Office of the Vice Chancellor for Research

February 9, 2015

Please post

To: Deans, Directors, Department Chairs, and Administrative Officers

Re: Campus comment period open on new UCLA Policy 994.1 Radiation-Producing Equipment and Policy 994.2 Volunteers and Visitors in Non-Clinical Radiation Use Areas

Drafts of new UCLA policies on radiation-producing equipment and volunteers and visitors in non-clinical radiation use areas are now open for campus-wide comment (see attachments). Comments on the proposed Policy 994.1 and Policy 994.2 are due no later than Friday, March 6th, 2015.

Radiation Producing Machines Policy 994.1 is intended to emphasize critical laws and regulations related to UCLA-operated radiation-producing equipment. This policy has been developed by the Clinical Operations Radiation Safety Committee (CORSC) in collaboration with key UCLA departments and divisions.

Volunteers and Visitors in Non-Clinical Radiation Use Areas Policy 994.2 were adopted from the existing UCLA Volunteer Guidelines. This policy has been developed by the Radiation Safety Committee (RSC) to ensure that visitors and volunteers at UCLA understand their roles and responsibilities as they pertain to work and access to non-clinical radiation use areas.

We are soliciting comments on policies 994.1 and 994.2 as part of the formal process for the development of any new campus-wide policy. Please ensure your faculty and staff have an opportunity to see these drafts and send any comments by Friday, March 6th, 2015 to Dina Boktor, Manager of the Office of the Radiation Safety Committees, who is also available to answer any questions you may have.

James Economou, MD, PhD
Vice Chancellor for Research

Christiaan Schiepers, MD, PhD
Chair, Radiation Safety Committee
I. BACKGROUND & SCOPE

UCLA Policy 994 sets forth responsibilities of specific campus officials and committees in order to ensure compliance with all applicable laws and regulations overseeing the safe use of radiation. The UCLA Clinical Operations Radiation Safety Committee (CORSC), designated by the Vice Chancellor for Research, oversees radiological procedures in all clinical operations at UCLA. In consultation with the Radiation Safety Office (RSO) and the Office of the Radiation Safety Committees (ORSC), CORSC oversees all radiation-producing equipment use and related inspections.

This Procedure sets forth the required designation of a Responsible User (RU) for radiation-producing equipment and the proper management of such equipment.

This Procedure applies to all UCLA departments and units, whether on- or off-campus, using radiation-producing equipment.

II. STATEMENT

Radiation-producing equipment at UCLA or any UCLA-operated medical facility or clinic, whether purchased, loaned, donated or provided under a research agreement, shall be under the control of a designated Responsible User (RU). The responsible department or unit shall identify the RU at the time the equipment is registered with the ORSC. If an individual is not specified, the Department Chair or Division Chief will be listed as the RU. Through coordination with the CORSC and the RSO, departments and units shall report all designated RUs within their respective areas to the CORSC on an annual basis. The RU is responsible for managing all radiation-producing equipment under their control in accordance with the procedures below. For specific definitions and guidance regarding RU responsibilities see the CORSC Policy Page.

III. PROCEDURES

To ensure compliance with applicable federal and state laws and regulations, and to maintain a healthy and safe working environment, the RU and their supervising department/unit shall adhere to the procedures below.

A. Inventory and Registration of Radiation-Producing Equipment

All radiation-producing equipment shall be properly inventoried and registered with the California Department of Public Health (CDPH). The RU must notify the RSO, in coordination with the Qualified Medical Physicist (QMP) as applicable, of all acquired, transferred, or recently disposed radiation-producing equipment in their respective areas. The RSO is responsible for the registration of radiation-producing equipment with the CDPH.
Prior to patient use and in coordination with the appropriate hospital and university entities, the designated RU must ensure proper registration and acceptance testing, including safety and performance verifications of all radiation-producing equipment in a clinical area, regardless of whether the equipment is purchased, loaned, donated, or under research agreement.

B. Maintenance and Calibration of Radiation-Producing Machines
The RU and supervising department/unit ensures that equipment is inspected, calibrated, and maintained and is compliant with State, federal, and local regulations and manufacturer and accreditation requirements. Additionally, the RU and supervising department/unit ensures that equipment service requests and repairs are initiated and completed in a timely manner through coordination with appropriate manufacturers, vendors, and Clinical Engineering.

Written quality assurance programs ensuring compliance with these requirements must be implemented and made available for review.

Documentation shall be maintained for a minimum of three years and records must be available for review for regulatory or accreditation inspections or other University oversight purposes.

C. Regulatory and Accreditation Inspections of Radiation-Producing Machines
The RU or supervising department shall notify the RSO, Clinical Engineering, and QMP of any federal, State, or local regulatory or accreditation inspection requests. Coordination of inspections shall be performed by the RU and supervising department/unit to ensure requisite personnel and radiation-producing equipment availability. Inspection results will be reported to the responsible departments and committees, as determined by the RSO, Clinical Engineering, QMP, and/or License Accreditation & Policy Department and upon request, as appropriate. Any identified violations or recommendations will be discussed between the aforementioned groups and corrective actions will be implemented, as appropriate.

