## **VETERINARY 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  Y N N/A I. O O O			(	O Switch at control panel and any remote switch labeled "CAUTION-RADIATION, THIS		
2. <b>O</b>	EQUIPMENT PRODUCES RADIATION WHEN ENERGIZED". (05111(11)  Proper technique chart posted and used. (0411(1)(e), 604(4))					
3. O	0	0	0			
4. O	0	0	0	Beam axis indicator for fixed units. (0605(2)(c)7., 0606(1)(a)1.)		
5. O	0	0	0	Animal Holding Log maintained (holder's name, date, procedure). (0606(1)(b)1.(vii))		
6. <b>O</b>	0	0	0	,		
7. <b>O</b>	0	0	0	O Difference in dimensions of the light field and the x-ray field less than 2% of the test SID. (0606(1)(a)1.)		
8. <b>O</b>	0	0	0	mm of Al HVL/Filtration adequate. (0606(1)(a)(2.)		
Worksheet		<u>eet</u>	(This	s section not required for RI use)	Exposure Readings:	
Settings: kVp:			Measurements: kVp Measured:		mR Time	
mA: sec: OR mas:			Tot	VL Measured: OR tal Filtration Measured: Source Vp<50, 0.5 mmAl: kVp 51-70, 1.5: kVp>71, 2.5]	ce to Image Distance (SID): 2% of SID:	

Notes