Lional Eureeu of Standards Library, N.W. Bldg

DEC 7 1955

## X-RAY PROTECTION

Reference book not to be taken from the Library.

Handbook 60



U. S. Department of Commerce National Bureau of Standards

# HANDBOOKS OF THE NATIONAL BUREAU OF STANDARDS

The following Handbooks issued by the Bureau are available by purchase from the Superintendent of Documents, Government Printing Office, Washington 25, D. C., at the prices indicated:

No.		1
28	(1944) Screw Thread Standards for Federal Services	\$1
40	1050 Supplement	Φ1.
30	` 1950 SupplementNational Electrical Safety Code	1
34	Safety Rules for the Operation of Electrical Equipment and	1
UI	Lines	
35	Safety Rules for Radio Installations	
37	Testing of Weighing Equipment	1
39	Discussion of the National Electrical Safety Code	1
42	Safe Handling of Radioactive Isotopes	-
$\overline{43}$	Safe Handling of Radioactive Isotopes Installation and Maintenance of Electric Supply and Com-	
	munication Lines. Safety Rules and Discussion.	2
44	Specifications, Tolerances, and Regulations for Commercial	_
	Weighing and Measuring Devices—2d Edition	2
45	Testing of Measuring Equipment	1
46	Code for Protection Against Lightning	
48	Testing of Measuring Equipment Code for Protection Against Lightning Control and Removal of Radioactive Contamination in	
	Laboratories	
49	Recommendations for Waste Disposal of Phosphorus-32	
	and Iodine-131 for Medical Users	
50	X-ray Protection Design	
51	Radiological Monitoring Methods and Instruments	
52	Maximum Permissible Amounts of Radioisotopes in the	
	Human Body and Maximum Permissible Concentrations	
	in Air and Water	
53	Recommendations for the Disposal of Carbon-14 Wastes	
54	Protection Against Radiations From Radium, Cobalt-60,	
	and Cesium-137	
55	Protection Against Betatron-Synchrotron Radiations Up	
- 0	to 100 Million Electron Volts	
56	Safe Handling of Cadavers Containing Radioactive Iso-	
	topes	
57	Photographic Dosimetry of X- and Gamma Rays	
58	Radioactive-Waste Disposal in the Ocean	
<b>5</b> 9	Permissible Dose From External Sources of Ionizing	
co	Radiation	
60	X-ray Protection	

# U. S. Department of Commerce • Sinclair Weeks, Secretary National Bureau of Standards • A. V. Astin, Director

## X-RAY PROTECTION

Recommendations of the National Committee on Radiation Protection



National Bureau of Standards Handbook 60

Issued December 1, 1955

(Supersedes Handbook 41)



#### **Preface**

This Handbook supersedes National Bureau of Standards Handbook 41, "Medical X-ray Protection up to Two Million Volts" prepared by the National Committee on Radiation Protection in 1949.

Because a great many copies of Handbook 41 have been distributed and are now in use, wherever possible each section of this new Handbook bears the same number as the corresponding section of H41. Where major changes have been made for the present Handbook, these are indicated with an asterisk. The section on electrical protection has been omitted from this revision because it does not fall within the scope of the Handbook. The word "medical" has been deleted from the present title as many of the recommendations and suggestions can be used equally well for industrial applications. This Handbook is complete in itself and refer-

ence by the reader to H41 is unnecessary.

Although these recommendations are intended primarily for the protection of the radiation worker and the public rather than the patient, the increasing use of ionizing radiations makes it necessary for the medical profession to exercise great caution and restraint in the use of these agents. Current methods and practices should be reviewed to see if the same result could be obtained with less radiation. In particular, the beam of radiation reaching the patient should be only as large in cross section as is necessary—especially in fluoroscopy. The gonads and eyes should be protected whenever possible either by limiting the size of the beam or by local shielding.

The use of student technicians as radiographic subjects for training purposes should be minimized. The student's body or any part thereof shall not be exposed to more than the maximum permissible weekly dose (see definition of

Maximum permissible dose).

Dermatologists and radiologists should avoid as much as possible the use of radiation for the treatment of benign conditions of persons occupationally exposed to radiation. It should be the duty of the physician, when prescribing radiation treatment, to ascertain if the patient is occupationally exposed to radiation.

The maximum permissible weekly dose used in this Handbook is 0.3 r as recommended in the report of the National Committee on Radiation Protection published as National

Bureau of Standards Handbook 59.

Changes in X-ray-equipment design, availability of more complete attenuation and scattering data, and a more complete analysis of the work load, use factor, and occupancy factor may necessitate future revisions of these recommendations. The structural details and recommended barrier thicknesses are shown as a guide in the planning of an installation. Other methods may be used provided the permissible weekly dose is not exceeded for any occupied areas after allowances

are made for the degree of occupancy.

The National Committee on Radiation Protection (originally known as the Advisory Committee on X-ray and Radium Protection) was formed in 1929 upon the recommendation of the International Commission on Radiological Protection. The Committee is sponsored by the National Bureau of Standards and governed by representatives of participating organizations. Eleven subcommittees have been established, each charged with the responsibility of preparing protection recommendations in its particular field. The reports of the subcommittees are approved by the Main Committee before publication.

The following parent organizations and individuals com-

prise the Main Committee:

American College of Radiology: R. H. Chamberlain and G. C. Henny. American Dental Association: R. J. Nelsen.

American Industrial Hygiene Association: E. C. Barnes and J. H.

Sterner.

American Medical Association: P. C. Hodges.

American Radium Society: T. P. Eberhard and E. H. Quimby.

American Roentgen Ray Society: T. C. Evans and R. R. Newell.

National Bureau of Standards: L. S. Taylor, Chairman, M. S. Norloff,

Editorial Secretary, and S. W. Raskin, Secretary. National Electrical Manufacturers Association: J. A. Reynolds and

E. D. Trout. Radiological Society of North America: G. Failla and R. S. Stone.

U. S. Air Force: S. E. Lifton, Maj. U. S. Army: E. A. Lodmell, Col.

U. S. Atomic Energy Commission: J. C. Bugher and K. Z. Morgan.

U. S. Navy: C. F. Behrens, Rear Adm.

U. S. Public Health Service: H. L. Andrews and E. G. Williams. Representatives-at-large: Shields Warren, J. L. Weatherwax, and H. B. Williams.

The following are the subcommittees and their chairmen:

Subcommittee 1. Permissible Dose from External Sources, G. Failla. Permissible Internal Dose, K. Z. Morgan. X-rays up to Two Million Volts, H. O. Wyckoff. Subcommittee 2. Subcommittee 3.

Subcommittee 4. Heavy Particles (Neutrons, Protons, and Heavier), H. H. Rossi.

Subcommittee 5. Electrons, Gamma Rays, and X-rays above Two Million Volts, H. W. Koch.

Subcommittee 6. Handling of Radioactive Isotopes and Fission Products, H. M. Parker.

Subcommittee 7. Monitoring Methods and Instruments, H. L. Andrews.

Subcommittee 8. Waste Disposal and Decontamination, J. H. Jensen. Subcommittee 9. Protection Against Radiations from Radium, Cobalt-60, and Cesium-137 Encapsulated Sources, C. B. Braestrup.

Subcommittee 10. Regulation of Radiation Exposure, L. S. Taylor. Subcommittee 11. Incineration of Radioactive Waste, G. W. Morgan.

The present Handbook was prepared by the Subcommittee on X-rays up to Two Million Volts. Its membership is as follows:

H. O. WYCKOFF, Chairman

C. B. Braestrup T. P. Eberhard R. H. Morgan R. J. Nelsen R. R. NEWELL S. W. SMITH E. D. TROUT SARAH W. RASKIN, Secretary

A. V. Astin, Director.

#### Contents

	Page
Preface	III
I. General	1
1. Definitions	1
2. Planning, surveys, and inspections	5
3. Working conditions	7
4. Structural details of protective barriers	9
5. Plans for an X-ray installation	10
II. Additional rules for specific applications	11
6. Medical fluoroscopic X-ray installations	11
7. Medical radiographic X-ray installations	$1\overline{2}$
8. Dental radiographic installations	16
9. Special requirements for mobile medical diagnostic	10
equipment	19
10. Fluorographic equipment	20
11. Therapeutic X-ray installations operated at poten-	20
tials of 400 kv and below	20
12. Therapeutic X-ray installations operated at poten-	20
tials above 400 kv	27
III. (Electrical protection, sections 13 through 18 deleted)	29
IV. Appendix	29
19. Determination of protective barriers	29
20–22. (Incorporated in other sections)	40
23. (Deleted)	40
24. References	41

## X-ray Protection

#### I. General

#### 1. Definitions

Because the correct interpretation of a statement frequently depends upon the precise meaning given to one or more critical terms, the following definitions are given for certain words and phrases as they are used in this Handbook. The list is not intended to be a complete glossary of radiation terms. Every effort has been made to insure agreement with the definitions of the same terms as used in other Handbooks of this series.

Shall denotes that the ensuing recommendation is necessary or essential to meet the currently accepted standards of protection.

Should, is recommended, indicates advisory recommenda-

tions that are to be applied when practicable.

Aluminum equivalent. The thickness of aluminum affording the same attenuation, under specified conditions, as the material in question.

Attenuation. The decrease in the dose rate of radiation

in passing through a material.

Barrier. See protective barrier. Concrete equivalent. The thickness of concrete based on a density of 2.35 g/cm<sup>3</sup> (147 lb/ft<sup>3</sup>) affording the same attenuation, under specified conditions, as the material in

question.

The quantity of radiation in roentgens at a given point, measured in air. The expression "measured in air" has a definite meaning in radiology, namely that the measurement is made at a given point in the radiation field without the presence of the human body or substitute scattering material.

Dose rate. Dose per unit time.

Film badge. Appropriately packaged X-ray-sensitive film for detecting radiation received by persons. It is usually dental-film size, and worn or carried on the person.

Filter. Material placed in the useful beam to absorb

preferentially the less penetrating radiations.

Added filter. Filter added to the inherent filter.

Inherent filter. Filtration introduced by the wall of the X-ray tube and any permanent tube enclosure.

Total filter. Sum of inherent and added filters.

Half-value layer (HVL). The thickness of attenuating material necessary to reduce the dose rate of any X-ray beam to one-half its original value. For use in this Handbook the half-value layer shall be the half-value layer in the region of the dose rate considered.

Kilovolts constant potential (kycp). The potential in

kilovolts of a constant voltage generator.

Kilovolts peak (kvp). The crest value of the potential wave in kilovolts. When only one-half of the wave is used, the value refers to that of the useful half of the wave.

**Lead equivalent.** The thickness of lead affording the same attenuation, under specified conditions, as the material in

Maximum permissible dose (MPD). Dose of ionizing radiation that, in the light of present knowledge, is not expected to cause detectable bodily injury to a person at any time during his lifetime. Permissible external radiation levels for long-term occupational exposure and for occasional exposure are discussed in detail in the report of the Subcommittee on Permissible Dose from External Sources (National Bureau of Standards Handbook 59). limited scope of the present Handbook, the following rules based on the aforementioned report are applicable.

(a) For persons between 18 and 45 years of age, whose entire body, or major portion thereof, is exposed solely to X- or gamma rays from external sources for an indefinite period of years, the maximum permissible total weekly dose shall be 0.3 r measured in air at the point of highest weekly dose in the region occupied by the person. For persons 45 years of age or older, similarly exposed, the corresponding maximum permissible total weekly dose shall be double the

above-stated value.

(b) For persons 18 years of age or older whose hands and forearms (or feet and ankles) are exposed solely to X- or gamma rays from external sources for an indefinite period of years, the maximum permissible weekly dose to these regions shall be 1.5 r. It shall be definitely understood that total weekly dose means the sum of weekly doses resulting from whole-body and local exposures, whether they take place simultaneously or in succession.

