

# XED safety inspection checklist

**Please Note:**

1. Responsible Users must use this form when conducting Annual Internal Inspections
2. Completed X-ray safety instruction checklists should be submitted to the RSO at EHS
3. The device owners must keep a record of all safety inspections indefinitely

## X-ray Safety Inspection Report

Date of Inspection: \_\_\_\_\_

Device Owner: \_\_\_\_\_

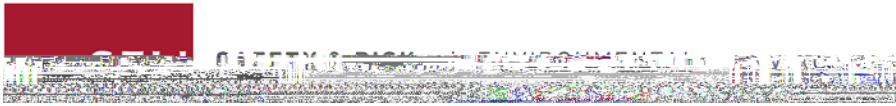
Room Number: \_\_\_\_\_

XED Make/Model: \_\_\_\_\_

Inspection History: \_\_\_\_\_

XED Registration Number: \_\_\_\_\_

Inspector: \_\_\_\_\_



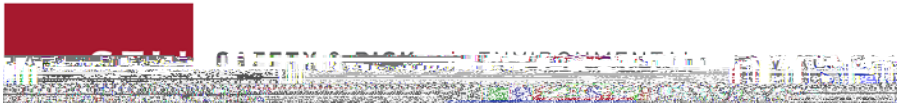
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## Administrative Information

Date of Inspection		Laboratory Location	
Principal Investigator		Department	
Lab Representative		Contact Phone Number	
Contact Email		Inspector	

## Equipment Information

X-ray Emitting Device (XED)		Manufacture Date	
Manufacturer		Type	
Maximum kV		Maximum mA	
Model Number		Serial Number	
Tube Manufacturer		Tube Model Number	
Tube Serial Number		Applicable Safety Code	

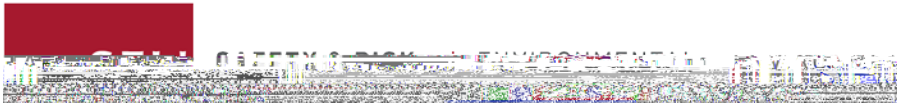


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## Equipment and Radiation Survey

<b>Survey Instrument</b>			
<b>Meter used</b>		<b>Meter calibration date</b>	
<b>Background (mR/hr)</b>			
<b>Leakage Radiation – Surrounding Housing (At maximum permissible kVp)</b>			
<b>kVp setting</b>		<b>mA setting</b>	
<b>Interlock</b>		<b>Operational status (On/Off)</b>	
<b>Distance from focal point</b>		<b>Meter reading</b>	

Survey Instrument



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## Engineering & Exposure Controls

	Issue	Yes	No	N/A
1	Interlocks operable			
2	Interlocks adequate			
3	Shielding			

## Signage and Postings

	Issue	Yes	No	N/A
1	Warning lights operable			
2	Warning lights adequate			
3	X-rays Warning Sign(s) posted at all entrances			
4	Warning labels (wherever applicable)			
5	Emergency contact information			