(A) Policy Statement

Only Licensed, Registered Nuclear Medicine Technologists are authorized to dispose of radioactive materials according to the rules and regulations of the Ohio Department of Health – Bureau of Radiation Protection, the Nuclear Regulatory Commission and the University of Toledo Medical Center Radiation Safety Office.

(B) Purpose of Policy

To ensure that proper safety procedures and regulations are followed in order to eliminate the possibility of unnecessary radiation exposure to patients, visitors, or personnel.

(C) Procedure

1. All needles and syringes used in the injection of Radiopharmaceuticals will be placed in lead lined Sharps containers. Unused doses will be returned to the radiopharmacy once they have decayed down to the appropriate level as set forth in the DOT regs 49 CFR 100-199 and they have been wipe tested for removable contamination. Only empty FDG dose containers (“Pigs”) shall be returned to the radiopharmacy supplying PET Scan doses. Unused FDG doses will be placed in the Sharps container for decay.

2. The cases holding the lead “PIGS” will be surveyed at the surface and at 1 meter with a Geiger-Mueller Tube (Geiger Counter).

3. The cases and the “PIGS” will be visually checked for leakage.

4. The outside of the cases and “PIGS” will be swiped and checked for contamination using a Well Counter.

5. All other needles, syringes, IV sets, band aids, or other materials that may be contaminated with radioactive waste are to be deposited into properly labeled lead lined containers (SHARPS SHIELDS).

6. At the proper time these lead lined containers will be emptied, and the radioactive waste will be identified, dated and checked for radiation reading (mR/hr).

7. The radioactive waste will then be transferred to the properly labeled area designated by the Radiation Safety Office and stored until the required amount of time has passed according to ODH-BRP and or NRC regulations.

8. All survey, swipe, and waste disposal results will be properly recorded in the appropriate logbook or computer file. Records must be kept and maintained for a minimum of three (3) years.

9. All calibration sources, QC phantoms containing radioactive compounds, and extra doses will be kept in the lead lined storage decay module which will be locked at all times, except when in use.

10. The Hot Lab Room (1230), in the Hospital, and the PET/CT Hot Lab Room 1070D, in the Dana Center, where the shielded waste containers (Sharps) are will be locked at all times, except when in use.
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<th>Approved by:</th>
<th>Review/Revision Date:</th>
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Interim Chairman & Professor, Radiology | 5/29/2008  
5/20/2011  
5/19/2014  
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Chief Executive Officer - UTMC | Date |

Review/Revision Completed By: Haitham Elsamaloty, MD

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Policies Superseded by This Policy: R-027