(c) For persons under 18 years of ago who are exposed nonoccupationally to radiation in the course of their normal activities, protective measures shall be taken to make sure

that they receive no more than 1.5 r/year.

Note: Because the exposure of persons under 18 years of age may be averaged over a whole year, the methods of computation outlined in the present Handbook will be adequate for their protection in most cases. However, for living quarters, the product of workload and occupancy factor shall be multiplied by 4 for computing the protective barriers.

Milliroentgen (mr). A submultiple of the roentgen equal

to one-thousandth (1/1000) of a roentgen.

Monitoring. Periodic or continuous determination of the dose rate in an occupied area (area monitoring) or of the

dose received by a person (personnel monitoring).

Occupancy factor (T). The factor by which the work load should be multiplied to correct for the degree or type of occupancy of the area in question. (See table 10 for degree of occupancy.)

Occupied area. An area that may be occupied by persons or radiation-sensitive materials.

Pocket chamber. A condenser ionization chamber designed to be worn in the pocket and used for monitoring. An auxiliary charging and reading device is necessary.

Pocket dosimeter. A pocket ionization chamber containing its own electrometer. An auxiliary charging device

is usually necessary.

Protection survey. Evaluation of the radiation hazards in an installation. It customarily includes a physical survey of the arrangement and use of equipment, and measurements of the dose rates of radiation under expected conditions (See section 2.4.)

Protective apron. Apron made of attenuating materials

used to reduce radiation hazards.

Protective barrier. Barrier of attenuating material used to reduce radiation hazards.

Primary protective barrier. Barrier sufficient to attenuate the useful beam to the required degree.

Secondary protective barrier. Barrier sufficient to at-

tenuate the stray radiation to the required degree.

Protective glove. Glove made of attenuating materials used to reduce radiation hazards.

Protective tube housing. An X-ray-tube enclosure that

provides radiation protection.

Diagnostic-type protective tube housing. One that reduces the leakage radiation to at most 0.10 r/hr at a distance of 1 m from the tube target when the tube is operating at its maximum continuous rated current for the maximum

Therapeutic-type protective tube housing. One that reduces the leakage radiation to at most 1.0 r/hr at a distance of 1 m from the tube target and 1.0 r/min at any point on the surface of the housing when the tube is operating at its maximum continuous rated current for the maximum rated

voltage.

Qualified expert. A person suited by training and experience to perform dependable radiation surveys, to oversee radiation monitoring, to estimate the degree of radiation hazard, and to advise regarding radiation hazards.

Radiation. Energy propagated through space. In this Handbook, radiation is X-rays and high-speed electrons up to 2 Mey; but is not sound or radio waves, or visible, infrared,

or ultraviolet light.

Leakage (direct) radiation. All radiation coming from

within the tube housing, except the useful beam.

Primary radiation. Radiation coming directly from the target of the X-ray tube. Except for the useful beam, most

of this radiation is absorbed in the tube housing.

Scattered radiation. Radiation that, during passage through a substance, has been deviated in direction. may also have been modified by an increase in wavelength. It is one form of secondary radiation.

Secondary radiation. Radiation emitted by any matter

being irradiated with X-rays.

Stray radiation. Radiation not serving any useful purpose. It includes leakage and secondary radiation.

Useful beam. See useful beam.

Radiation field. Region in which energy is being propa-

Radiation hazard. Any situation where persons might be exposed to radiation in excess of the maximum permissible dose.

Radiation survey. See protection survey.

Roentgen (r). The quantity of X- or gamma radiation such that the associated corpuscular emission per 0.001293 g of air produces, in air, ions carrying 1 esu of quantity of electricity of either sign.

Use factor (U). The fraction of the workload during which the useful beam is pointed in the direction under

Useful beam. That part of the primary radiation that passes through the aperture, cone, or other collimator.

Workload (W). The working activity of a machine meas-

ured in milliampere minutes per week.

X-ray apparatus. Any source of X-rays, and its highvoltage supply, coming within the scope of this Handbook.

X-ray installation. The area of radiation hazard under

the administrative control of the person or organization possessing an X-ray source.

#### 2. Planning, Surveys, and Inspections

- \*2.1.¹ The structural shielding requirements of any new installation, or an existing one in which changes are contemplated, should be discussed with a qualified expert early in the planning stage.
- a. The expert should be provided with available data concerning the type, use, and kilovoltage of the machine to be installed in each room; the expected workload; the structural details of the building; and the type of occupancy of all areas that might be affected by this installation. If no other information is available, the suggested workloads, use factors, and occupancy factors included in the pertinent sections of this Handbook should be used. Some structural details are included in section 4 and planning suggestions in section 5.

b. Final plans, detailed drawings, and all pertinent specifications should be approved by the expert before construction

begins.

- 2.2. The possibilities of multiple exposure from several different radiation sources shall be considered.
  - \*2.3. Included in section 2.1.b.
  - 2.4. Protection survey.

a. A protection survey should be made by or under the direction of a qualified expert of all new installations requiring structural shielding, existing installations not previously surveyed, and after every change that might increase the radiation hazard.

b. The completed installation should be compared with

the plans and specifications previously approved.

c. If safe use of the installation depends upon mechanical restrictions of the orientation of the X-ray beam and limitations (voltage, current, time, permanent filter, and maximum aperture) in the output of the tube, then an inspection shall be made to see that these restrictions are actually imposed.

d. All interlocks shall be tested to make certain that they are operating properly. A check shall be made to determine that there are a sufficient number of warning signs, properly

placed.

<sup>&</sup>lt;sup>1</sup> An asterisk before a section number indicates that the content is appreciably different from the corresponding section of Handbook 41. However, this Handbook is complete in itself and reference by the reader to H41 is unnecessary.

e. A preliminary survey shall be made with a suitably sensitive radiation-detecting instrument, which may be Geiger counter, an ionization chamber, or a scintillation Every location shall be tested that is habitually occupied or can be occupied while X-rays are being produced.

f. Every location that shows more than one-fifth the maximum permissible dose shall be investigated further with a radiation-measuring device that is suitably independent of direction and quality, or corrected therefor. X-ray-sensitive films and Geiger or scintillation counters may not be suitable for such measurements. The X-ray machine should be operating at its maximum rated voltage during these measurements.2

g. The methods of operation of the equipment should be investigated to determine whether or not proper precautions

are being taken against radiation hazard.

h. If personnel monitoring is used, an evaluation of the technique shall be made. (See section 3.5.)

#### 2.5. Report of protection survey.

a. The expert shall report his findings in writing to the person or agency requesting the survey and to the person in

charge of the installation.

\*b. Dose rates at critical positions shall be indicated in milliroentgens per hour or milliroentgens per hundred milliampere-seconds. If, at any of the indicated positions, the permissible dose is likely to be exceeded in a 40-hr week,3 the time that personnel can safely remain at this position or the maximum permissible workload shall also be specified.

\*c. Deleted.

d. The report shall include recommended corrections in the operating technique, barrier thickness, or mechanical restriction of the beam that will eliminate radiation hazards in occupied positions.

e. The report should indicate whether or not a further

survey is necessary after corrections have been made.

f. Recommendations shall include changes in the per-

sonnel-monitoring technique if required.

g. Copies of each report shall be kept on file by the expert and by the person in charge of the installation.

 <sup>&</sup>lt;sup>2</sup> In evaluating the measurements, the workload shall be based on past or expected working conditions of the installation and on reasonable use factors and occupancy factor.
 <sup>3</sup> The 40-hr workweek is now more common than the 48-hr workweek used in Handbook 41.

#### 2.6. Periodic inspections.

\*a. All interlocks, movable barriers, and protective garments and devices should be inspected every 6 mo to see that they are not defective. Operating methods and habits of employees should be reviewed for changes in workload or occupany.

\*b. Included in section 2.6.a.

c. Records of dates, findings, and changes shall be kept on file.

2.7. Whenever hazardous conditions are discovered they shall be corrected promptly.

#### 3. Working Conditions

3.1. The person in charge shall be responsible for the

working conditions in the X-ray department.

3.2. He shall be responsible for the instruction of personnel in safe working practices and in the nature of injuries resulting from overexposure to X-rays. He should promulgate special safety rules for his department, including any restrictions of the operating technique shown to be necessary.

\*3.3. Every employee should read the special safety rules and the sections of this Handbook applicable to his work.

\*3.4. Every employee and authorized visitor shall be responsible for carrying out all radiation-safety rules that concern or affect his conduct and shall use such safety devices as are furnished for his protection.

#### \*3.5. Personnel monitoring.

a. Personnel monitoring shall be required for each individual for whom there is any reasonable possibility of receiving a weekly dose of X-rays exceeding one-fourth the maximum permissible dose, taking into consideration the use of protective gloves, aprons, or other radiation-limiting devices; except that, if monitoring over a period of 8 consecutive weeks shows that the dose does not exceed one-half the maximum permissible dose, then the routine monitoring of that individual may be eliminated. If the operating conditions are changed, a new monitoring test over an 8-week period shall be made.

b. It is recommended that a qualified expert be consulted on the establishment of the monitoring system. Permanent records shall be kept of all personnel-monitoring results.

c. Monitoring may be done with film badges,<sup>4</sup> pocket chambers, or pocket dosimeters. *Periodic blood counts should not be regarded as a means of radiation monitoring.* 

#### \*3.6. Health.

a. The person in charge shall be responsible for the protection of employees, patients, and authorized visitors against radiation injuries and for the execution of health regulations

for all employees.

b. A preemployment physical examination is generally advisable. This should include a complete occupational history; a description of any unusual exposure to radiation resulting from previous occupation, accident, or diagnostic or therapeutic exposure; a family history with special emphasis upon heritable defects; and a careful and complete physical examination. This last should include urinalysis, chest film, and a complete blood count, the latter repeated after a month. No further blood counts are necessary except when the maximum permissible dose is exceeded.

c. In the case of an exposure in excess of the maximum permissible dose, an immediate blood count should be taken. This is valuable for comparison with later blood counts.

d. Reports of physical examination and blood counts

should become a permanent record.

e. Vacations should not be considered protection against overexposure to radiation.

Table 1. Approximate useful exposure ranges of some films used for radiation monitoring <sup>a</sup>

	Approximate useful range in roentgens			
Film type	100 to 200 kv region <sup>b</sup>	Million-volt region		
Dupont types: Medical X-ray film, Xtra Fast, 508 Medical X-ray film, Par Speed, 502 Industrial X-ray film, very fine grain, 510_ Microfilm, positive, 606	0.002 to 1.8 0.0025 to 2.2 0.03 to 5 0.5 to 140	7 0.05 to 6. 0.1 to 10. 1 to 50. 15 to 700.		
Eastman Kodak types: Industrial X-ray film, type K. Fine Grain Release Positive, 5302 Dental X-ray film, Periapical, Ultra-Speed Spectroscopic film, 548-0, double-coated_	0.0015 to 1.1	0.05 to 8. 15 to 700. 0.05 to 25. 1,000 to 15,000.		

 $<sup>^{\</sup>rm a}$  When developed in Kodak liquid X-ray developer for 5 min at a temperature of 20° C.  $^{\rm b}$  Film sensitivities vary with photon energy by the order of a factor of 10 in this region.

<sup>&</sup>lt;sup>4</sup> See table 1 for partial list of films and their useful dose ranges. Suitable calibration and controls are required, of course, for their use. See National Bureau of Standards Handbook 57 for details of film-badge monitoring.

#### 4. Structural Details of Protective Barriers

4.1. See chapter II for minimum barrier requirements for

specific applications.

