SESLHD PROCEDURE COVER SHEET



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KEY TERMS	Radiation safety, ionising radiation, x-rays, radioactive substances, laboratory safety
SUMMARY	Procedure to limit the risk to health of staff arising from exposure to radiation from laboratory use of radioactive substances or x-ray devices.

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1. POLICY STATEMENT

South Eastern Sydney Local Health District (SESLHD) is committed, through a risk management approach, to protecting employees, contractors, students, volunteers, patients, members of the public and the environment from unnecessary exposure to radiation arising from systems and processes which use radiation apparatus and radioactive substances, whilst maintaining optimum diagnostic and therapeutic quality, therapeutic efficacy and patient care.

2. BACKGROUND

Staff involved in laboratory procedures involving radioactive substances may be exposed externally to radiation from the source (mainly beta and gamma radiation) but may also be exposed internally if any of the radioactivity is inhaled or ingested. Radioactivity can also enter the body through open cuts. High standards of laboratory cleanliness and good laboratory techniques will minimise the likelihood of radioactive contamination.

3. **RESPONSIBILITIES**

3.1 Laboratory Managers

- are responsible for ensuring that all procedures are performed safely, that staff are appropriately trained, including specific training in radiation safety, and, where necessary, that staff are issued with personal radiation monitors.
- must ensure that all staff are aware of, and comply with, these procedures.

3.2 Laboratory Staff

• are responsible for performing all procedures in accordance with the centre's written standard protocols and in compliance with the radiation safety procedures in this document.

3.3 The Radiation Safety Officer (RSO)

• will oversee and provide advice on radiation safety within laboratories using radioactive substances and/or x-ray apparatus.

4. PROCEDURE

4.1 Premises where radioactivity is stored or used

All users of radioisotopes must have areas designated specifically for the handling, storage and disposal of radioisotopes. A number of basic rules apply to use of radioisotopes and to storage and disposal of radioactive waste.



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All premises where radioactive substances are kept or used are required to be listed on the SESLHD Radiation Management Licence. Requirements are summarised below. Full details can be obtained from the Radiation Safety Officer.

Note: a substance is only considered to be radioactive if its specific activity exceeds 100 Bq/g and the total activity exceeds the thresholds listed in Schedule 1 of the Radiation Control Regulation. If a laboratory's occupants are using substances with activities below this threshold (e.g. < 400 kBq of I-125 in a radio-iodination lab), then the lab does not need to be registered.

Premises are categorised as low, medium or high level, according to the radionuclides used, the operations conducted with them, and the activities handled. The classification process will not be discussed here, but most laboratories in the hospital would be classed as low level. "Hot labs" may be medium level.

The minimum requirements for a low level radioiosotope laboratory are detailed in the Australian Standard titled *Safety in Laboratories; Part 4 Ionizing Radiations* (AS 2243.4-1998). There are additional requirements for medium and high level laboratories. These additional requirements are available from the RSO.

4.1.1 Requirements for Radiation Laboratories

- · Have restricted access and minimum traffic
- Display certain signs:
 - radiation warning signs (including on doors)
 - eating/drinking prohibition sign
 - o safe use procedures
 - o accident procedures
- Be equipped with benches with surfaces which lend themselves to decontamination e.g. stainless steel, or covered with an easily decontaminated, impervious and removable material
- Have an easily decontaminated floor, preferably continuous vinyl with welded seams, coved to the wall
- Have storage areas for both bulk radioisotopes and radioactive waste, shielded if necessary
- Any sink where low activity radioactive material may be disposed of must be designated and labelled, these sinks may not be used for any other purpose
- Have a log of radioactive materials received, used and disposed of
- If required, any fume cupboard must comply with the relevant Australian Standard and have appropriate shielding for dispensing and handling high specific activity materials
- · Be able to be securely locked with entry only to authorised persons
- Protective clothing and basic decontamination equipment must be readily available, including a shower
- Hand washing facilities, preferably with sensor taps, or foot or elbow operated taps, must be available
- Radiation monitoring equipment suitable for the radionuclides used, must be available
- Walls and furniture surfaces must be easily decontaminated.

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There are specified limits to radiation dose rate levels around laboratories, especially in public areas. At a minimum, the dose rate in areas in which non-occupationally exposed persons occupy a space must not exceed that which would result in any person receiving 1 mSv per year from that exposure.

A sign must be conspicuously placed either in or near the entry to all registered labs listing the Occupier (person in charge of the lab), the EPA Radiation Management Licence number covering the premises, the licence expiry date and the name and telephone number of the person to contact in the event of an emergency affecting the premises.

4.2 Procedures for the safe handling of unsealed sources of radioactivity

When using unsealed radioactive sources, care should be taken where possible to minimise internal and external contamination. Internal contamination may result from inhalation, ingestion, skin wounds or skin penetration.

No unsealed radioactive sources should be manipulated with unprotected hands. Gloves should always be worn.

- Carbon-14 on the skin may be absorbed into the body at a rate of 0.3% per minute (18% per hour).
- Hydrogen-3 (Tritium, as tritiated water) may be absorbed through the skin at a rate of up to 23% per minute.

It should be remembered that penetration of gloves may occur when handling some iodine compounds. A second pair of gloves is recommended.

Gloves should be removed in the proper surgical manner (remove one glove, hold in the other hand and fold the second glove over the first) and disposed of correctly after use, to avoid contamination of hands.

A laboratory coat or gown must be worn and must be buttoned up when handling radioactivity.

Mouth pipetting of any radioactive substance is totally prohibited.

