

## Certification Of Training For X-Ray Machine Use

I have been instructed in the appropriate use and safety features of the x-ray machine and in basic radiation safety requirements by a representative of Environmental Health & Safety. I have also read the section of the Radiation Safety Manual which pertains to machine use and will abide by the requirements therein.

X-Ray Machine Located in Room, \_\_\_\_\_.

I understand that dosimetry issued to me by Environmental Health & Safety is to be worn while operating the x-ray machine. The dosimetry will consist of a finger ring and a whole body dosimeter.

At no time will I override any safety interlock for the x-ray machine. I will notify Environmental Health & Safety in the event of any x-ray machine malfunction or procedural change.

**Before** changing samples I will verify that the x-rays are off by verifying that:

- **The current meter indicates zero**
- **The light indicating the x-rays are on is NOT LIT**

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Previous Use with Radiation Producing Machines or Radioactive Material, **yes, no**  
If yes, at which institution and for what period?

\_\_\_\_\_

\_\_\_\_\_

Anticipated Period of Use at SDSU, \_\_\_\_\_

Principal Investigator, \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_