IV. REFERENCES
1. UCLA Policy 994, Radiation Safety;
2. UCLA CORSC Policy: Clinical Use of Radiation-Producing Machines Used in the Healing Arts;
3. California Code of Regulations Title 17, Subchapter 4.5, Group 5: Certification of Licentiates;
4. Office of Radiation Safety Committees (ORSC) Website;
5. UCLA Radiation Safety Website;
6. CORSC Policy Page.

Issuing Officer

/is/ James Economou

Vice Chancellor for Research
Questions concerning this procedure should be referred to the Responsible Department listed at the top of this document.
I. BACKGROUND & SCOPE

UCLA Policy 994 emphasizes the strict controls set for radiation use at UCLA, in accordance with federal and State regulations, radiation usage guidelines and campus policies and procedures. The UCLA Radiation Safety Committee (RSC) authorized by the Chancellor and required by the UCLA Type A Broad Scope Radioactive Materials License, oversees the use of radioactive materials and radiation-producing equipment. The RSC is responsible for developing and implementing policies and procedures pertaining to the use of radiation.

This Procedure sets forth access restrictions of UCLA Volunteers and Visitors to non-clinical Radiation Use Areas, whether on- or off-campus.

II. DEFINITIONS

For the purposes of this Procedure:

**Radiation Use Area** is an area approved for radioactive material or radiation-producing equipment use by the UCLA Office of Environment Health and Safety, Radiation Safety Program.

**UCLA Volunteer** is an individual who meets the following criteria: (1) volunteers their services directly to the University, whether on an ad hoc basis or through a formal volunteer program conducted by a University department or unit; (2) provides services under the supervision of the University; (3) receives no compensation for such services; and (4) is authorized to provide volunteer services in campus facilities by registering through the appropriate department or unit. For more information on the criteria, restrictions, and application process of volunteers, see UCLA Administrative Guidelines for the Use of Volunteers.

**Visitor** is an individual who is *not* a UCLA student, employee, Volunteer, or visiting scholar or other visitor as outlined in UC APM-430.

III. STATEMENT

To ensure regulatory compliance and prevent a UCLA Volunteer or Visitor from exposure to radiation levels that surpass the public exposure limits as defined by the United States Nuclear Regulatory Commission (NRC) and the California Department of Public Health (CDPH) Regulatory Health Branch (RHB), the sponsoring department or unit shall follow the access restrictions to Radiation Use Areas below.
Access Restrictions to Radiation Use Areas

Every UCLA Volunteer and Visitor has restricted access to Radiation Use Areas, these restrictions include:

1. UCLA Volunteer or Visitor may not be issued keys or badge access to Radiation Use Areas;
2. UCLA Volunteer or Visitor may not be exposed to any radiation beyond the regulatory public limits of 2 millirem in any one hour and 100 millirem in one year;
3. UCLA Volunteer or Visitor may never directly handle radioactive material due to the potential for accidental intake of the material or external skin dose;
4. UCLA Volunteer or Visitor may not enter or remain in a Radiation Use Area without direct supervision by the Principal Investigator (PI) or their designee, responsible for radiation use in the space, unless all radioactive material is shielded to below regulatory public exposure limits and radioactive material or radiation-producing equipment is secured and inaccessible to the Volunteer or Visitor. Contaminated radioactive material use equipment (e.g., fume hoods, biosafety cabinets, and centrifuges), radioactive waste, and radioactive material work areas must also be secured and inaccessible;
   - Direct supervision of a UCLA Volunteer or Visitor requires the physical presence of the PI, their designee or area supervisor at all times in the Radiation Use Area where the UCLA Volunteer or Visitor is present.
5. UCLA Volunteer or Visitor, prior to entering a Radiation Use Area, must receive hazard awareness training regarding radiation hazards in a Radiation Use Area. The responsible PI, their designee, or area supervisor must give the training and the training must be documented. Training should include a tour of the affected radiation use area(s), information on how to identify radiation hazards by being aware of labeling and what should be done in the event of an emergency. Upon request, the Volunteer or Visitor must be given a copy of the training document; and
6. UCLA Volunteer or Visitor must always wear appropriate Personal Protective Equipment (long pants, closed toe shoes, etc.) while in an unsealed radioactive material use area. See UCLA Policy 905.

IV. REFERENCES

1. UCLA Policy 994: Radiation Safety
2. UCLA Administrative Guidelines for the Use of Volunteers
3. UC APM 430: Visiting Scholars and Other Visitors
4. Title 10, Code of Federal Regulations § 20.1301
5. Title 17, California Code of Federal Regulations, Division 1, Chapter 5, Subchapters 4, 4.5 and 4.6
6. UCLA Policy 905: Research Laboratory Personal Safety and Protective Equipment
7. UCLA Radiation Safety Manual