

X-Ray Safety Audit

Principal Investigator:

Building:

Room #:

Auditor:

Date:

				Satisfactory	Needs Improvement	N/A
X-ray Units	Present	Y	N	☐	☐	☐
1. Lab Safety Plan covers manuals or procedures for x-ray use				☐	☐	☐
2. All x-ray users are authorized				☐	☐	☐
3. Safety devices are present and functioning				☐	☐	☐
4. Dosimeters are available and utilized				☐	☐	☐