Precautions should be taken to avoid punctures, cuts and any open skin wounds.

Cover all working surfaces with absorbent paper and clearly mark the area as a radiation working area. Plastic backed "underpad" is particularly suitable for this purpose.

Wash hands thoroughly after using radionuclides.

Radionuclides which emit gamma rays, such as lodine-131, will require shielding with lead.

Radionuclides of iodine, such as lodine-125 and lodine-131, can be volatile and should be handled in a fume cupboard if elemental iodine is being used.

Pure beta emitters such as Phosphorus-32 and Sulpher-35 should be handled whilst standing behind a protective barrier made of a low atomic number material such as Perspex.

Food, beverages, smoking items, handbags, cosmetics, handkerchiefs and eating and drinking utensils are prohibited in laboratories where unsealed sources are used.





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Food and drinks must never be stored in a refrigerator or freezer designated for radioactive materials.

Contain waste appropriately and immediately.

Use only self-adhesive labels in radiation working areas.

Monitor radiation exposure by:

- wearing a body personal radiation monitor and/or finger monitors if appropriate
- periodic thyroid counting after performing iodination procedures
- self-monitoring after working with unsealed sources.

At the end of each procedure the area should be completely cleaned and checked for any contamination.

All containers must be clearly labelled with the name of the radionuclide, its chemical form, and activity, along with the measurement time and date. If the material is sterile, this must be clearly indicated. The name of the responsible person should also appear on the label.

All containers must be adequately shielded at all times.

For activities of greater than 50 MBq, the container must never be directly handled. Remote handling devices, such as tongs, must be used instead.

Be familiar with decontamination and radiation monitoring procedures.

Non-radioactive work, particularly record keeping, must not be performed in the area designated for radioactive work.

Glassware, forceps, scissors and other instruments for use with radioactivity should be marked as such, and not removed from the area.

Maintenance work to fixtures and plant should be carried out only after the Radiation Safety Officer has given clearance.

No new procedures involving radioactive substances are to be commenced until the Radiation Safety Officer has been consulted with regard to radiation safety.

4.3 Personal protective equipment

Protective clothing reserved specifically for radioactive work, shall be worn at all times in the laboratory, even for very low levels of activity. The following shall apply:

- For work in low level laboratories, a normal laboratory coat or overall is sufficient.
- For work in medium level laboratories, the laboratory coat shall have elasticized sleeve cuffs and a crossover front with high neck fastened with hook and loop fastening fabric. Pockets are not recommended.
- NOTE: Velcro strips have been found suitable.

In high level laboratories, in addition to coats or overalls, overshoes or similar, specially designated footwear shall be worn to prevent the transfer of radioactive contamination from laboratory floors.

Suitable gloves shall be worn for all work with unsealed radioactive substances, and special care is to be exercised when putting on or removing gloves, to avoid contaminating the hands and the inside surfaces of the gloves.

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Paper towels and tissues, which can be discarded as active waste after a single use, shall be used for personal purposes in the laboratory.

All protective clothing worn in radioisotope and radiological laboratories shall be removed before leaving, and left in, or immediately outside, the laboratory; the latter place shall then be regarded as an 'active' area, i.e. possessing a potential contamination hazard. Contaminated protective clothing shall not be laundered with uncontaminated items.

4.3 Emergency procedures

4.4.1 Spills

Spills of radioactive material are not to be regarded as an unavoidable hazard in the dayto-day operation of the department. Any spill has a degree of risk and acceptance of minor spills could lead to a casual approach to major spills. Accidents involving radioactive material must be reported to the Radiation Safety Committee of the hospital via the Radiation Safety Officer.

The following procedure should be followed on discovery of a contamination problem:

- All persons involved in the incident are to vacate the immediate vicinity but are not to move freely around the department, as this involves a danger of spreading contamination.
- IMMEDIATELY notify the person responsible for radiation safety in the laboratory and the Radiation Safety Officer.
- If the contamination is due to a container spill of liquid and the hands are protected with gloves, right the container and ensure that it is adequately shielded. If the problem is due to a leaky container, place suspect item in a labelled plastic bag.
- Seal off the area involved and in particular ensure that personnel do not walk on any potentially contaminated floor area. Discard any clothing which is contaminated and place it in a labelled plastic bag.
- Consult with Radiation Safety Officer to determine disposal of bags and waste items

4.4.2 Incidents involving contaminated or exposed persons

Refer to SESLHDPR/558 Handling, investigation and reporting of radiation incidents.

5. DOCUMENTATION

- SESLHD Radiation Management Licence
- Written protocols for all procedures involving Radioactive Materials

6. AUDIT

The following records should be available for audit:

- Inventory of Radioactive Materials (receipts, usage, disposal)
- Radiation user licences where required
- Records of staff radiation dose.



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7. REFERENCES

- [1] Radiation Control Regulation 2013
- [2] Australian Standard Safety in Laboratories; Part 4 Ionizing Radiations (AS 2243.4-1998)
- [3] SESLHDPR/558 Handling, investigation and reporting of radiation incidents

8. REVISION AND APPROVAL HISTORY

Date	Revision No.	Author and Approval
August 2010	Draft	Brent Rogers
November 2010	Revised draft	Richard Smart – reformatted to procedure template and took into account received comments
February 2011	0	Approved by Combined Clinical Council
October 2012	1	Broken link to SESLHNPD/53
December 2015	2	Periodic Review
October 2016	2	Updates endorsed by Executive Sponsor
March 2020	3	Updates endorsed by Executive Sponsor