


Name of Policy:	<u>Radiation protection and monitoring of employees</u>					
Policy Number:	3364-134-40					
Department:	Radiation Oncology					
Approving Officer:	Chief Operating Officer					
Responsible Agent:	Technical Manager, Radiation Oncology					
Scope:	Radiation Oncology					
Effective Date: 7/14/2023 Initial Effective Date: 10/1980						
<table> <tr> <td><input type="checkbox"/> New policy proposal</td> <td><input checked="" type="checkbox"/> Minor/technical revision of existing policy</td> </tr> <tr> <td><input type="checkbox"/> Major revision of existing policy</td> <td><input type="checkbox"/> Reaffirmation of existing policy</td> </tr> </table>			<input type="checkbox"/> New policy proposal	<input checked="" type="checkbox"/> Minor/technical revision of existing policy	<input type="checkbox"/> Major revision of existing policy	<input type="checkbox"/> Reaffirmation of existing policy
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(A) Policy Statement

All personnel routinely working with or around sources of ionizing radiation that are likely to receive 10% of their allowable occupational limits shall wear dosimeter badges approved by the Radiation Safety Officer. Each individual issued a dosimeter shall wear only the dosimeter to which they have been assigned.

(B) Purpose of Policy

To monitor all radiation received in the occupational environment and ensure compliance with all regulations.

(C) Procedure

1. Maintain time, distance, and shielding at all times.
2. An interlocking system for access doors to each radiotherapy room will be functioning at all times. This shuts the machine off if doors are opened during actual beam-on time.
3. To initiate dosimeter service for any individual, contact the Radiation Safety Office at 419-383-4301.
4. Whole body dosimeters shall be worn between the waist and neck, exceptions to this will be determined by the Radiation Safety Department. A TLD ring dosimeter will be worn by all personnel working with any type of radioactive material for therapeutic purposes. A TLD dosimeter shall be worn on the hand that receives the most radiation, typically the dominant hand.
5. When the dosimeters are not in use, they will be kept in an area at background radiation within the department, usually on a badge board. Dosimeters shall never leave the University of Toledo Medical Center premises.
6. Dosimeters will be exchanged by the Radiation Safety Office monthly unless otherwise specified.
7. Dosimeter reports will be promptly reviewed by the Radiation Safety Officer monthly, quarterly, and annually. Quarterly and annual exposure reports will be presented to the Radiation Safety Committee and the X-ray QA Committee by the Radiation Safety Officer.
8. Any personnel exposure exceeding 30 percent of the allowable quarterly or annual exposure limits shall be notified by the Radiation Safety Office for further investigation to determine the cause, and will be required to complete documented radiation safety training to keep future exposures as low as reasonably achievable.
9. An annual report will be given to each individual issued a dosimeter if the individual's annual occupational dose exceeds one millisievert (one hundred millirem) TEDE or one millisievert (one hundred millirem) to any individual organ or tissue; or if the individual requests his or her annual dose report.

10. All dosimeter and ring badge exposure reports will be kept on file by the Radiation Safety Office. Dose estimates will be performed by the monitoring company for all unreturned badges and reviewed by the RSO.
11. If a dosimeter is lost or suspected of being contaminated, Radiation Safety Office shall be notified by calling 419-383-4301.

Approved by:		Review/Revision Date:	
		10/1981	2/1995
		1982	1996
		1983	3/1997
		1984	4/1999
		1985	3/2002
		1986	1/2007
		1987	4/22/2010
		1988	7/1/2013
		1989	5/1/2016
		2/1990	6/1/2019
		11/1992	7/1/2022
		9/1993	7/14/2023
<i>Review/Revision Completed By:</i> <i>Michelle Giovanoli</i>		Next Review Date: 7/14/2026	
Policies Superseded by This Policy: 38-40, 3364-134-41,47			