## MEDICAL RADIOGRAPHIC CHECKLIST and WORKSHEET

(A FACILITY checklist is required with this form)

Tube control number Room number Unit is in storage and not being used.						
Control panel manufacturer and serial no.						
Tubehead manufacturer and serial no.						
Checklist Choose Y for yes (compliant), N for no (noncompli		nt,) N/A for not applical	ole and DNT for did no	ot test.		
Y N N/A DNT	NT (All reg references preceded by 0400-20-)					
1. 0 0 0 0	Switch at control panel and any remote switch labeled "Caution Radiation". (05111(11))					
2. 0 0 0 0	Proper technique chart posted and used. (0411(1)(e), 0604(4))					
3. 0 0 0 0	Patient and control panel visible at all times. (0605(2)(c)1.)					
4. O O O O	Operator remains in protected area during exposures [for stationary units]. (0605(2)(c)5.(ii)(II)I)					
5. 0 0 0 0	Operator 2 meters away from primary beam [for mobile units]. (0605(2)(c)5.(ii)(II)II))					
6. 0 0 0 0	Beam axis indicator for fixed units. (0605(2)(c)7.)					
7. O O O Tubehead stable. (Drifts or vibrates) (0605(2)(a)12.)						
8. 0 0 0 0	Technician uses collimator correctly. (0412(1)(a)2, 0604(4), and 0605(2)(a)1)					
9. 0 0 0 0	Exposure interrupt for time $> 0.5$ seconds. (0605(2)(c)5.(ii)(I)I)					
10. O O O O	O O Distance from the x-ray field center to the light field center less than 2% of test SID. (0605(2)(c)2.)					
11.00000	Difference in dimensions of the light field and the x-ray field less than 2% of the test SID. (0605(2)(c)2.)					
12. 0 0 0 0	Exposure and timer reproducible. (0605(2)(c)5.(iv), 0605(2)(c)5.(v))					
13. 0 0 0 0	mm of Al HVL/Filtration adequate. (0605(2)(a)2.(i) or (ii))					
Worksheet (This section not required for RI use)						
Settings: M	easurements:	Exposure Readings:		Reprodu	cibility:	
	Vp Measured:	mR Time		mR	Time	
mA: HVL Measured: sec: OR			Average			
	otal Filtration Measured:		Max			
mas: [k	Vp<50, 0.5 mmAl: kVp 51-70, 1.5: kVp>71, 2.5]		Min Difference			
Source to Image Distance (SID):		<u> </u>	x 5			
2% of SID:						

## Notes