

**Information Notice Number 9  
(revised December 1997)**

**For Florida Radiation Machine Registrants**

Department of Health, Bureau of Radiation Control

**RADIATION PROTECTION PROGRAM FOR INDUSTRIAL REGISTRANTS  
CABINET OR BAGGAGE RADIATION MACHINES**

The Florida Administrative Code requires radiation machine registrants to develop, document and implement a radiation protection program (RPP). A properly developed and implemented RPP can minimize unnecessary radiation exposure to employees and the general public, help prevent either group from exceeding their legal limits on exposure to radiation, and document such an effort has been made by the registrant. The RPP requirement can be satisfied in one of the following two ways:

**I. Pre-approved Radiation Protection Program: Cabinet/Baggage Industrial Machines (see attachment).**

The requirements for an RPP will have been met if:

- a) the conditions at the registrant's facility satisfy line items 1 through 5,
- b) the name of the person responsible for the radiation protection program is entered in line item 6,
- c) the dates the plan is in effect [Note: a plan is valid at most for one calendar year, it must be reviewed and dated in January of every year, see line item 3] i.e., the current month through December of the current year, are entered in line item 7,
- d) the facility name and x-ray machine registration number are entered at the bottom,
- e) and the form is signed and dated by the responsible party.

This plan does NOT have to be submitted for approval by the Radiation Machine Program office.

**II. Self-developed Radiation Protection Program.**

The registrant may develop an RPP to fit their specific situation. The provisions of this RPP should address all requirements in the Florida Administrative Code. Self-developed programs MUST be submitted to the program office for review. Previously reviewed self-developed radiation protection program do not need to be resubmitted for review unless changes are made.

If you have questions or need guidance, please contact this office at:

Department of Health  
Bureau of Radiation Control, Radiation Machine Section  
4052 Bald Cypress Way, Bin C21  
Tallahassee, FL 32399-1741  
Phone: (850) 245-4888 Fax: (850) 617-6442  
[www.myFloridaEH.com/radiation](http://www.myFloridaEH.com/radiation)

**PRE-APPROVED RADIATION PROTECTION PROGRAM**  
**CABINET/BAGGAGE INDUSTRIAL RADIATION MACHINES**

*Note: Radiation Protection Programs are used to minimize unnecessary exposure to employees and the general public and help prevent either group from exceeding their legal limits on exposure to radiation. This program has been developed by the Bureau of Radiation Control to assist registrants in meeting Florida Administrative Code requirements. If this program is used, it does not need to be submitted for review.*

**The signature below attests this registrant has evaluated the following provisions and agrees they accurately describe the conditions present. All staff members involved in making radiographic exposures will be made aware of these provisions and held accountable for them.**

1. The machine will be used according to manufacturer instructions and will not be modified.
2. The manufacturer's operating, maintenance and safety procedures are available and are followed.
3. The radiation protection program will be evaluated annually during the month of January for accuracy. An attached sheet will be used to document this review. Each review will include a date of review and the signature of the reviewer.
4. The radiation protection program will be re-evaluated when changes occur that could affect dose.
5. All radiation protection program(s) will be kept on file until the registration is terminated.
6. \_\_\_\_\_ is responsible for radiation protection.
7. The above provisions are true from \_\_\_\_\_ through December of \_\_\_\_\_.  
(Month/Year) (Year)

\_\_\_\_\_  
Facility Name (print or type)

**JR**

\_\_\_\_\_  
X-ray Machine Registration Number

\_\_\_\_\_  
Signature of Person Responsible for Above Program

\_\_\_\_\_  
Date Signed