

X-RAY VERIFICATION/CERTIFICATION WORKSHEET <i>(Use additional sheet for remarks. Identify item by number.)</i>		ACTION			
		<input type="checkbox"/> REQUIRED		<input type="checkbox"/> NOT REQUIRED <input type="checkbox"/> TAKEN	
LOCATION <i>(Include Building and Room Number)</i>		DATE AND TIME OF SERVICE		DATE NEXT SERVICE DUE	
I. EQUIPMENT IDENTIFICATION					
COMPONENTS	MANUFACTURER	MODEL <i>(Include type, style, size, focal spots, etc.)</i>	SERIAL NUMBER <i>(Housing)</i>		
1. CONTROL NO. 1 <i>(Master Control)</i>					
2. CONTROL NO. 2 <i>(Room Control)</i>					
3. RADIOGRAPHIC TUBE					
4. RADIOGRAPHIC TUBE <i>(Auxiliary tube)</i>					
5. FLUOROSCOPIC TUBE					
II. VISUAL INSPECTION OF EQUIPMENT					
ITEMS FOR VISUAL INSPECTION	ACTION			INITIAL AND DATE	
	NOT REQUIRED	TYPE REQUIRED	ACTION TAKEN		
6. CERTIFICATION LABELS ARE AFFIXED AND VISIBLE					
7. STEEL COUNTERWEIGHT CABLES					
8. SHOCK-PROOF HIGH TENSION CABLES					
9. TUBE HANGER ASSEMBLY AND YOKES					
10. INDICATOR LIGHTS					
11. X-RAY TUBES FOR OIL LEAKS					
III. OPERATIONAL TESTING OF EQUIPMENT					
ITEMS FOR VISUAL INSPECTION	ACTION			INITIAL AND DATE	
	NOT REQUIRED	TYPE REQUIRED	ACTION TAKEN		
12. INTERLOCKS					
13. LOCKS					
14. BACKUP SAFETY TIMERS					
15. TABLE AND TUBESTAND MOTION					
16. BEAM LIMITING DEVICES <i>(Manual and automatic mode)</i>					
17. TABLE ANGULATION LIMIT SWITCHES					
18. DOES TUBE OVERLOAD PROTECTION CIRCUIT DISABLE EXPOSURE CIRCUIT?		<input type="checkbox"/> YES <input type="checkbox"/> NO			
19. IS THE PRODUCTION OF X-RAYS INHIBITED UNTIL ANODE IS UP TO SPEED?		<input type="checkbox"/> YES <input type="checkbox"/> NO			
20. DOES BRAKE ON HIGH SPEED STATOR OPERATE CORRECTLY? <i>(Record coast down time for anode after exposure _____)</i>		<input type="checkbox"/> YES <input type="checkbox"/> NO			
IV. RADIOGRAPHIC CERTIFICATION					
21. SINGLE PHASE LINE VOLTAGE AND LINE DROP			22. THREE PHASE LINE VOLTAGE AND LINE DROP		
NO LOAD LINE VOLTAGE		VOLTS	NO LOAD LINE VOLTAGE		VOLTS
A. L 1 TO GROUND			A. PHASE A TO B		
B. L 2 TO GROUND			B. PHASE B TO C		
C. L 3 TO L 2			C. PHASE A TO C		
LINE DROP TEST		VOLTS	LINE DROP TEST		VOLTS
D. L 1 TO L 2					
23. TRANSFORMER BALANCE ¹			D. PHASE A TO B		
A. ANODE VOLTAGE TO GROUND AT 100 KVP			E. PHASE B TO C		
B. CATHODE VOLTAGE TO GROUND AT 100 KVP			F. PHASE A TO C		
24. EXPOSURE TIMER TEST					
TIME SETTING ON CONTROL					
ACTUAL TIME MEASURED					

¹ Only required annually.

25. KILOVOLTAGE AND MILLIAMPERAGE VERIFICATION								
CONTROL SETTINGS	KILOVOLTAGE							
	20	40	60	80	100	120	140	150
MA								
MA								
MA								
MA								
MA								
MA								
MA								
MA								
26. PENETROMETER FILM DENSITY <input type="checkbox"/> SATISFACTORY <input type="checkbox"/> UNSATISFACTORY								
27. RADIOGRAPHIC PHOTOTIMER TEST (<i>Record MAS</i>)								
	BUCKY		CHEST			OTHER		
A. NORMAL								
B. LIGHT								
C. DARK								
V. FLUOROSCOPIC CERTIFICATION								
28. KILOVOLTAGE VERIFICATION				29. AUTOMATIC BRIGHTNESS CONTROL				
MA SETTING	KILOVOLTAGE PEAK			<input type="checkbox"/> SATISFACTORY				
	FLUORO	ACTUAL		<input type="checkbox"/> UNSATISFACTORY				
1.0	40		30. SPOT FILM KILOVOLTAGE VERIFICATION					
			KILOVOLTAGE PEAK					
			SPOT FILM SETTING		MA	ACTUAL		
1.0	60		60 @ _____					
1.0	80		80 @ _____					
1.0	100		100 @ _____					
1.0	120		120 @ _____					
1.0	MAXIMUM		120 @ _____					
31. SPOT FILM MILLIAMPERAGE AND SPACE CHARGE VERIFICATION								
FIXED MA STATION			ACTUAL MILLIAMPERAGE AT					
			LOW KVP		NEUTRAL KVP		HIGH KVP	
32. FLUOROSCOPIC MILLIAMPERAGE VERIFICATION			33. FLUORO TIMER TEST (<i>Timer set at 5 minutes</i>)					
MA STATION	NEUTRAL KVP SETTING	ACTUAL MA	A. WARNING DEVICE ALARMED AT _____ MINUTES					
			B. TIMER TERMINATED AT _____ MIN _____ SEC					
			C. DID TIMER TERMINATE EXPOSURE? <input type="checkbox"/> YES <input type="checkbox"/> NO					
			D. IS TIMER TIMING CORRECTLY WHEN CHECKED AGAINST CALIBRATED STOP WATCH? <input type="checkbox"/> YES <input type="checkbox"/> NO					
34. SPOT FILM TIMER TEST			SATFY	UNSATFY	35. PHOTOTIMER TEST			RECORD MAS
A. SHORT TIME			<input type="checkbox"/>	<input type="checkbox"/>	A. NORMAL SETTING			
B. MEDIUM TIME			<input type="checkbox"/>	<input type="checkbox"/>	B. LIGHT SETTING (-)			
C. LONG TIME			<input type="checkbox"/>	<input type="checkbox"/>	C. DARK SETTING (+)			
INSPECTED BY (<i>Type or print name and grade</i>)				SIGNATURE				