4.2. Lead barriers shall be mounted in such a manner that they will not cold-flow because of their own weight. They shall be protected against mechanical damage. It is recommended that lead barriers less than 1 mm thick be bonded to panels of some rigid supporting material.

4.3. Movable barriers should not be depended upon for

protection above 100 kv.

4.4. Surfaces of lead sheets at joints should be in contact, with a lap of at least one-half inch or twice the thickness of the sheet, whichever is the greater.

4.5. Welded or burned lead seams are permissible, provided the lead equivalent of the seams is not less than the

minimum requirement. (See chapter II.)

\*4.6. Joints between different kinds of protective materials shall be so designed that the over-all protection of the barrier is not impaired. (See figs. 1 and 2.)

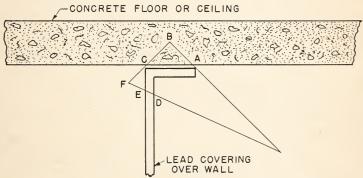


FIGURE 1. Example of a wall joint.

The sum of radiations through all paths ABCF and DEF to the point F shall not be more than the maximum permissible dose if F is in an occupied area. The framework supporting the lead wall is here considered to be of relatively X-ray-transparent material.

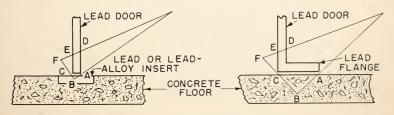


FIGURE 2. Example of door baffle.

The sum of radiations through all paths ABCF and DEF to the point F shall not be more than the maximum permissible dose if F is in an occupied area. The supporting structure for the lead door is here considered to be a framework of relatively X-ray-transparent material.

4.7. Joints at the floor and ceiling shall be so designed that the over-all protection is not impaired. (See fig. 1 for example that fulfills this requirement.)

4.8. Nails, bolts, or other fasteners through a lead sheet

shall not impair the over-all protection.

4.9. Windows and doors shall have the same lead equivalent as that required of the surrounding wall. A door baffle or threshold may be required above 125 kv, if the discontinuity can be struck by the primary beam. (See fig. 2 for example that fulfills the baffle requirement.) Special attention shall be given to providing adequate overlap of the shielding of the door.

4.10. Holes in the barrier for pipes, conduits, air ducts, and louvers shall be provided with baffles so that the transmitted radiation is not more than that permissible for the surrounding barrier. Such holes preferably should not be struck by

the primary beam.

#### 5. Plans for an X-ray Installation

5.1. The cost of X-ray shielding can be materially reduced by locating the installation at a distance from occupied areas. The minimum safe distances shown in the pertinent tables of chapter II shall be considered when omission of protection on outside walls and windows is contemplated. \*5.2. Deleted.

5.3. Devices for restricting the angulation of the tube

may reduce the amount of protection required.

5.4. Openings in radiation barriers should be held to a minimum.

5.5. The possibilities of radiation coming from several radiation sources at the same time or by several paths from a single source into an occupied area should be considered.

5.6. Protection against the useful beam shall be computed

without a patient in the beam.

\*5.7. Deleted.

\*5.8. Protection for each occupied area shall be computed for the maximum kilovoltage, workload, and occupancy factor. If the workload and occupancy factor are not known, average values may be used from the pertinent tables of chapter II. Special consideration should be given to the protection of film-storage areas and rooms used for measuring low-activity radioactive materials.

## II. Additional Rules for Specific Applications

### 6. Medical Fluoroscopic X-ray Installations

See section 9 for special requirements for mobile units

6.1. Equipment.

a. The tube housing shall be a diagnostic type.

b. The useful beam shall be limited by a cone and an adjustable diaphragm that, when open to its fullest extent, leaves a margin <sup>5</sup> of at least one-quarter inch of unilluminated fluorescent screen regardless of screen position during use.

c. The cone shall extend from the tube housing to a position as near the panel as possible. Its walls shall provide the same degree of protection as the tube housing, but may not require so great a thickness because of the obliquity of the rays.

\*d. Included in section 6.1.b.

e. The total filter—permanently in the useful beam—shall be equal to at least 2½ mm of aluminum. With this filtration the aluminum HVL is approximately 2.4 mm at 100 kv.

\*f. Included in section 6.1.c.

\*g. The target-to-table-panel distance should not be less than 18 in. and shall not be less than 12 in.

h. A "high-low" milliamperage change-over switch may

be provided for the purpose indicated in section 6.3.c.

i. A manually reset cumulative timing-device should be used which will either indicate elapsed time or turn off the apparatus when the total exposure exceeds a certain previously determined limit given in one or in a series of exposures. If the device indicates elapsed time, it should have a maximum range of 5 min.

j. The fluoroscopic screen shall be covered with transparent protective material having a lead equivalent of at

least 1.5 mm for 100 kv, or 1.8 mm for 130 kv.

\*k. For routine fluoroscopy the dose rate measured at the

panel or table top shall be less than 10 r/min.

\*I. An apron of ¼ mm lead-equivalent hanging between the patient and the fluoroscopist in horizontal fluoroscopy is recommended but shall not substitute for the wearing of a protective apron.

<sup>&</sup>lt;sup>5</sup> The margin requirement does not apply to installations where image amplifiers are used but a protective shield shall be provided in these installations so that the useful beam does not produce a radiation hazard.

\*6.2. Structural shielding.

Table 2 shows the barrier requirements for a workload of 4,000 ma-min/week (milliampere-minutes per week) and occupancy factors of one, one-quarter, and one-sixteenth.

6.3. Operation of apparatus.

a. The fluoroscopic equipment shall be operated only by a properly trained person authorized by the radiologist in charge to conduct fluoroscopic examinations.

b. The eyes of the fluoroscopist should be well dark-

adapted before he uses the fluoroscope.

c. Fluoroscopic work shall be performed in the minimum time possible using the lowest dose rate and smallest aperture consistent with clinical requirements. If a high-low switch is available, as suggested in section 6.1.h., then the low dose rate shall be used to locate the area of interest and the high dose rate only momentarily to explore the area of interest.

\*d. Unless measurements indicate that they are not needed, protective aprons shall be worn by the physician, nurse, technician, and all other persons within the fluoroscopic room who are frequently or habitually exposed to radiation hazard. The necessary lead equivalent of the apron should be determined from personnel monitoring results; but if no measurements have been made, the lead equivalent of the apron shall be at least ¼ mm.

\*e. Unless measurements indicate that they are not needed, protective gloves shall be worn by the fluoroscopist during every examination. The necessary lead equivalent of the gloves should be determined from personnel monitoring results; but if no measurements have been made, the gloves shall have a lead equivalent of at least ¼ mm and shall cover the whole hand—outer surface, palm, fingers, and wrist.

\*f. The hand of the fluoroscopist, either with or without gloves, shall never be placed in the useful beam unless the

beam is attenuated by the patient.

g. Only persons needed in the fluoroscopic room should be there during the X-ray exposure.

#### 7. Medical Radiographic X-ray Installations

For special requirements, see section 8, dental units; section 9, mobile units; section 10, fluorography; and sections 11 and 12, units operating above 150 kv.

#### 7.1. Equipment.

a. The tube housing shall be a diagnostic type.

b. Diaphragms or cones shall be used for collimating the useful beam and shall provide the same degree of protection

Table 2. Protection requirements a for fluoroscopic installations

1				
er e at a	20 ft	in 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	000	000
ondary barri ance of—	15 ft	in. 0.2 0	0.4	0.4
d for seconarea dista	10 ft	in. 0.8 0	1.0	1.7
ickness <sup>d f</sup> require target-to-occupied	8 ft	in. 1.3 0.2	1.4 0.3 0	2. 4 0. 4
Concrete thickness 4 trequired for secondary barrier e at a target-to-occupied-area distance of—	5 ft	in. 1.9 0.8 0	2.4 1.0 0	3.3
Concrete	3 ft	in. 2.6 1.6 0.5	8.2.0 0.8 8	4:01:1 0:02
target-to-	20 ft	## 0 0 0	000	000
urier • at a f—	15 ft	mm 0.1 0	0.0	0.2
condary barri distance of—	10 ft	mm 0.2 0	0.0 0	0.0
cness <sup>d</sup> required for secondary barrier • at a target-to- occupied-area distance of—	8 ft	mm 0.3	0.5	0.7
ness <sup>d</sup> requ	5 ft	mm 0.5 0	0.8 4.0	1.0 0.5 0
Lead thick	3 ft	mm 0.8 .55	1.1	1.3 0.9
Workload X	factor (WT)	ma-min/week 4,000 1,000 250	4,000 1,000 250	4,000 1,000 250
Tube poten- tial b		kvp 100	125	150

As the useful beam is always intercepted by the protective fluoroscopic screen cover, only secondary barriers are required.

Select over 10th Secondary cartering are required to 25 percent larger thicknesses of lead and 5 to 15 percent larger thicknesses of concrete than those given here for pushing potentials. These differences were estimated from the data of Miller and Kennedy at 275 to 525 kvep and from the data of rought at 250 kpp. As these experimenters used very different filtrations, the differences indicated here may be high, especially for concrete.

 For living quarters the product of workload and occupancy factor shall be multiplied by 4 for computing the protective barriers.

d These values are slightly different from those obtained by using the method in section 19.2.c. This is because the rules outlined in the appendix are approximate, whereas these values were obtained only after rigorous use of available data.

or a random that a target-to-skin distance of 50 cm is assumed (see section 19.2.b.).

Foction 19.3, indicates an approximate method of determining the shielding requirement for other building materials. The concrete requirements for this Handbook are based on a concrete density of 2.35 g/cm<sup>3</sup>.

as the tube housing, but may not require so thick a wall

because of the obliquity of the rays.

\*c. The total filter—permanently in the useful beam—shall be equal to at least 2½ mm of aluminum. With this filtration the aluminum HVL is approximately 2.4 mm at 100 ky.

\*d. The aluminum equivalent of the table top shall not be more than 1 mm at 100 ky when a Bucky diaphragm is used

under the table top.

e. It is recommended that a timer or radiation exposure meter be provided to terminate the exposure after a preset

time or exposure.

f. A "dead-man" type of exposure switch shall be used and so arranged that it cannot be operated outside a shielded area.

#### \*7.2. Structural shielding.

a. Radiographic-room floor and wall areas exposed to the useful beam shall have a primary protective barrier. The primary barrier in the walls shall extend to a height of 7 ft. (Generally the useful beam will not strike the wall above this height.) Unless there is reason to assume otherwise, the workload (W) used should be 1,000 ma-min/week at 100 kv, 400 at 125 kv, and 200 at 150 kv; and the use factor (U) should be one for the floor and one-quarter for all walls. Table 3 gives the primary barrier requirements for these conditions and also lower values of WUT for smaller occupancy factors (T).

b. Secondary protective barriers shall be provided in the ceiling and in those walls not having primary barriers. (See

table 3.)

c. Control apparatus for the radiographic equipment shall be located in an adjacent room or in a booth within the same room. The control booth either shall be so arranged that the radiation has to be scattered at least twice before entering the booth, or shall be provided with a protective door.

d. The operator shall be able to see the patient through a window of lead equivalent sufficient for the required protection and so placed that the operator is always in a shielded

position.

e. Special attention should be given to protection of undeveloped X-ray films, for these may be damaged by exposures totalling less than 1 mr. It is suggested that a small supply be stored in a lead-lined box in or near the X-ray rooms and the main supply stored elsewhere.

Table 3. Protection requirements for radiographic installations

SS c. e	et-to-	10 ft	in. 0 0 0	000	000	
Concrete thickness c. e required for secondary barrier fat a farget-to-occupied-area distance of—		8 ft	in. 0.4 0	000	000	
		5 ft	in. 0.8 0	0.5	000	
Concr	barr occu	3 ft	in. 1.6 0.5	1.5 0.3 0	0.0	
re-	t-to-	10 ft	m m 0 0 0	000	000	
less e	duned for secondary barrier fat a target-to- occupied-area distance of —	8 ft	m m 0 0 0 0	,000	000	
thickr	a lor er fat s pied-ar	5 ft	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	e.00	000	
Lead thickness e re-	dunc barric occup of —	3 ft		0.0	0 0 0 2	
7						
	Distance	pairier a	ft 90 50 25 15 8	70 40 20 10	60 30 16 8 8	
	Concrete thickness or required for primary barrier at a target-to-occupied-area distance of—	20 ft	1.22°.	2.1 0.9 0 0	000.00	
		te thickness ° requ rimary barrier at a ta cupied-area distance	15 ft	in. 22.7 11.5 0 0 0	2.7 0.3 0 0	2.7 1.3 0.1 0
ion			10 ft	2.22 0.32 0.32	9.50 0.00 0.00 0.00	3.7 0.8 0.8
protect			8 ft	2.8.9 0.0.5 0.0.5	4.2.1.0 0.2.2 0.22	2.5 1.1 0
Useful beam protection		5 ft	0.1.2.3.5.8. 0.1.2.2.5.6.4.	0.02.03.05	0.22.7	
Seful 1	Lead thickness required for primary barrier at a target-to-occupied-area distance of—	20 ft	0 0 0 1 3 1 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	7.000	000.37	
, 1		15 ft   2	0.00 0.00 0.00 0.00	20.00	20.00	
	uire a star			00000	00000	
	ess requires at	10 ft	m m 1.1 0.7 0.3 0.1	1.1	1.1 0.7 0 3 0	
	hickne y barr ipied-s	8 ft	## 1.2 0.8 0.5 0.2 0	0.00.0	0.00	
	Lead 1 mar	5 ft	mm 1.5 1.1 0.7 0.3	1.5 0.7 0.4	1.5 1.1 0.3 0.3	
	WUTP		ma-min per week 1,000 250 60 15	400 100 25 6 6 11½	200 50 12 1	
Tube poten- tial a			kvp 100	125	150	

<sup>a</sup> Constant potentials may require 15 to 25 percent larger thicknesses of lead and 5 to 15 percent larger thicknesses of concrete than those given here for pulsating potentials. These differences were estimated from the data of Miller and Kennedy at 275 to 525 kvcp and from the data of Trout at 50 to 250 kvp. As these experimenters used very different filtrations, the difference ences indicated here may be high, especially for concrete.

b W=workload, U=use factor, T=occupancy factor. Use factor for secondary barrier is always 1. For living quarters the product of workload and decupancy factor shall be multiplied by 4 for computing the protective

• Section 19.3, indicates an approximate method of determining the shield-

ing requirement for other building materials. The concrete requirements for this Handbook are based on a concrete density of 2.35 g/cm³.

A Distance from target at which the weekly useful beam dose will not exceed

0.3 r. These distances were computed from the outputs at zero barrier thickness given in figures 3 and 4 and the air absorption coefficient for double the minimum wavelength.

• These values are slightly different from those obtained by using the method in section 19.2.c. This is because the rules outlined in the appendix are approximate, whereas these values were obtained only after rigorous use of available data.

f Note that a target-to-skin distance of 50 cm is assumed (see section 19.2.b.).

#### 7.3. Operation of apparatus.

a. The installation should be so arranged that the useful beam is directed away from occupied areas as much as possible.

\*b. Deleted.

c. No person shall be regularly employed to hold patients during exposure nor shall anyone from the department of radiology ever be permitted to perform such service. The person holding the patient should wear protective gloves and a protective apron. No part of this person's body should be in the unattenuated useful beam.

d. Only persons required for the radiographic procedure

shall be in the radiographic room during exposure.

e. The radiographic field shall not be larger than clinically

necessary.

f. The patient shall not be exposed needlessly and the diagnostic objective should be attained without harmful overexposure. Table 4 is included as a guide to the dose rates to be expected in the radiographic voltage range.

Table 4. Typical patients' dose rates measured in air, 2½-mm Al total filter

Target-to-	. Tube potential							
skin distance	50 kvp	60 kvp	70 kvp	80 kvp	90 kvp	100 kvp	125 kvp	
in. cm 8 20 12 30 18 46 24 61 36 91 54 137 72 183	r/100 ma-sec 4. 0 1. 8 0. 8 . 4 . 2 . 1	r/100 ma-sec 6. 4 2. 8 1. 3 0. 7 . 3 . 1	r/100 ma-sec 9. 5 4. 2 1. 8 1. 1 0. 5 . 2	r/100 ma-sec 13. 0 5. 8 2. 5 1. 4 0. 6 . 3 . 2	r/100 ma-sec 18. 0 8. 0 3. 4 1. 9 0. 9 . 4 . 2	r/100 ma-sec 22. 0 9. 8 4. 2 2. 3 1. 1 0. 5 . 3	r/100 ma-sec 34. 2 15. 2 6. 7 3. 8 1. 7 0. 7	

#### 8. Dental Radiographic Installations

#### 8.1. Equipment.

a. The tube housing shall be a diagnostic type.

b. Diaphragms or cones shall be used for collimating the useful beam and shall provide the same degree of protection as the tube housing, but may not require so thick a wall because of the obliquity of the rays.

\*c. Included in section 8.3.f.

d. A timer shall be provided to terminate the exposure

after a preset time.

\*e. The exposure control switch shall be of the "dead-man" type and shall be provided with a cord sufficiently long that the operator can stand at least 5 ft from the patient for all exposures and well away from the useful beam. See table 5 for barrier requirements.

\*f. The total filter—permanently in the useful beam—shall be equal to at least 1½ mm of aluminum. With this filtration the aluminum HVL is approximately 1.2 mm at

65 kv,

#### \*8.2. Structural shielding.

a. Dental rooms containing X-ray machines shall be provided with a primary protective barrier at the sides and behind the chair, and in the floor and ceiling. Unless there is reason to assume otherwise, a workload of 200 ma-min/week should be used for a small general dental office and a workload of 800 ma-min/week for a busy dental radiographic room. A use factor of one-quarter should be assumed for all walls, and one-sixteenth for the floor and ceiling. Table 5 shows primary protective barrier requirements for these conditions and several occupancy factors. Primary protective barrier requirements for other conditions may be computed according to the method outlined in section 19.1.

b. Included in section 8.2.a.

c. In case dental X-ray equipment is installed in adjacent rooms, protective barriers as specified in section 8.2.a. shall

be provided between the rooms.

d. Table 5 may be used to compute the shielding requirements for cephalometric techniques where intensifying screens are used as the exposures are of the same order as those in ordinary techniques.

#### 8.3. Operation of apparatus.

a. The film should be held by the patient when an X-ray is taken or, if this is impossible, by some other person not habitually exposed to X-rays.

b. Only the patient shall be in the unattenuated useful

beam

c. Neither the tube housing nor the pointer cone shall be hand-held during exposure.

Table 5. Protection requirements for dental installations

nesso.,	second- at tar- pied- e of—	5 ft	is 0 0 1	000
te thick	Lead thickness • Concrete thickness • crequired for secondary barrier! at tanger, and parrier at tanget-to-occupied get-to-occupied area distance of—		in. 0.4 0	0.7
Concre			in. 0.7 0	1.2
ness e	cona- t tar- iied-	5 ft	m m 0 0 0	0.00
thick	required for second- ary barrier at tar- get-to-occupied- area distance of—	4 ft	mm 0.2 0	00.5
Lead	ary bargery get-tc area d	3 ft	mm 0.3 0	0.5
	Distance	Darrier a	ft 65 35 20 10	80 40 25 13
	pri-	20 ft.	in. 0.8 0.8	0.9
	ed for -occup	8ft 10ft 20ft 3ft 4ft 5ft 6ft 8ft 10ft	in. 1.5 0.8 0.3	0.02
	equire get-to	8 ft	in. 1.8 1.0 0.4	3.6
u	Concrete thickness crequired for primary barrier at a target-to-occupiedare a distance of—	6 ft	in. 2.1 1.3 0.6	2.5 1.7 0.7
Useful beam protection		5 ft	in. 2.4. 0.8 0.3	4.8.9.0
m pro	crete 1 ary ba ea dis	4 ft	in. 2.7 1.8 1.0 0.4	4.9. 9.4.9. 1.2.4.9
ul bea	Ö	3 ft	in. 3.0 2.1 1.3 0.6	2.4.2 2.9.1 1.6
Usefi	Lead thickness required for primary barrier at a target-to-occupied-area distance of—	20 ft	m m 0.3 0	1.0 0.6 0.6 .3 .1 .1
		10 ft	m m 0.4 .3	1.0
	ired f		m m 0.5 .3	0.7
	arget-	4ft 5ft 6ft	mm mm 0.7 0.6 .4 .4 .3 .2	0.9
	at a te of—	5 ft	m m 0.7	1.4 1.0 0.6 .3
	d thic arrier istanc	3 ft.   4 ft	mm 0.8 .3	1.6
-	. Lea bi di		# 0.8 6.5 7.5	0.0
	WUT		ma-min per week 800 200 50	800 200 50 12
	Tube poten- tials		kep 70	100

<sup>a</sup> Constant potentials may require 15 to 25 percent larger thicknesses of lead and 5 to 15 percent larger thicknesses of concrete than those given here for pulsating potentials. These differences were estimated from the data of Miller and Kennedy at 275 to 525 kvcp and from the data of Trout at 50 to 250 kvp. As these experimenters used very different filtrations, the differ-

ences indicated here may be high, especially for concrete.

W=workload, U=use factor, T=occupancy factor. Use factor for secondary barrier is always 1. For living quarters the product of workload and occupancy factor shall be multiplied by 4 for computing the protective bar.

• Section 19.3, indicates an approximate method of determining the shielding

requirement for other building materials. The concrete requirements for this Handbook are based on a concrete density of 2.35 g/cm³.

<sup>d</sup> Distance from target at which the weekly useful beam dose will not exceed Oct. T. These distances were computed from the outputs at zero barrier thickness given in figures 3 and 4 and the air absorption coefficient for double the minimum wavelength.

<sup>e</sup>These values are slightly different from those obtained by using the method in section 19.2.c. This is because the rules outlined in the appendix are approximate, whereas these values were obtained only after rigorous use of available data.

Note that a target-to-skin distance of 50 cm is assumed (see section 19.2.b.).

\*d. The position of the operator and/or assistant shall comply with the conditions presented in table 5 for WUT values corresponding to U=1 and T=1 (i.e., 100-percent occupancy of the area).

\*e. Hand-held fluoroscopic screens shall not be used.

\*f. The radiographic field should not be larger than clini-

cally necessary.

\*g. A cone should be used for all routine exposures. In some cases the cone must be removed for special techniques, as for example temporomandibular-joint exposures where a skin dose of 25 r or more may be obtained during a single exposure with 65 kvp, 1.5 mm aluminum total filter, and 60 ma-sec. The regular cone should be reinstalled immediately after completion of such exposures.

# 9. Special Requirements for Mobile Medical Diagnostic Equipment

#### 9.1. Equipment.

a. The tube housing shall be a diagnostic type.

b. All mobile equipment shall be provided with cones or metal frames so that the minimum target-to-skin distance is at least 12 in.

c. The total filter—permanently in the useful beam—shall be equal to at least 1½ mm of aluminum. With this filtration the aluminum HVL is approximately 1.2 mm at

65 kv.

\*d. The exposure control switch shall be of the "deadman" type and shall be provided with a cord sufficiently long that the operator can stand at least 6 ft from the patient for all exposures.

#### 9.2. Operation of apparatus.

a. The operator should stand as far as possible from the tube and patient during exposure, and should wear a protective apron.

b. The operator shall not stand in the useful beam.

c. An operator, standing at least 6 ft from the tube and patient, should not make more than 250 ma-min of exposure during any 1 week. This corresponds approximately to the weekly permissible dose. Rotation of operators is recommended for greater workloads.

\*d. A cone or metal frame shall be used to assure a mini-

mum target-to-skin distance of 12 in.

#### 10. Fluorographic Equipment

#### 10.1. Equipment.

a. The tube housing shall be a diagnostic type.

\*b. A collimator shall restrict the useful beam to the area of the fluorographic screen.

\*c. Deleted. Not necessary with change in section 10.1.b. \*d. A primary protective barrier (see table 6) shall be provided wherever the useful beam can strike. Placing this barrier around the hood and camera, or behind the camera, eliminates the need for primary protective barriers elsewhere.

\*e. The controls shall be operable only from behind a protective barrier. The observation window should be so placed that the useful beam is not usually directed at the

window.

#### \*10.2. Structural shielding.

a. Incorporated in section 10.1.d.

b. Table 6 shows the thickness of secondary protective barriers required under specified conditions.

### \*10.3. Operation of apparatus.

a. Incorporated in section 10.1.e.

b. Personnel monitoring is recommended for mobile installations.

c. All personnel shall be in shielded positions during exposure.

#### 11. Therapeutic X-ray Installations Operated at Potentials of 400 ky and Below

See section 11.4 for special requirements

#### 11.1. Equipment.

a. The tube housing shall be a therapeutic type.

b. Permanent diaphragms or cones shall be used for collimating the useful beam and shall afford the same degree of protection as the tube housing. Adjustable or removable beam-defining diaphragms shall not transmit more than 5 percent of the useful beam obtained with the maximum treatment filter. (See table 7.)

Table 6. Protection requirements for fluorographic installations

0	_ a		
ess o	second at upjed	10 ft	in. 0.1. 0.00
Concrete thickness o.erquired for secondary barrier t at a target-10-occupiedarea distance of—		8 ft	in. 0.7 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
		5 ft	in. 1.1. 0.1. 0.1. 0.1. 8
Con	ar ar	3 ft	in. 1. 8 0. 8 0. 8 0 0 0 0 0 0 0 0 0 0 0 0 0
e re-	at a nied- of-	10 ft	m m 00.1
Lead thickness e re-	quired for secondary barrier f at a target-to-occupied-area distance of—	8 ft	m m 00.2 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
thiel	y barn get-to sa dist	5 ft	mm 0.4
Lead	qu ari tar are	3 ft	mm 0.6 0.8 0.8
	Distance without	Dalilei "	110 110 86 85 85 10 10 10
	1 for t-to-	20 ft	in $in$ $in$ $in$ $in$ $in$ $in$ $in$
	narete thickness ° required for primary barrier at a target-to- occupied-area distance of—	8ft 10ft 15ft	in. 3.3.3. 1.0 0.2 0.2 0.3.0 0.3.0 0.3.0
u		10 ft	12.4.7. 0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.
Useful beam protection	nickne barrie I-area	8 ft	in. 12. 13. 13. 13. 13. 13. 13. 13. 13. 13. 13
m pro	Lead thickness required for primary barrier at a target-to-occupied-area distance of—occupied-area distance of—	5 ft	in 1.2.4.5.7.7.7.4.6.6.7.7.4.0.6.1.0.6.1.0.0.0.0.0.0.0.0.0.0.0.0.0.0
ıl bea		3 ff	23.5.7.8 23.5.7.0 23.5.7.0 24.2.0 24.2.0
Usefu		20 ft	### 0.9 0.9 0.7 0.7 0.3
		15 ft	## 1.0 0.7 0.7 0.1 0.0 0.0 0.0 0.0
	req er at a distar	8ft 10ft 15ft 20ft 3ft	## 1.3 0.9 0.5 0.2 1.1 0.7 0.7
	kness barrie I-area		## 11.0 0.6 0.6 0.8 0.8 0.8 0.8
	thic imary	5 it	## 1.77 0.09 0.90 1.11 0.77 3.3
	Lead pr occ	3 ft	## 1.22
WUT			ma-min per week \$ 2,000 125 30 1,000 1,000 250 60 15
Tube potential a			kep 100 150

• Constant potentials may require 15 to 25 percent larger thicknesses of lead and 5 to 15 percent larger thicknesses of concrete than those given here for pulsating potentials. These differences were estimated from the data of Miller and Konnedy at 275 to 525 kvcp and from the data of Trout at 50 to 250 kvp. As these experimentors used very different filtrations, the differences indicated here may be high, especially for concrete.

The workload, U = 10 ft. 1 cocupancy factor. Use factor for secondary barrier is always 1. For living quarters the product of workload and occupancy factor shall be multiplied by 4 for computing the protective barc Section 19.3, indicates an approximate method of determining the shield-ing requirement for other building materials. The concrete requirements for this Handbook are based on a concrete edensity of 2.35 g/cm.<sup>3</sup>

<sup>4</sup> Distance from target at which the weekly useful beam dose will not exceed oo.3 r. These distances were computed from the outputs at zero barrier thickness given in figures 3 and 4 and the air absorption coefficient for double the minimum wavelength.

 These values are slightly different from those obtained by using the method in section 19.2.c. This is because the rules outlined in the appendix are approximate, whereas these values were obtained only after rigorous use of available data.

 $^f$  Note that a target-to-skin distance of 50 cm is assumed (see section 19.2.b.).  $^s$  Equivalent to 3,000 40-ma-sec exposures per week.

c. The filter system shall be so arranged as to minimize the possibility of error. Filters shall be secured in place to prevent them from dropping out during treatment. The filter slot shall be so constructed that the radiation escaping

through it does not exceed 1 r/hr at 1 m.

d. The X-ray tube shall be centered and mounted so that it cannot turn or slide with respect to the aperture. A mark on the housing should show the location of the focal spot. Special precautions are necessary if the inherent filtration of the useful beam is very low. (See section 11.4.d.)

e. Devices shall be provided to immobilize the tube

housing during treatment.

f. Open valve-tubes may require shielding.

g. A timer shall be provided to terminate the exposure

after a preset time.

\*h. A beam-monitoring device fixed in the useful beam is recommended to indicate any error due to incorrect filter, milliamperage, or kilovoltage.

i. Lead rubber, lead foil, etc., used for limiting the field should transmit less than 5 percent of the useful beam. (See

table 7.)

Table 7. Guide to thickness of adjustable beam-defining diaphragms

	Approximate thickness of attenuating material necessary for the reduction of the useful-beam dose rate to 5 percent at a potential of—							
Attenu- ating material	60 kvp HVL=1.2 Ala Filter= 1½ Alb	100 kvp HVL=3.0 Ala Filter= 3 Alb	140 kvp HVL=0.5 Cua Filter= 1/4 Cub	200 kvp HVL=1.0 Cu <sup>a</sup> Filter= 0.5 Cu <sup>b</sup>	250 kvp HVL=3.0 Cu <sup>a</sup> Filter= 3 Cu <sup>b</sup>	400 kvp HVL=5.0 Cu <sup>a</sup> Filter= 5 Cu <sup>b</sup>		
Lead Brass	mm 0. 1 . 3	mm 0. 3 1. 2	mm 0. 7 4	<i>mm</i> 1. 0 9	m m 1. 7 18	mm 3. 5		

Half-value layer in millimeters.
 Approximate total filtration in millimeters.

#### 11.2. Structural shielding.

a. The required barriers should be a permanent part of the building or equipment. Movable lead screens are not recommended and shall not be depended upon above 100 ky.

b. The cost of structural shielding can be reduced considerably by locating the treatment rooms as remotely as possible from occupied areas, thus taking advantage of the reduction due to distance (inverse-square law). This is

particularly true for the higher voltages where thicker barriers are required. Corner rooms are especially suited; the outside walls and windows do not require any protection if they are sufficiently distant from other occupied buildings and areas. Consideration should be given to future occupancy of nearby areas. See table 8 for the minimum distance required. Where most treatments are given with the beam pointed toward the floor, special consideration shall be given to the protection of persons habitually in the rooms directly below the treatment room.

c. The control shall be located outside the treatment room

for voltages above 100 kv.

\*d. All wall, ceiling, and floor areas that can be struck by the useful beam, plus a border of at least 1 ft, shall be provided with primary protective barriers. Unless there is reason to assume otherwise; the work load should be taken at the largest value in the second column of table 8; and this should be multiplied by a use factor of one for the floor, one-quarter for the walls, and one-sixteenth for the ceiling; and then further multiplied by the occupancy factor for the area that the barrier protects (see table 10). Table 8 gives the barrier requirements for these conditions. All wall, ceiling, and floor areas that, because of restrictions in the beam orientation, cannot be struck by the useful beam shall be provided with secondary protective barriers.

\*e. Incorporated in section 11.2.d.

#### 11.3. Operating methods.

a. The installation shall be operated in compliance with

any limitations indicated by the protection survey.

b. No person who works with ionizing radiation shall be in the treatment room during exposure. No other person shall be there except when it is clinically necessary. If a person is required to hold the patient, he shall not be in the useful beam and shall be protected as much as practicable from scattered radiation.

c. Both the patient and the control panel shall be under observation during exposure. Provision for oral communication with the patient from the control room is desirable.

d. The useful beam should be directed toward unoccupied areas whenever consistent with therapeutic requirements.

\*e. The machine shall shut off automatically when the door to the treatment room is opened. After such a shut-off, it shall be possible to turn on the machine only from the control panel. Entrances to other areas of radiation hazard should be similarly protected by interlocks.

Table 8. Protection requirements for therapeutic installations

	>10	15 ft		١١ ص		609 ! !	
-9.7 F	sss b 4 re- secondary target-to- distance		in. 0 0 1	10011	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	4.8.1.	6.1
ess b	secon targ disi	10 ft	in. 0 0	0.8	0.9	6.0	3.33
hickne for at a d-area		8 ft	in. 0 0 0	2.7	2.6	6.6	3.9
rete t	quired barrier occupiec of—	5 ft	in. 0.5 0	2.2	3.8 2.0 0.9	8.1 6.0	9.6
Conc	quir barr occu	3 ft	in. 0.8 0	4. 0 3. 0 1. 9	5.0 3.3 1.7	9.7	9. 1 6. 9
	ier e	15 ft	m m 0 0 0	0.3	0.5	1.1 0.5	3.1
	barr -occup of—	10 ft	mm 0 0 0	0.5	0.7	2.4	3.8 2.4 1.3
	ndary get-to-	8 ft	m m 0 0 0	0.7	0.9	2.7	4.4
	Lead thickness a required for secondary barrier at a target-to-occupied-area distance of—	5 ft	mm 0.1 0	0.5	0.7	2.2.4.1.1.4.4.1.1.1.1.1.1.1.1.1.1.1.1.1.	8.8.3.
,	Lead for at are	3 ft	mm 0.2 0	0.9	1.7	3.7.1	6.4
	Dis- tance with-	par- rier °	ft 40 25 13 7	150 90 50 25 15	180 110 65 35 20	440 300 200 120 70	500 350 220 130 80
	uired at a dis-	20 ft	im. 0.3 0	3.4 1.1 0.3	5.7 2.3 0.9 0.9	11.2 9.1 7.0 4.8 2.9	12.9 10.6 8.4 6.1
	requ ier a	15 ft	in. 0.4 0	2.7 1.5 0.6	6.4 4.7 3.0 1.5 0.3	12. 0 10. 0 7. 9 5. 7 3. 7	13.8 11.6 9.3 7.1
	Concrete thickness b required for primary Darrier at a target-to-occupied-area distance of—	10 ft	in. 0.6 .3 .1	2.2 1.1 0.3	7.4 5.7 4.0 2.3 0.9	13. 2 11. 2 9. 1 6. 9 4. 8	15. 2 12. 9 10. 6 8. 4 6. 1
ction	thickn mary occu	8 ft	in. 0.7.0 0.7.0 0.00	5.2 3.9 1.4 0.6	0.8 0.2.4 1.3.8 1.3.8 1.3.8	14.0 11.8 9.7 7.6 5.5	15. 9 13. 6 11. 4 9. 1 6. 8
Useful beam protection	oncrete th for prime target-to-o	5 ft	in. 1.0 0.6 0.3	6.0 4.7 3.4 2.1 1.1	9.2 7.4 5.7 3.9 2.3	15.3 13.2 11.2 9.0 6.9	17. 4 15. 2 12. 9 10. 5 8. 4
oeam	Concept for tau	3 ft	in. 1. 2 0. 8 0. 8 0 . 3	7.0 5.7 3.0 1.8	10.4 8.7 7.0 5.2 3.4	16.9 14.8 12.7 10.6 8.4	19. 0 16. 8 14. 6 12. 2 10. 0
seful 1	for rget- of—	20 ft	mm 0.1 0	1.1 0.7 .4 .2	1.6 1.1 0.7 0	3.7 2.9 2.1 1.3 0.8	6.5 3.6 1.4 1.4
Ď	Lead thickness required for primary barrier at a target-to-occupied-area distance of—	15 ft		1.3 0.8 .5	1.8 0.9 5	3.2 2.4 1.6 1.0	2.2 2.9 1.8
	s req ier at rea dis	10 ft	mm 0.2 .1 .1 0	1.5 1.1 0.7 .4	2. 1 1. 6 1. 1 0. 7	23.7 2.9 2.0 1.3	%0.00.00.00 20004
	kness barri	8 ft	mm 0.2 0 0	1.7	2.3 1.8 0.8 4.	5.0 4.0 3.1 2.3 1.5	7.0.7 0.7.0 7.0 7.0
	thic	5 ft	0.2 0.2 0.1 0	2.0 1.5 1.1 0.7	2.7 2.1 1.6 1.1 0.7	7.4.8.2.2. 7.7.8.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.	10.0 8.2 6.5 5.0
	Lead pri	3 ft	## 0.3 0.3 0.1	2.3 1.8 1.4 1.0 0.6	3.1 2.5 1.4 1.0	6. 9. 9. 9. 9. 9. 9. 9. 9. 9. 9. 9. 9. 9.	11.3 9.5 7.7 6.1 4.6
	wuT a		ma-min per week 1,000 250 60 15	4,000 1,000 250 60 15	4,000 1,000 250 60 15	40,000 10,000 2,500 600 150	40,000 10,000 2,500 600 150
	Tube poten- tial		krp <sup>f</sup> 50	100	150	200	250

Protection requirements for therapeutic installations—Continued TABLE 8.

l re-	dary t-to-	10 ft   15 ft	in.	7.1	7.4						
o q sso	Concrete thickness b d required for secondary barrier at a target-to-occupied-area distance of—		secon targe dist		secon targe dist		ness b secon targe dist		in.	8.4	8.9
hickne for at a t l-area		8 ft	in.	6.7	9.8						
rete t	ired rrier supjec	5 ft	in.	8.4	8.8						
Conc	quire barr occu of—	3 ft	in.	12.5	13.4						
	ier e	15 ft	mm	5.5	2.0						
	Ledu Linckness a required for secondary barrier e at a target-to-occupied- area distance of—	10 ft	mm	7.0	6.5						
	eaa unekness a r for secondary at a target-to-oc area distance of-	8 ft	mm	8.0	11.5 7.5 4.0						
	secona targa dist	5 ft	mm	10.0	14. 5 10. 0 6. 0						
	for at are	3 ft	m m	9.0	13.0						
	Distance with out	rier e	ft	500 350 220 130 80	450 300 190 120 60						
	Concrete thickness b required for primary barrier at a target-to-occupied-area distance of—	20 ft	in.	15.0 12.6 10.2 7.9 5.5	15.5 13.0 10.5 8.0 5.5						
		15 ft	in.	17.4 15.9 15.0 13.5 12.6 11.2 10.2 8.9 7.9 6.5	16. 5 14. 0 11. 5 9. 0 6. 5						
		10 ft   15 ft	in.	17.4 15.0 12.6 10.2 7.9	18. 1 15. 5 13. 0 10. 5 8. 0						
tion		8 ft	in.	18.2 15.7 13.4 11.0 8.6	18.9 16.4 113.8 111.4 8.9						
protec		5 ft	in.	19.8 17.4 15.0 12.5 10.2	20. 6 18. 1 15. 5 13. 1 10. 5						
Useful beam protection		3 ft	in.								
seful b	for get- of—	20 ft	mm	12.1 9.2 6.5 2.3	18. 5 14. 0 10. 0 6. 5 3. 6						
Ω	uired a tan tance	15 ft	mm	13.5 10.5 7.6 5.1	23. 2 20. 4 18. 5 15. 6 14. 0 11. 5 10. 1 8. 0 6. 6 4. 7						
	req er at ea dis	10 ft	m m	15.4 12.1 9.2 6.5	23. 2 18. 5 14. 0 10. 1 6. 6						
	Lead thickness required for primary barrier at a target-to-occupied-area distance of—	8 ft	mm	16.5 13.1 10.1 7.3 4.9	25. 0 20. 0 15. 1 11. 4 7. 6						
	thic imary occup	5 ft	mm	19.0 15.4 12.1 9.0 6.5	28. 0 23. 2 18. 5 14. 1 10. 1						
	Lead pri to-	3 ft	mm	21.6 19.0 18.0 15.4 14.5 12.1 11.3 9.0 8.5 6.5	32. 5 28. 0 27. 0 23. 2 22. 0 18. 5 17. 3 14. 1 13. 0 10. 1						
	WUT a			40,000 10,000 2,500 600 150	12, 000 3, 000 750 200 50						
	Tube poten- tial		kvcp s		400						

\*W=workload, U=use factor, T=occupancy factor. Use factor for secondary harrier is always 1. For living quarters the product of workload and occupancy factor shall be multiplied by 4 for computing the protective barriers.

requirement for other building materials. The concrete requirements for this Handbook are based on a concrete density of 2.35 g/cm³.

• Distance from target at which the weekly useful beam dose will not exceed 0.3 r. These distances were computed from the outputs at zero barrier

b Section 19.3 indicates an approximate method of determining the shielding

thickness given in figures 3 and 5 and the air absorption coefficient for double

the minimum wavelength.

4 These values are slightly different from those obtained by using the method in section 19.2.c. This is because the rules outlined in the appendix are approximate, whereas these values were obtained only after rigorous use

• Note that a target-to-skin distance of 50 cm is assumed (see section 19.2.b.), Constant potentials may require 15 to 25 percent larger thicknesses of lead and 5 to 15 precent larger thicknesses of concrete than those given here for pulsating potentials. These differences were estimated from the data of Miller and Kennedy at 275 to 525 kvcp and from the data of Miller and Kennedy as 185 to 525 kvcp and from the data of 17 put at 50 to 550 kvcp. As these experimenters used very different filtrations, the differences indicated here may be high, especially for concrete.

a Pulsating potentials may require 10 to 20 percent smaller thicknesses of concrete than those given here for constant potentials. These differences were estimated from the data of Miller and Kennedy at 275 to 525 kvcp and from the data of Miller and Kennedy at experimenters used very different filtrations, the difference indicated here may be high, especially for concrete.

of available data.

11.4. Special requirements for X-ray therapy equipment operating at potentials of 50 kv and below.

a. Installations shall comply with the general requirements of sections 11.1, 11.2, and 11.3 except that the operator is allowed to be in the treatment room during irradiation. He shall take special care to avoid exposure to the useful beam. Structural shielding generally is not required. Because of the short target-window distance and low inherent filter, the dose rate at the tube aperture may be extremely high.

b. The term "grenz ray" is used to describe very soft X-rays produced at potentials below 20 kv. Because of the low penetration of these rays, it is not necessary to shield the operator or other persons in the treatment room unless they are exposed to the useful beam at a target distance of less than 3 m. However, it should be emphasized that grenz rays are X-rays and that they may cause the same type of injurious effects as harder X-rays, although limited

to superficial layers of tissue.

\*c. The term "contact therapy" is used to describe short-distance irradiation of accessible lesions. The potential is usually 40 to 50 kv. Because the dose rate at the surface of the window of the tube housing is sometimes as high as 10,000 r/min, rigid precautions are necessary to prevent accidental exposure to the useful beam. The leakage radiation at the surface of the tube housing shall not exceed 0.1 r/hr. If the tube is to be hand-held during irradiation, the operator shall wear protective gloves and apron. When the apparatus is not being used for treatment, a cap (0.5-mm lead equivalent) shall cover the aperture window of the tube housing. The automatic timer shall be adjustable in graduations at least as fine as 1 sec.

d. Special precautions shall be required in the therapeutic application of apparatus constructed with beryllium or other low-filtration windows for both grenz-ray and higher kilovoltage therapy. As a dose rate of more than 1 million roentgens per minute is possible at the aperture, adequate shielding shall be required against the useful beam; and special safeguards are essential to avoid accidental exposures.

\*e. Machines having an output of more than 1,000 r/min at any accessible place shall not be left unattended without the power being shut off, first at the control and then at the primary disconnecting means (i. e., wall plug or main switch). These shall never be turned off in the reverse

order.

# 12. Therapeutic X-ray Installations Operated at Potentials above 400 ky

#### 12.1. Equipment.

a. The tube housing shall be a therapeutic type.

b. Permanent diaphragms or cones shall be used for collimating the useful beam and shall afford the same degree of protection as the tube housing. Adjustable or removable beam-defining diaphragms shall not transmit more than 5 percent of the useful beam. For 1 million-volt machines, this requires approximately 21 mm of lead; for 2 million-volt, approximately 43 mm of lead.

c. Devices shall be provided to immobilize the tube

housing during treatment.

d. A beam-monitoring device fixed in the useful beam is recommended to indicate any error due to incorrect filter, milliamperage, or kilovoltage.

e. A timer shall be provided to terminate the exposure

after a preset time.

\*f. Incorporated in section 12.3.c.

#### 12.2. Structural shielding.

a. The general rules of sections 4 and 5 shall be followed

for structural shielding.

\*b. The cost of structural shielding can be reduced considerably by locating the treatment rooms as remotely as possible from occupied areas, taking advantage of the reduction due to distance (inverse-square law). Corner rooms are especially suited; the outside walls and windows do not require any protection if they are sufficiently distant from other occupied buildings and areas. Consideration should be given to future occupancy of nearby areas. See table 9 for the minimum distance required. Where most treatments are given with the beam pointed toward the floor, special consideration shall be given to the protection of persons habitually in the rooms directly below the treatment room. All wall, ceiling, and floor areas that might be struck by the useful beam, plus a border of at least 1 ft, shall be provided with primary protective barriers. Unless there is reason to assume otherwise; the workload should be taken at the largest value in the second column of table 9; and this should be multiplied by a use factor of one for the floor, one-quarter for the walls, and one-sixteenth for the ceiling;

Table 9. Protection requirements for therapeutic installations

e re-	/ bar- occu- f—	20 ft	in. 8.0 5.0	13.5	10.0
Concrete thickness • • required for secondary barrier fat a target-to-occupied-area distance of—		15 ft	in. 9.0 6.0 3.5	15. 0 12. 0 9. 0	8.0 4.5
		10 ft	in. 11. 0 8. 0 5. 0	17. 0 13. 5 10. 5	13.0
rete	ired f r f at sd-are	8 ft	in. 12.0 9.0 6.0	19.0	14. 5 11. 0 8. 0
Conc	qu rie pic	5 ft	in. 13.5 11.0 8.0	22. 0 17. 0 13. 5	16.5
ired	ier f	20 ft	mm 15 9	30°	23 4 4
requ	barr occup of—		mm 21 12 5	37 25 15	30
ness	secondary barrier target-to-occupied distance of—	10 ft   15 ft	mm 28 15 9	30 30	43 12 12
Lead thickness * required	for secondary barrier at a target-to-occupied- area distance of—	8 ft	mm 32 20 11	56 37 23	28 28 15
Lead	for at a area	5 ft	mm 40 28 15	72 50 30	67 23 23
	Distance without	rierd	ft 700 450 290 170 90	1, 500 1, 100 800 500 300	900 620 400 120
	Concrete thickness *required for primary barrier at a target-to-occupied-area distance of—	30 ft	<i>in.</i> 22. 0 18. 5 15. 0 11. 5 8. 0	33.0 23.0 18.0 18.0	31. 0 26. 0 21. 0 16. 0 11. 0
		20 ft	in. 24. 0 20. 5 17. 0 13. 5	41. 0 36. 0 31. 0 26. 0 21. 0	34. 0 29. 0 24. 0 19. 0 14. 0
		15 ft	in. 25. 5 22. 0 18. 5 11. 5	23.83.0 23.0 23.0 23.0	36. 0 31. 0 26. 0 21. 0 16. 0
tion		10 ft	in. 27. 5 24. 0 20. 5 17. 0 13. 5	46.0 41.0 36.0 31.0 26.0	39. 0 34. 0 29. 0 24. 0 19. 0
Useful beam protection		8 ft	in. 29. 0 25. 5 18. 5 14. 5	47. 0 42. 0 37. 0 32. 0 27. 0	40. 0 35. 0 30. 0 25. 0
)eam		5 ft	in. 31. 0 27. 5 24. 0 20. 5 17. 0	51. 0 46. 0 41. 0 36. 0 31. 0	44. 0 39. 0 34. 0 29. 0 24. 0
seful l	pri- t-to-	30 ft	mm 85 70 55 35	180 155 130 105 80	145 120 95 75 50
Û	ed for targe ace of	20 ft	m m 95 80 65 45	190 165 140 115	155 130 105 85 60
	equir at a distan	15 ft	mm 100 85 70 55	205 180 155 130 105	170 145 120 100 75
	rness n arrier 1-area	10 ft   15 ft	mm 110 95 80 65 45	215 190 165 140 115	180 155 130 110 85
	Lead thickness required for primary barrier at a target-to-occupied-area distance of—	8 ft	mm 115 100 85 70 50	225 200 175 150 125	190 165 140 120 95
	Lead	5 ft	mm 125 110 95 80 80	240 215 190 165 140	205 180 155 135 110
	WUTb		ma-min per week 4,000 1,000 250 60	84,000 1,000 250 60 15	h 500 125 30 8
	Tube poten- tial s		kvcp 1,000	2,000	2,000

a Pulsating potentials require the order of 10 percent less thickness than those given here for constant potentials.

those given here for constant potentials.

b W = workload, U = use factor, T = occupancy factor. Use factor for secondary barrier is always 1. For living quarters the product of workload and occupancy factor shall be multiplied by 4 for computing the protective barriers

Section 19.3 indicates an approximate method of determining the shield-ing requirement for other building materials. The concrete requirements for this Handbook are based on a concrete density of 2.35 g/cm<sup>3</sup>.
 A Distance from target at which the weekly useful beam dose will not exceed 0.3 r. These distances were computed from the outputs at zero barrier

thickness given in figure 6 and the air absorption coefficient for double the minimum wavelength.

• These values are slightly different from those obtained by using the

 These values are slightly different from those obtained by using the method in section 19.2.c. This is because the rules outlined in the appendix are approximate, whereas these values were obtained only after rigorous use of available data.

t Note that a target-to-skin distance of 50 cm is assumed (see section 19.2.b.),  $\kappa$  A maximum value of WUT=4,000 is assumed for a resonance-type gen-

ration.

b A maximum value of WUT=500 is assumed for a Van de Graaff-type cenerator.

and then further multiplied by the occupancy factor for the area that the barrier protects (see table 10). Table 9 gives the barrier requirements for these conditions. All wall, ceiling, and floor areas that, because of restrictions in the beam orientation, cannot be struck by the useful beam shall be provided with secondary protective barriers.

\*c. Included in section 12.2.b.

\*d. Included in section 12.2.b. \*e. Included in section 12.2.b.

f. A maze, with the access door at the entrance where it can be reached only by multiply-scattered X-rays, may so reduce the thickness requirement for the door as to be an over-all economy.

g. The control shall be located outside the treatment room.

h. The observation window shall have a lead equivalent at least as great as that required for the surrounding wall.

### 12.3. Operating methods.

a. The installation shall be operated in compliance with any limitations indicated by the protection survey.

b. Both the patient and the control panel shall be under observation during exposure. Provision for oral communication with the patient from the control room is desirable.

\*c. The machine shall shut off automatically when the door to the treatment room is opened. After such a shutoff, it shall be possible to turn on the machine only from the control panel. Entrances to other areas of radiation hazard should be similarly protected by interlocks.

### \*III. Electrical Protection

Chapter III, sections 13 through 18, has been deleted in this revision, as it has been decided that electrical shock and fire hazards are not within the scope of this Handbook. For material on this subject see, for example, the pertinent sections of the latest edition of the National Electrical Code.

### IV. Appendix

### \*19. Determination of Protective Barriers

Tables 2, 3, 5, 6, 8, and 9 give directly the required thickness of lead or concrete for average weekly workloads, usual range of distance, and common degrees of occupancy. For

other conditions, the curves in this section should be used, together with the pertinent equations given below.

### 19.1. Primary protective barriers.

Formulas for computing the primary protective barrier can be derived with the aid of figure 8. The maximum weekly dose in roentgens permitted at a position, A, in occupied space is 0.3/T, where T is the occupancy factor (see table 10). By the inverse-square law, the permitted dose at 1 m from the target is  $\frac{0.3}{T} \left(\frac{D}{3.28}\right)^2$  where the 3.28 factor changes the distance, D, from feet to meters. This dose is produced by the portion of the workload, WU, during which the beam is pointed at A. It is convenient to determine the ratio,

$$K = \left[\frac{0.3}{T} \left(\frac{D}{3.28}\right)^2\right] / WU,$$

which can be rounded off to

$$0.03 \ D^2/WUT.$$
 (1)

This ratio  $^6$  gives the roentgens per milliampere-minute permitted at 1 m from the target and is thus in the same unit as the ordinates of the curves in this section. The attenuation curve for a particular tube potential therefore indicates the barrier thickness required for different values of K. For illustrative purposes, the barrier is placed immediately in front of the tube in figure 8. Actually this same barrier may be placed anywhere between the tube and position A.

### 19.2. Secondary protective barriers.

As the qualities of the scattered and leakage radiation are different, the barrier requirement for each is computed separately. The secondary protective barrier is then determined from these results.

a. The leakage radiation has already been hardened in its passage through the tube housings so that its HVL has attained a constant value that depends only on the tube potential. Table 11 lists such HVL thicknesses. The number of HVL's required in the secondary barrier for leakage radiation depends upon (1) the type of tube housing (which limits the permissible leakage), (2) the distance from the tube to occupied areas, and (3) the weekly operating time of the tube.

 $<sup>^6</sup>$  Note that WT must be multiplied by 4 when computing protection for living quarters (See definition of **Maximum permissible dose**.)

Representative values are listed in table 12 for diagnostictype tube housings and in table 13 for therapeutic-type tube housings. The barrier thickness can be obtained by multiplying the number of half-value layers by the HVL for the tube

voltage.

b. Figure 9 assists in formulating the equations for computing the barrier requirements for 90-degree-scattered radiation. As in section 19.1 the permissible weekly dose at position A is 0.3/T. By the inverse-square law the dose at 1 m from the scattering source is  $\frac{0.3}{T}\left(\frac{D}{3.28}\right)^2$  or approximately 0.03  $D^2/T$ , where the 3.28 factor changes the distance, D, from feet to meters. It has been determined experimentally that the incident dose rate for most practical cases is 1,000 times larger than 0.03  $D^2/T$  or 30  $D^2/T$ . If it is assumed that the scatterer is at 50 cm from the target, the permitted dose

in the useful beam at 1 m from the target is  $\frac{30}{T} \left(\frac{1}{2}\right)^2 D^2$  or approximately 7  $D^2/T$ . Again it is convenient to obtain the ratio

$$K_{400} = \frac{7D^2}{WT}$$
 (for 400 kv and below). (2)

The barrier for shielding against scattered radiation is always placed between the scatterer and position A, but for the derivation only it can be considered to be as indicated in figure 9. Actually the quality of the scattered beam may be different from that of the useful beam, but to a sufficient approximation for barrier computation the two may be considered to be the same for 400 kv and below. The curves in this section show the barrier thickness required for different values of  $K_{400}$  and the tube potential. For 1,000- and 2,000-kv X-rays, the scattered radiation can be assumed to have the same quality as 500-kv X-rays. As the 1,000- and 2,000-kv outputs are respectively 20 and 300 times the output for a 500-kv tube, the values of K are

$$K_{1,000} = \frac{0.35 D^2}{WT}$$
 (for 1,000 kv). (3)

$$K_{2,000} = \frac{0.023 D^2}{WT}$$
 (for 2,000 kv). (4)

The 500-kv attenuation curves of figures 6 and 7 may be used to obtain the barrier requirements for different values of K

computed from equations (3) and (4).

c. If the barrier requirements of sections 19.2.a. and 19.2.b. are approximately equal, the secondary barrier thickness is obtained by adding 1 HVL to the larger requirement. If one of the barrier requirements is at least 3 HVL greater than the other, then it alone will govern the thickness requirement of the secondary protective barrier.

19.3 Determination of barrier thickness for other building materials.

Many materials other than concrete are used for structural purposes. Often they also attenuate the radiation appreciably and therefore can fulfill at least part of the barrier requirements. Unfortunately there are no detailed attenuation data for many of these materials. However, to a first approximation, their concrete equivalents may be calculated on the basis of density alone. Concrete equivalent is equal to the density of the material multiplied by the thickness of the material and divided by 2.35. As these materials are of higher atomic number than concrete, this approximation tends to underestimate the concrete equivalent (i. e., to lead to somewhat more protection than needed). Table 14 lists some common building materials and the range of densities.

# Table 10. Occupancy factors

For use as a guide in planning shielding where complete occupancy data are not available.

### Full occupancy (T=1)

Control space, wards, office workrooms, darkrooms, corridors and waiting space large enough to hold desks, restrooms used by the radiologic staff and others routinely exposed to radiation, play areas, occupied rooms in adjacent buildings.

## Partial occupancy (T=1/4)

Corridors in X-ray departments too narrow for inture desk space, restrooms not used by radiologic personnel, unattended parking lots, utility rooms.

Occasional occupancy (T=1/6)

Stairways, automatic elevators, streets, closets too small for future workrooms, toilets not used by radiologic personnel.

Table 11. Half-value layer a

A ftennating material				HVL	HVL for a tube potential of—	potential c	-Jc				
Areecing marchan	50 kvp	70 kvp	100 kvp	125 kvp	150 kvp	200 kvp	250 kvp	300 kvcp	400 kvcp	1,000 kvcp	50 kvp 70 kvp 100 kvp 125 kvp 150 kvp 200 kvp 250 kvp 300 kvcp 400 kvcp 1,000 kvcp 2,000 kvcp
Lead (mm) Concrete (in.)	0.05	0.18	0.24	0.27	0.3	0.5	0.8	1.5	1.3	8.0	12 2. 45

a Approximate values determined at high filtration.

Table 12. Structural shielding necessary to protect against leakage through a diagnostic-type tube enclosure

(0.1 r/hr at 1 m, by definition)

Distance from	Operating time					
target	5 hr/week	10 hr/week	15 hr/week	25 hr/week	40 hr/week	
ft 3 4 5 6 7 8 9 10 12	No. of HVL 1. 0 0. 2 0	No. of HVL 2. 0 1. 2 0. 5 0	No. of HVL 2. 6 1. 8 1. 1 0. 6 . 1	No. of HVL 3.3 2.5 1.8 1.3 0.8 .5 .1	No. of HVL 4.0 3.2 2.5 2.0 1.5 1.2 0.8 .5 0	

Table 13. Structural shielding necessary to protect against leakage through a therapeutic-type tube enclosure

(1 r/hr at 1 m, by definition)

1							
Distance from	Operating time ·						
target	5 br/week	10 hr/week	15 hr/week	25 hr/week	40 hr/week		
3 4 5 6 7 8 9 10 12 15 20 30	No. of HVL 4.3 3.4 2.8 2.3 1.8 1.4 1.1 0.8 .4 0	No. of HVL 5.3 4.4 3.8 3.3 2.8 2.4 2.1 1.8 1.3 0.7	No. of HVL 5.9 5.0 4.4 3.9 3.4 3.1 2.7 2.4 1.9 1.3 0.4 0	No. of HVL 6.6 5.7 5.1 4.6 4.2 3.8 -3.4 3.1 2.7 2.0 1.2 0	No. of HVL 7. 3 6. 4 5. 8 5. 3 4. 8 4. 4 4. 1 3. 8 3. 3 2. 7 1. 8 0. 7		

Table 14. Densities of commercial building materials

Material	Density range	Density of average sample
Brick Granite Jimestone Marble Plaster Sandstone Siliceous concrete	2. 60 to 2. 70 1. 87 to 2. 69 2. 47 to 2. 86 	g/cc 1. 9 2. 63 2. 30 2. 70 1. 54 2. 20

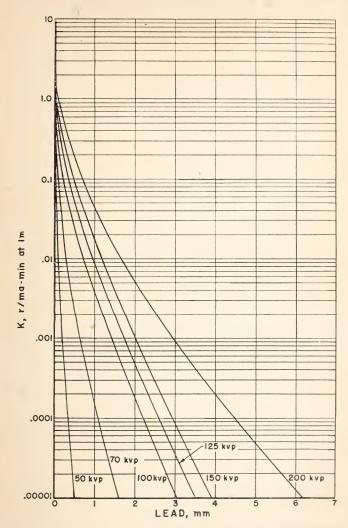


Figure 3. Attenuation in lead of X-rays produced by potentials of 50 to 200 kilovolts peak.

The measurements were made with a 90° angle between the electron beam and the axis of the X-ray beam and with a pulsed wave form. The curves at 50 and 70 kvp were obtained by interpolation and extrapolation of available data (Braestrup, 1944). The filtrations were 0.5 mm of aluminum for 50, 70, 100, and 125 kvp, and 3 mm of aluminum for 150 and 200 kvp.

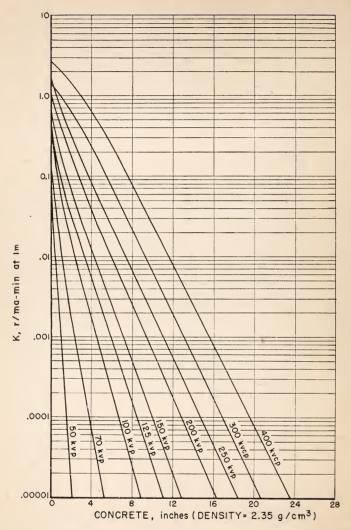


Figure 4. Attenuation in concrete of X-rays produced by potentials of 50 to 400 kilovolts

The measurements were made with a 90° angle between the electron beam and the axis of the X-ray beam. The curves for 50 to 250 kvp are for a pulsed wave form. The filtrations were 1 mm of aluminum for 50 kvp, 1½ mm of aluminum for 70 kvp, 2 mm of aluminum for 125 to 250 kvp (Trout et al. 1955). The 300- and 400-kvcp curves were interpolated from data obtained with a constant potential generator and inherent filtration of approximately 3 mm of copper (Miller and Kennedy, 1955).

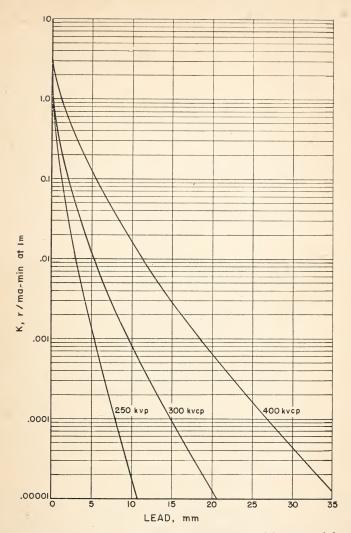


Figure 5. Attenuation in lead of X-rays produced by potentials of 250 to 400 kilovolts

The measurements were made with a 90° angle between the electron beam and the axis of the X-ray beam. The 250-kvp curve is for a pulsed wave form and a filtration of 3 mm of aluminum (Braestrup, 1944). The 300- and 400-kvcp curves were interpolated from data obtained with a constant potential generator and inherent filtration of approximately 3 mm of copper (Miller and Kennedy, 1955).

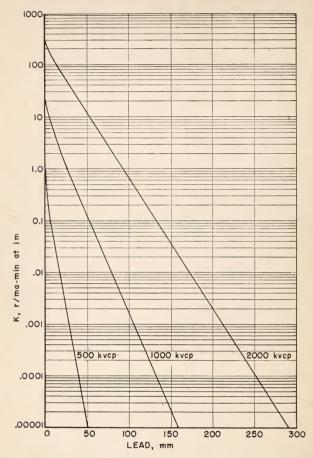


Figure 6. Attenuation in lead of X-rays produced by potentials of 500 to 2,000 kilovolts constant potential.

The measurements were made with a 0° angle between the electron beam and the axis of the X-ray beam and with a constant potential generator. The 500- and 1,000-kvcp curves were obtained with filtration of 2.8 mm of tungsten, 2.8 mm of copper, 2.1 mm of brass, and 18.7 mm of water (Wyckoff et al. 1948). The 2,000-kvcp curve was obtained by extrapolating to broad-beam conditions (E. E. Smith) the data of Evans et al. 1952. The inherent filtration was equivalent to 6.8 mm of lead.

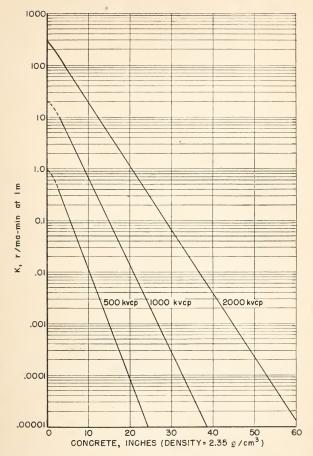


Figure 7. Attenuation in concrete of X-rays produced by potentials of to 2,000 kilovolts constant potential.

The measurements were made with a 0° angle between the electron beam and the axis of the X-ray beam and with a constant potential generator. The 500- and 1,000-kvep curves were obtained with filtration of 2.8 mm of tungsten, 2.8 mm of copper, 2.1 mm of brass, and 18.7 mm of water (Wyckoff, et al. 1948). The 2,000-kvep curve was obtained by extrapolating to broad-beam conditions (E. E. Smith) the data of Evans, et al, 1952. The inherent filtration was equivalent to 6.8 mm of lead.

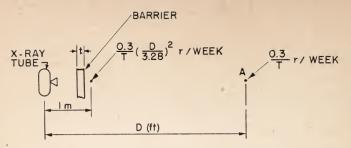


Figure 8. The steps in the computation of equation (1) for the useful beam.

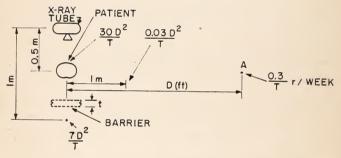


Figure 9. The steps in the computation of equation (2) for scattered radiation.

Note that the patient is irradiated at  $0.5~\mathrm{m}$  but that the value of K is evaluated at the  $1~\mathrm{m}$  distance. Note also that the barrier as pictured is placed in the useful beam but is actually in the beam of scattered radiation.

- \*20. Incorporated in appropriate sections.
- \*21. Incorporated in appropriate sections.
- \*22. Incorporated in appropriate sections.

\*23. Deleted.

### 24. References.

C. B. Braestrup, X-ray protection in diagnostic radiology, Radiology **38**, 207 (1942).

C. B. Braestrup, Industrial radiation hazards, Radiology 43, 286 (1944). C. B. Braestrup and H. O. Wyckoff, Protection requirements of one million volt and two million volt roentgen ray installations, Radi-

ology 51, 840 (1948). W. W. Evans, R. C. Gronke, K. A. Wright, and J. G. Trump, Absorption of 2 Mev constant potential roentgen rays by lead and concrete. Radiology 58, 560 (1952). Curves from this paper were extrapolated to broad-beam conditions by E. E. Smith, National Physical Laboratory.

J. B. Johnson, Materials of Construction, 8th ed. (John Wiley &

Sons, Inc., New York, N. Y., 1939).

J. H. Martin, Radiation doses received by the skin of a patient during routine diagnostic X-ray examinations, Brit. J. Radiol. 20, 279 (1947).

W. Miller and R. J. Kennedy, X-ray attenuation in lead, aluminum, and concrete in the range 275–525 ky, Radiology (Dec. 1955).

R. H. Morgan, Physical problems of fluoroscopy and spot film radiog-

raphy, Radiology **52**, 786 (1949). H. C. Plummer, Brick and Tile Engineering, 1st ed. (Structural Clay

Products Inst., Washington, D. C., 1950).

E. D. Trout and R. M. Gager, Protective materials for field definition in radiation therapy, Am. J. Roentgenol. 63, 396 (1950).

E. Dale Trout, et al., Broad-beam attenuation of 50–250 kvp X-ray beams in aluminum, Radiology 64, 114(A) (1955), and private communication.

W. J. Updegrave, Temporomandibular articulation—X-ray examina-

tion, Dental Radiography and Photography 26, No. 3, 41 (1953). H. O. Wyckoff, R. J. Kennedy, and W. R. Bradford, Broad- and narrow-beam attenuation of 500-1,400 kv X-rays in lead and concrete, Radiology 51, 849 (1948).

Statement on blood counts of National Committee on Radiation Protection, Radiology 63, 428 (1954); Am. J. Roentgenol. Radium Therapy Nuclear Med. 72, 510 (1954).

National Electrical Code, National Fire Protection Association, 60

Batterymarch Street, Boston 10, Mass.

National Bureau of Standards Handbook 51, Radiological monitoring methods and instruments, 1952 (Superintendent of Documents, U. S. Government Printing Office, Washington, D. C.).
National Bureau of Standards Handbook 57, Photographic dosimetry

of X- and gamma rays, 1954 (Superintendent of Documents, U. S.

Government Printing Office, Washington 25, D. C.). National Bureau of Standards Handbook 59, Permissible dose from external sources of ionizing radiation, 1954 (Superintendent of Documents, U. S. Government Printing Office, Washington 25, D. C.).

Submitted for the National Committee on Radiation Protection.

LAURISTON S. TAYLOR, Chairman.

Washington, April 5, 1955.





