diagrams attached. See Ionising Radiation Critical Exam Survey.** | |
| **Maximum Dose Rate (µSv / hr)** | **Point No. (See survey on reverse)** |
|  |  |

|  |  |
| --- | --- |
| **5. ADMINISTRATIVE INFORMATION** | |
| **Examination completed by** | **Date of Exam** |
|  |  |

A full survey of the instrument is to be conducted after installation / movement. A suitable instrument is to be used and all dose rates are to be recorded in uSv / hr.

|  |  |  |  |
| --- | --- | --- | --- |
| **1. SURVEY INFORMATION** | | | |
| **Instrument used** | **Instrument Serial No.** | | **Date monitor calibrated** |
|  |  | |  |
| **Background Reading (uSv / hr)** | | **Time of survey** | |
|  | |  | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **1. EXAMINATION SURVEY** | | | | | |
|  | **Description of Point** | **Dose Recorded** |  | **Description of Point** | **Dose Recorded** |
| **Point 1** |  |  | **Point 11** |  |  |
| **Point 2** |  |  | **Point 12** |  |  |
| **Point 3** |  |  | **Point 13** |  |  |
| **Point 4** |  |  | **Point 14** |  |  |
| **Point 5** |  |  | **Point 15** |  |  |
| **Point 6** |  |  | **Point 16** |  |  |
| **Point 7** |  |  | **Point 17** |  |  |
| **Point 8** |  |  | **Point 18** |  |  |
| **Point 9** |  |  | **Point 19** |  |  |
| **Point 10** |  |  | **Point 20** |  |  |

If any corrected doses are less than 0.1uSv / hr, then the result should be recorded as ‘Below Detectable Threshold’ (BDT).

Please attach a diagram showing the points as surveyed.