Radiation Control Program

Violations Summary Report -- 2002 Violations

Inspections Performed by X-Ray Inspectors From 1/1/2002 Through 12/31/2002

| Description of Violation | Number of Violations |
|---|----------------------|
| OS&P not complete/not available; certificate, RPP, or NOV not available | 2,946 |
| Compliance test &/or corrective action not performed | 1,646 |
| Time-temp. chart, timer, therm. not available; Wrong safelight filter, wattage, &/or distance | 1,018 |
| Collimator indicators, PBL, light field, &/or centers alignment inadequate | 918 |
| Personnel not credentialed; operators, physician, physicist | 384 |
| Registration or certification: none, not current, expired | 364 |
| Public dose surveys not performed; Dose to public excessive | 356 |
| Annual protective device test not performed | 332 |
| Occupational dose not determined; Current year dose not determined | 320 |
| Patient exposure at skin entrance (ESE) exceeded limits | 264 |
| Output reproducibility &/or mA linearity inadequate | 232 |
| Indicators of x-ray production, multiple tubes, battery charge, AEC operation not available | 230 |
| Timer inaccurate or non-reproducible; Exposure untimed | 198 |
| Technique chart not available | 194 |
| 'Notice to Employees' not posted | 160 |
| Radiation area caution signs not posted; No machine label | 142 |
| Mammo QC, physicist eval., or physician review of QC not performed; phantom tech. not patie | er 122 |
| Annual fluoroscopic entrance exposure measurements not performed | 102 |
| Current personnel dose unknown; PM records not available | 100 |
| Other x-ray & other mammo | 82 |
| Mammo QC failed &/or phantom failed without ceasing mammograms | 80 |

| Technique chart does not match techniques used clinically | 58 |
|---|----|
| Technique factors not indicated prior to exposure: kVp, mA, mAs, time, AEC | 50 |
| Mammo anti-scatter grids not available; Compression paddle misaligned | 42 |
| Mammo patient film not provided or not retained | 38 |
| Fluoro collimation (spot film, input phosphor, Min @ max, &/or stepless) not adequate | 38 |
| Protective devices &/or holding devices not available or not used | 32 |
| Mammo image not processed w/in 24 hrs.; Batch processing not performed properly | 30 |
| Inadequate HVL | 26 |
| Incomplete technique chart | 24 |
| QA/QC records not available | 22 |
| Mammo QC corrective action not performed | 18 |
| Inappropriate PM device; PM device used improperly; Supplier not NVLAP | 12 |
| Operator collimation inadequate | 12 |
| X-Ray machine not specifically designed for mammography | 10 |
| Service company not registered &/or used by registrant | 10 |
| Patient viewing system not available or not used; Two-way aural communication not available | 8 |
| Therapy annual calibration not performed | 8 |
| Training records for assembler, calibrator, consultant not available | 6 |
| RSO quarterly audit records not available | 6 |
| Minimum source to skin distance (SSD) exceeded (radiographic & dental) | 6 |
| Fluoro EER exceeds limit | 6 |
| CT dose measurements, spot checks not performed | 4 |
| Service company servicing non-registered x-ray machine | 4 |
| Analytical x-ray use records not available; Industrial x-ray inventory not available | 4 |
| Code not used | 4 |
| Tube housing assembly not stable or hand held during radiography | 4 |

| Fluoro high level operates w/o continuous pressure &/or continuous signal | 4 |
|--|---|
| Fluoro minimum SSD inadequate | 4 |
| Code not used | 2 |
| Overexposure of occupationally exposed person | 2 |
| Overexposure report to Agency or individual not performed | 2 |
| Industrial x-ray interlock bypass warning not posted | 2 |
| Survey instrument calibration not performed | 2 |
| Code not used | 2 |
| Code not used | 2 |
| Exposure switch not the 'deadman' type | 2 |
| Mobile unit exposure cord does not allow operator position 6 feet from patient | 2 |
| Therapy filter interlock or indicator system inadequate | 2 |
| Code not used | 2 |
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Report Compiled on: August 09, 2005