XRD Radiation Badge Application Instructions

WARNING: You must have a radiation monitoring badge before you can use the XRD!

- 1. WVU Shared Research Facilities will handle the financial paperwork for the XRD radiation badges associated with the equipment in ERB and in Hodges Hall.
- 2. Complete the WVU Radiation Badge application. Sections already completed are titled:
 - Type of radiation being monitored
 - Type of monitors requested
- 3. Choose Badge location:
 - Under 6 feet tall mark collar
 - Over 6 feet tall mark chest
- 4. Drop off application in room G75D of ESB. Dr. Kolin Brown or Harley Hart will sign the application and fax it to the Radiation Safety Department. Once your badge arrives you will be notified through email and a training session will be scheduled.

RADIATION SAFETY DEPARTMENT

WEST VIRGINIA UNIVERSITY • HEALTH SCIENCES CENTER • WVU HOSPITALS• JEFFERSON MEMORIAL HOSPITAL

G-139 Health Sciences Center • PO Box 9006 • Morgantown, WV 26506-9006 • Phone: 304-293-3413 • Fax: 304-293-4529

Application for Radiation Monitoring Device							
				-			
Name: Last	First	Middle/Mai	den	ł	Birth Date:	(MM/DI	D/YYYY)
Social Security #:		Work Addres	SS:				
Work Phone No:		Supervisor/I	PI Name	:			
INDICATE ADDRESS WHERE	E RADIATION MONI	ITOR(S) AND EXPOSI	JRE REPO	ORT SHO	ULD BE SE	NT:	
Department: <u>Comp. Sci \$</u>	Electrical Eng.	PO B	ox61	09			
TYPE OF RADIATION BEING					-		
X_ X-ray equipment		type of equipment:			•		
Radioactive materi		radioisotopes:					
Other	Specify	:					
TYPE OF RADIATION MONIT	FOR(S) REQUESTED):					
1)XLuxel® Film Badge	e 2) TI	LD Ring 3)	Bot	h (1&2)		4)N	leutron
SPECIFY WHERE THE RADIA	ATION MONITOR(S)	WILL BE WORN:					
Luxel® Film Badge:C	hestCollar	Waist Finger:	_Left	_Right	Ring Size	e:S	_MI
IF YOU WERE PREVIOUSLY DEPARTMENT:			HIS OFFIC	CE, PLE	ASE INDICA	TE THE	
PLEASE NOTE: If you h		ionally exposed to r d, please complete					exposure
Your signature below indic	•				• 1		
statement on personal radia return all dosimeters suppli							
Policy Statement and RSM			si anng ti		Lunon ou		
.				D (
Applicant's Signature: _				Date:			

Authorized Radiation User or Supervisor Signature:	
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RETURN FORM TO: RADIATION SAFETY DEPARTMENT • PO BOX 9006 • G-139 HSCN • (FAX#: 293-4529)

RSS Use Only:	Series Code:	SD:	RSD Form #8
ADIATION SAFE	TY DEPARTMENT		
Vest Virginia Univer	RSITY · HEALTH SCIENCES	CENTER • WVU Ho	SPITALS
G-139 Health Sciences Center •	PO Box 9006 • Morgantown, WV 26506-9	006 • Phone: 304-293-3413 • Fax	x: 304-293-4529
<u>**P</u>	AST RADIATION EXPO	OSURE DATA REL	EASE **
	here)	hereby authoriz	e the release of my
(please print name	here)		
ccupational radiation ex	xposure history to the WVU/	WVUH Radiation Saf	ety Department in
lorgantown, WV.			
LEASE PRINT			
nstitution Name			
ddress			
City	State		Zip Code
hone	Fax		
Dates of Employment Mo	nitoring: From	to	
upervisor's Name:		Departm	ent:
hereby certify that all th knowledge.	e information provided is h	erein true and comple	ete to the best of my
		Dete	
our Signature		Date	
PLEASE RETURN COMP		DA DTMEN IT	
	RADIATION SAFETY DE PO BOX 9006 • G-139 HS		
	1 O DOA 9000 - 0-139 H		

(FAX#: 293-4529)



NOTICE TO EMPLOYEES

WHAT IS THE RADIOLOGICAL HEALTH PROGRAM?

