Radiology Compliance Branch RADIATION PROTECTION SECTION



Division of Health Service Regulation • NC Department of Health and Human Services

CHECK LIST FOR SHIELDING PLAN REVIEW SUBMISSIONS

Completed Shielding Design Form
$\hfill \square$ Name & address of the facility and the date on each page of the shielding plan review
 The shielding plan review must include: Shielding requirements for primary and secondary barriers Identification of primary and secondary barriers Identification of protective barriers (dental only) Identification of existing or proposed construction material Scaled drawing(s) of room(s) Recommendations for administrative controls to enhance radiation protection
 Drawing(s) must include: Location & identification of the system's components including each control, exposure switch and image receptor Identification and illustration of:
☐ Floor plan or drawing illustrating the location of the X-ray room in the facility
Notes:

*Rooms with multiple tubes – the location of the tubes must be indicated

*Intraoral and panoramic units: If administrative controls are necessary to meet the intent of the shielding rules, the recommended controls must be thoroughly addressed in the shielding plan review. (The facility's written radiation protection program must also address these administrative controls)

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Installing, Replacing or Adding X-ray Equipment Rev. 1/19/12

Visit our website https://radiation.ncdhhs.gov/