A. **Effective Date**: Approved by RSC 12/7/18

B. **PURPOSE**: To maintain occupational radiation exposure to personnel as low as reasonably achievable (ALARA) and ensure compliance with all federal, state and other Agency requirements regarding the monitoring of employed, contracted, affiliate, or trainee personnel who may be occupationally exposed to external sources of ionizing radiation, such as radioactive material (RAM) or radiation generating devices (RGD), while present at UConn Health, any UConn Health off-site facility, or affiliated sites.

C. **POLICY**:

a. Personal radiation dosimeters will be provided to personnel as specified by State of Connecticut and/or Nuclear Regulatory Commission requirements and/or as deemed necessary and appropriate by the Radiation Safety Officer (RSO) or designee.

b. Residents/fellows must follow UConn Radiation Safety procedure ‘Procedures for Residents and Fellows Provided Personal Radiation Dosimetry from UConn Health’. All other personnel must follow UConn Radiation Safety procedure ‘Personal Radiation Dosimetry Procedures for UConn Health Personnel’.

c. Personnel are responsible for the physical control of all assigned dosimetry.
   - When dosimetry is issued, the wearer accepts responsibility for the assigned dosimeter and shall be responsible for replacement costs outlined in the *lost, damaged, or accidently exposed dosimetry* section of the applicable procedure (i.e., ‘Procedures for Residents and Fellows Provided Personal Radiation Dosimetry from UConn Health’ or ‘Personal Radiation Dosimetry Procedures for UConn Health Personnel’).

d. Personnel’s dosimetry records are confidential and will only be released with a signed consent.

e. Personnel identified as requiring personal radiation monitoring by the RSO or designee will not work in areas where dosimetry is required until a badge has been issued.

f. Personnel identified as requiring personal radiation monitoring by the RSO or designee will not be permitted to work without dosimetry in areas where it is required.

g. Personnel must not wear another individual's assigned dosimetry.

h. Declared pregnant workers will be issued a fetal dosimeter to be worn over the abdomen with monthly exposure monitoring.

i. The RSO or designee will review all personal dosimetry records and report exposures as required by UConn Health’s ALARA Program.
j. The RSO, in consultation with program directors/managers/department heads will determine and implement appropriate actions to prevent personnel from exceeding radiation exposure limits.

k. Program directors/program coordinators and department heads/managers/supervisors will be held accountable for ensuring that staff strictly comply with radiation dosimetry monitoring requirements.

D. Scope: All UConn Health employees, physicians, residents/fellows (enrolled in University of Connecticut School of Medicine Graduate Medical Education (GME) Programs) and any others identified by the RSO or designee as occupationally exposed to radiation at UConn Health, any UConn Health off-site facility or affiliated sites (i.e., residents/fellows) that are assigned personal dosimeter(s) by UConn Health’s Radiation Safety Office.

E. Procedures/Guidelines and Protocols: Related procedures include:

Procedures for Residents and Fellows Provided Personal Radiation Dosimetry from UConn Health
Personal Radiation Dosimetry Procedures for UConn Health Personnel

F. References

10 CFR 20
DEEP Title 19-24

G. Related Policies

Declaration of Pregnancy Policy
Program for Maintaining Occupational Radiation Exposures and Radioactive Gaseous and Liquid Effluents ALARA

H. Search Words

I. Enforcement

Failure on behalf of any individual to adhere to this policy and/or any noncompliance with pertinent regulations or protocols may result in progressive disciplinary action, up to and including withdrawal of privileges or termination of employment. Department heads/managers/supervisors/program coordinators/program directors will be held accountable for ensuring that staff strictly comply with radiation dosimetry monitoring requirements.

J. APPROVED BY:

Policy Committee Co-Chair ___________________________ Date Signed ___________________________
K. Revision History
   1. New Policy Approved by RSC: ______________
   2. New Policy approved by Policy Committee: ______________
   3. Revised: 2/88 11/91, 12/94, 5/97, 2/00, 9/00, 11/03, 9/05, 04/16, 8/18, 10/18
   4. Review required: ________________