Name of Policy: **Use of Radiation Protective Apparel when Assisting in a Procedure** **Policy Number**: 3364-135-095 **Approving Officer**: Assistant Professor & Deputy Clinical Service Chief, Director Radiology **Responsible Agent**: Assistant Professor & Deputy Clinical Service Chief, Director Radiology **Scope**: University of Toledo Medical Center Radiology	UTOLEDO HEALTH **Effective date:** **Original effective date**: 7/1/1981
Key words: Radiation protective apparel, Ionizing radiation, Procedure, Thyroid Shield, Fluoroscopy	

☐	New policy proposal	☒	Minor/technical revision of existing policy
☐	Major revision of existing policy	☐	Reaffirmation of existing policy

(A) Policy Statement

All hospital personnel must wear radiation protective aprons and related apparel such as a thyroid shield during fluoroscopy or when any situation demands performance or assistance with a diagnostic procedure which may expose them to ionizing radiation. This same protection must be offered to non-hospital personnel assisting with procedures (parents, relatives, etc.).

(B) Purpose of Policy

To protect employees, visitors, etc. from undue exposure to ionizing radiation.

(C) Scope

A lead apron or other related radiation protective apparel (gloves, thyroid shield, etc.) will be worn by any person, whether employee or other, in any environment where there is a risk of exposure to primary or secondary ionizing radiation.

1) Except for patients who cannot be moved out of the room, only the staff, ancillary personnel, or other persons needed for the medical procedure or training will be in the room during the radiologic procedure. Other than the patient being examined:

    a) All individuals will be positioned such that no part of the body will be struck by the useful beam unless protected by not less than 0.5 millimeter lead equivalent material.

    b) The x-ray operator, other staff, ancillary personnel, and other persons needed for the medical procedure will be protected from the direct scatter radiation by protective aprons or whole-body protective barriers of not less than 0.25 millimeter lead equivalent material.

    c) Human patients who cannot be removed from the room will be protected from the direct scatter radiation by whole body protective barriers of not less than 0.25 millimeter lead

equivalent material or will be so positioned that the nearest portion of the body is at least two meters (6.5 feet) from both the tube head and the nearest edge of the image receptor.

Approved by: _____ Nathan Egbert, MD Assistant Professor & Deputy Clinical Service Chief _____ Date _____ Ryan Landis, BSRT (R)(CT) Director, Radiology _____ Date _____ Joseph Agosti Radiation Safety Officer _____ Date _____ Daniel Barbee Chief Executive Officer UTMC _____ Date *Review/Revision Completed by:* Ryan Landis, BSRT (R)(CT)	**Policies Superseded by This Policy:** • Initial effective date: 7/1/1981 Review/Revision Date: 8/24/1990 7/1/1993 4/26/1999 5/1/2002 9/26/2005 5/28/2008 5/20/2011 5/8/2014 10/30/2015 11/1/2018 11/1/2021 12/1/2022 12/1/2025 Next review date: