**RADIATION ADVISORY COMMITTEE MEETING**

 **Minutes**

 **October 12, 2016**

**Call to Order – Public Session**

Steve Reese, chair, called the Radiation Advisory Committee (RAC) into public session on October 12, 2016 at 10:05 a.m. in Conference Room 1E of the Portland State Office Building.

 **Members Present Members Absent**

 Reese, Steve, PhD (Chairman) Young, Scott

Bremner, DMD, Fred

Waldenburg, Rick

Smith, Barbara

Stevens, Donna

Cyman, Juliana

**OHA Representatives**  **Guests**

Carpenter, Todd Brenzel, Luke, Oregon Imaging

Grater, Connie Wray, Michael, ORANA

High, ND, Jere Ghafouri, Sara, ORNA (Attorney)

Howe, David Kihs, Linda, ODAA

Riley, Nic Hess, Catherine, Legacy Health

Wendt, Rick Systems

Villamar, Glenda Sandau, Ursula, Legacy Health

Leigh, Riven, OIS Systems

 Buelt, Diane, Legacy Health Systems

**Introduction of Members and Guests**

Radiation Advisory Committee members, Radiation Protection Services (RPS) personnel and guests introduced themselves.

**Approval of Minutes**

Minutes from the June 8, 2016 meeting were sent to the members for their review, prior to the meeting.

**Motion**

Barbara Smith moved and Dr. Fred Bremner seconded the motion to approve the June 8, 2016 Radiation Advisory Committee minutes as drafted.

The motion carried unanimously.

**RPS Staffing**

Connie Grater plans to retire on December 13, after more than 9 years with RPS.

David mentioned RPS is moving a Health Physicist (Eric Packard) from the X-ray program to the RML program, in order to meet the NRC’s minimum staffing requirements.

David also reported that RPS Administrative Assistant Nic Riley is going to assume several of Connie’s responsibilities, and RPS will hire an administrative assistant. The hiring process generally takes a minimum of 3 months.

**RAC Membership and Bylaw Review**

David explained the RAC membership process. The bylaws allow a member to serve 2 full terms. Two RAC positions are expiring this year: Rick Waldenburg, and Dr. Bremner. Both are eligible for a second term.

The RAC needs to reappoint them, or identify prospective new members. Final membership approval is made by the OHA director.

Rick Waldenburg has declined to serve a second term.

Mandy Henrikson, Marketing Consultant, COO for Palm Beach Tan, has attended RAC meetings in the past, and has expressed interest in serving. David has spoken to her, and she is committed to attending meetings.

**Motion**

Barbara Smith moved to approve Dr. Bremner to serve for a second term. Donna Stevens seconded. The motion carried unanimously.

**Motion**

Dr. Bremner moved to nominate Mandy Henriksen to fill the vacant RAC position. Barbara Smith seconded the motion. The motion carried unanimously, and Ms. Henriksen’s membership will take effect on January 1, 2017.

**RAC Officers**

Dr. Reese is nearing the end of his second term as RAC Chairman. The committee needs to nominate a new chair and Vice Chair.

Donna Stevens has volunteered to serve as Chairman, and Dr. Bremner expressed interest in continuing to serve as Vice Chairman.

**Motion**

Dr. Bremner moved to nominate Donna Stevens as RAC Chairman. Barbara Smith seconded the motion, which carried unanimously. Donna Stevens will serve as RAC Chairman, beginning January 1, 2017.

**Motion**

Barbara Smith moved to nominate Dr. Bremner to serve a second term as Vice Chairman. Donna Stevens seconded the motion, which passed unanimously.

**Bylaw Review**

David Howe asked the committee to review the bylaws and propose any changes they would like to see. Dr. Reece asked for the committee’s input. There were no proposed changes

**Proposed Rulemaking**

Todd Carpenter, Licensing Manager, RPS presented 2 proposed rule changes:

**OAR 333-102-0015: Exempt Items – Certain Items Containing Radioactive Material**

Suggested language change from “gray (Gy)” to “microgray (µGy)” per hour, and writing out the word “microgray.” It was originally intended to read that way, but the “µ” symbol was lost in the printing process.

**OAR 333-106-0325: Intraoral Dental Radiographic Systems**

Suggest adjusting the rule (7)(d) to require all dental facilities to provide thyroid collars to all pediatric patients, in accordance with a recommendation from the National Council on Radiation Protection & Measurements.

This topic prompted considerable discussion. Dr. Cyman expressed concern over the word “provided,” when the actual intent is for patients to WEAR it. Dr. Reese would like to see a clear definition of a “thyroid collar” spelled out in our rules.

There was also discussion about the thickness of an effective thyroid collar. Donna Stevens suggested a 0.25 mm lead equivalent as a benchmark.

Todd said he will re-write the proposed rule revision and present it at the next RAC meeting.

**OAR 333-122-001: Industrial X-Ray Rules**

RPS has been working on re-writing this section of the rules for a couple of years now, and is prepared to form a sub-committee to discuss and finalize industrial X-ray rules. Some issues include the definition of a “warning device,” the frequency of testing safety devices, the need for an industrial X-ray program to have a “Safety Committee,” and the application of these rules to whole body image scanners that are being brought into use in corrections facilities. RPS has several concerns about the operation of these whole body scanners, and would like to discuss these concerns within a sub-committee. Our current industrial X-ray rules only apply to medical screening devices.

**Projects**

* **Laser Registry/Regulation Program Development**

David Howe reported on RPS’s efforts to create a laser registry. RPS was able to get the registry onto OHA’s short list of legislative actions. OHA’s senior management took the issue to the governor, but was unable to gain approval. The laser registry proposal will not be included in the 2017 legislative session.

* **New Electronic Products Database**

Riven Leigh from the Office of Information Services (OIS) presented the re-designed X-ray facility database. RPS will be phasing into this new database. The current registry is at least 9 years old, and functionally outdated. The new system will allow RPS to accept e-payments online for dental X-ray registrations, and allow licensees to immediately download their validation certificates in PDF form. OIS will work with RPS to eventually update the tanning registry as well. The ultimate goal is to have all of the RPS registries tied to a web-based platform.

* **Fluoroscopy Sub-committee Update**

David updated the RAC on recent developments within the fluoroscopy sub-committee’s discussion.

RPS was approached by the Oregon Board of Nursing with a proposal to allow CRNA’s to supervise interventional pain management fluoroscopic procedures for needle placements, an activity which is currently prohibited in Oregon.

Within a few weeks, the Oregon Nurses Association requested to add Clinical Nurse Specialists and Nurse Practitioners to the “non-radiologic practitioners” list, in order to allow them to supervise fluoroscopy procedures.

RPS initiated a review of current fluoroscopy rules and training requirements, and convened the first fluoroscopy sub-committee meeting on October 7, 2016. Seven organizations were represented. Barbara Smith attended on behalf of the RAC.

Following that meeting, and considerable internal discussion, RPS convened a second sub-committee meeting on October 11, 2016, and proposed revising the rules to include 4 basic elements:

1. Allow APRNs to *supervise* interventional pain management fluoroscopic needle placement procedures (with modified didactic training, plus clinical and ap0plications training).
2. Grandfather existing Non-Radiologic Practitioners to *supervise/operate* fluoroscopy.
3. Allow **new** Non-Radiologic Practitioners to *operate* fluoroscopy (comply with existing didactic training requirement, plus clinical and applications training.)
4. Allow **new** Non-Radiologic Practitioners to *supervise* fluoroscopy procedures (with modified didactic training, plus clinical and applications training.)

10 organizations were present at the October 11, meeting (Barbara Smith represented the RAC again) and there was a robust discussion between the interested parties, as some disagree on the quantity and the content of training that would be required in order to supervise fluoroscopy procedures.

After some discussion, Dr. Reese asked the committee whether or not they should even be considering this issue, noting that the RAC’s role is to consider patient/dose relationships, and not to make “medical determinations.”

Todd asked the committee to provide their input by October 21, 2016.

**OAR Variance Requests**

* Legacy Health Systems is requesting a variance from OAR 333-106-0130(4)(a)(B), which governs design requirements for an Operator’s Booth:

“The device shall be so placed that the operator can have full view of any occupant of the room and should be so placed that the operator can view any entry into the room. If any door which allows access to the room cannot be seen from the booth, then that door must have an interlock controlling the exposure which will prevent the exposure if the door is not closed.”

Legacy has an X-ray exam room with two doors, one of which is not viewable from the booth. The door leads to a dressing area for patients. Putting an interlock there is unreasonably expensive. RPS and Legacy have discussed permanently locking the door from the dressing room side, so patients can’t go in unless the radiologic technologist lets them in.

 **Motion**

 Donna Stevens motioned to allow the variance. Dr. Bremner seconded. The motion passed unanimously.

* Legacy Health Systems is also requesting a variance from the rule that requires industrial fluoroscopy supervisors to complete 160 hours of training. Their intent is to allow one of their employees, Ursula Sandau, to oversee the industrial fluoroscopy safety program as an ARSO. Their current industrial fluoroscopy applications are limited to cadavers and animals for research purposes. The committee had several questions for the Legacy representatives present, including Ms. Sandau.

 **Motion**

Dr. Bremner moved to approve the variance. Barbara Smith seconded the motion, and the variance was approved unanimously

* Kaiser Permanente Health Systems is requesting a variance from gonadal shielding requirements currently in place for pediatric patients. Dr. Peter Marcovici called in to discuss the variance request.

After some considerable discussion, Dr. Bremner moved to approve the variance request. Barbara Smith seconded, and the variance was approved. However, the RAC concluded that, ultimately, a change to the existing rule would seem appropriate, in light of new trends in the national industry standard. Dr. Reese suggested drafting an informational bulletin to send to all licensees.

* Rick Wendt reported on an emergency 24-hour variance to OAR 333-106-0364 that was granted to Wallowa Hospital. There was nothing to report, as the hospital actually didn’t end up treating any patients under the variance.

**Health Division Update**

Jere High, ND, Administrator, CHP, provided 3 updates.

1. OHA is convening a rules advisory committee on Air Toxins. The 24 member committee will meet for the first time next week.
2. CHP is continuing to work with Portland Public Schools (PPS) on lead and radon issues. They recently helped PPS submit a “healthy facilities plan” to DOE.
3. CHP is also working with the Portland Water Bureau to close the remaining open reservoirs and monitor water quality

Dr. High thanked everyone for their continued work & participation.

**Updates/Projects**

* **CAE Board Update** – The 2015 Legislature passed HB 2642, which created the Board of Certified Advanced Estheticians (CAE). RPS is a non-voting member of the board, and has attended all of the preliminary meetings. The board is currently working on defining training and licensing requirements for the use of lasers for hair removal. RPS has suggested they use ANSI training, and they’ve incorporated that language into their rules. Temporary rules take effect in January, 2017, and will last 6 months. Permanent rules will go into effect in July, 2017.
* **2017 IMPEP --** In August, 2017, the NRC will send representatives from the Integrated Materials Performance Evaluation Program (IMPEP) to inspect RPS. RPS has already started convening monthly staff meetings to prepare for the inspection, and don’t foresee any issues.
* **Handheld Dental X-Ray Devices**

RPS was approached by Dexocowin to test their “Easy Ray Air” device. It looks very similar to the already-approved Aribex device, and RPS expects to approve it for distribution and use in Oregon.

**Underage Tanning Incident Update**

RPS has received 4 incident reports, but has been unable to substantiate any of those claims. RPS inspectors reviewed client cards for ID number as well birthdates. We hope that the fact that we actually showed up to their door to investigate will serve as a deterrent to prevent future underage tanning incidents.

**UVA Bed Conversion to Red Light Beds**

There’s a facility in the Portland metro area that is using red light beds in violation of state law. RPS has already issued civil penalties, and Senior Assistant Attorney General Shannon O’Fallon has recommended further investigation. The business owner has requested an administrative hearing. No date has been set.

**RPS Training Updates**

July, 2016

 Quarterly Regional HazMat Committee – *Todd Carpenter*.

Health Physics Conference in Spokane – *Glenda Villamar, Hillary Haskins, Eric Packard*

August, 2016

 NRC Course on Nuclear Medicine – *Hillary Haskins, Erin DeSemple*

 OAS Conference – *David Howe, Todd Carpenter, Glenda Villamar*

\*Glenda was elected OAS National Secretary.

October, 2016

 Rulemaking Training – *Glenda Villamar*

**Incidents**

Rick Wendt reported on several incidents that RPS has worked on since the last RAC meeting:

* A WW2-era Naval Radio was found in Oregon City with a radium dial. RPS contacted officials from Joint Base Lewis-McChord and persuaded them to take possession of the device. They’ll come pick it up next week.
* A tin can bale was turned away from a Vancouver, WA radiation monitor, and sent back to Oregon. RPS shipped it down to a waste management facility in CA. Waiting to hear status before we can close incident.
* An X-ray tube was found in a Burger King parking lot in Springfield. Markings indicate that it is an experimental device with no lead shielding, jointly owned by Oregon State University and the FDA. This particular tube never made it on to OSU’s tube list. RPS was able to persuade OSU to take possession of the tube.
* Medical Isotope I-131 was found in some waste that was traced back to OHSU. RPS sent the waste back to OHSU for proper disposal.
* Medical Event: A patient was injected with 25mCi of Sestimibi instead of the prescribed 25mCi bone dose

**Adjournment**

The meeting adjourned at 2:18 pm

The next meeting for the Radiation Advisory Committee is scheduled for February 8, 2017 at 9:00 am.

Respectfully submitted,

Nic Riley