The Radiological Health Program (RHP) is a regulatory agency in the Radiation, Toxics and Indoor Air Division, Office of Environmental Health Services, Bureau for Public Health, Department of Health and Human Resources, in the State of West Virginia. The RHP is responsible for registration and inspection of devices and sources that produce radiation

WHAT IS THE PURPOSE OF THE RHP?

The WV Code of State Regulations, Title 64 Chapter 23 establishes the Radiological Health Rule which is a law designed to protect workers and the public from unnecessary exposure to ionizing radiation. The purpose of the RHP is to provide oversight and assistance for users of radiation producing devices and any source of radioactive material which is not produced as a byproduct of nuclear fission

WHAT IS THE RESPONSIBILITY OF MY EMPLOYER?

A business or individual that is required to be registered for the use of a radiation producing device and/or a radioactive source in West Virginia must comply with all requirements set forth in the Radiological Health Rule (64-CSR-23). If a registrant is found to be in violation of the law, the registration can be modified, suspended or revoked. The user can face fines or penalties for violations which are not corrected. Your employer must inform you of State or red engine to concern a source of the source

WHAT IS MY RESPONSIBILITY?

For your own protection and the protection of your co-workers, you should know how the State regulations relate to your work and you should obey them. If you observe violations of the Radiological Health Rule or a safety concern, you should report them.

WHAT IF I CAUSE A VIOLATION? If you deliberately engage in misconduct that may cause a violation of the WV Code of State Regulations, Radiological Health Rule, or deliberately provide inaccurate or incomplete information to either the RHP or your employer, you may be subject to enforcement action. If you report such a violation, the RHP will consider the circumstances surrounding your reporting in the determination of appropriate enforcement action, if any

HOW MUCH RADIATION AM I ALLOWED TO GET?

If you work with a radiation producing device or a source of radioactive material, the amount of radiation exposure that you are permitted to receive may be regulated by the State RHP in sections 64-CSR-23.65, 23.610, 23.611, 23.612 or the U.S. NRC regulations in sections 10-CFR-20.1201, 20.1207 and 20.1208, depending on which regulations your employer is subject to. While these are the maximum allowable limits according to the law, your employer should keep your radiation exposure far below the limits "As Low As Reasonably Achievable" (ALARA).

MAY I GET A RECORD OF MY RADIATION EXPOSURE?

Yes. Your employer is required to advise you of your dose to radiation at least annually upon your request according to 64-CSR-23.6.51 and in the format described in 64-CSR-23.6.46 or 23.6.54 b and 23.13.4. In addition, you may request a written report of your radiation exposure when you leave your job.

CAN I BE FIRED FOR REPORTING SAFETY CONCERNS? Federal and State law prohibits an employer from firing or

otherwise discriminating against an employee for bringing safety concerns to their attention or to the regulatory agency because you ask the agency to enforce its rules, refuse to engage in activities that violate the rules, or provide information to your employer or the agency about violations.

MAY I TALK WITH AN INSPECTOR?

Yes. The RHP inspector will want to speak with you if you are worried about radiation safety or have concerns about activities regarding the use of radiation producing devices or radioactive material. Your employer my not prevent you from talking with an inspector. The agency will make every effort to protect your identity where appropriate and possible

MAY I REQUEST AN INSPECTION?

Yes. If you believe that your employer is not in compliance with the WV Radiological Health Rule for the safe use of radiation producing devices or radioactive material, you may request an inspection. Your request should be addressed to the address below in writing and signed by you or your representative. Your employer may not discharge or representative. Your employer may not discharge or discriminate against any worker because they file a complaint, report of a suspected violation, or agree to testify in proceedings afforded by the report or request for inspection.

HOW DO I REPORT SAFETY CONCERNS?

If you believe that violations of State or federal rules for safe use of radiation producing devices or radioactive material, you should report them immediately to your supervisor or the Radiation Safety Officer. If you choose to report directly to the RHP, you should clearly identify the allegation(s).

HOW DO I CONTACT THE RHP?

You can call an inspector or write to: Radiological Health Program Office of Environmental Health Services Capitol and Washington Streets 1 Davis Square, Suite 200 Charleston, WV 25301-1798 Telephone: (304) 558-2981 or Facsimile: (304) 558-1289 FAX Internet: http://www.wvdhhr.org/rtia

(64-CSR-23.13.2) A copy of this Notice must be posted in sufficient locations to permit individuals, engaged in work with sources of radiation under the registration, to observe it on the way to or from any place of work to which this notice applies. This Notice shall be conspicuous and must be replaced if defaced or altered