

Radiation Safety Training - Caring for Radiation Therapy Patients Training Documentation

Name: _____ Date: _____

Unit: _____ Supervisor: _____

Student's Signature (*Signature indicates that you have completed this radiation safety training.*)

Quiz

Match the following:

a. 5 rem/year b. 0.5 rem c. 5 mrem/hour d. 2 mrem/hour

- _____ 1. Whole body annual dose limit for a radiation worker
- _____ 2. Radiation level limit for an unrestricted area
- _____ 3. Limit for a radiation area.
- _____ 4. Dose limit for the fetus/embryo of a declared pregnant radiation worker.
5. True or False: A radiation therapy patient who is being treated with sealed sources will cause everything he or she touches to become contaminated with radioactive material.
6. True or False: You should take vital signs and specimens before a radioactive drug is administered to a therapy patient.
7. An example of radioactive drug therapy patient is:
- a. I-131 therapy
 - b. Cs-137 therapy
 - c. Ir-192 therapy
8. Which of the following will not protect you from an external radiation field?
(Circle all correct answers.)
- a. minimizing time spent with the patient
 - b. wearing gloves before touching the patient
 - c. staying as far away as possible from the patient
9. Which of the following will protect you from radioactive contamination?
(Circle all correct answers.)
- a. wearing gloves
 - b. wearing shoe covers
 - c. wearing a radiation badge
 - d. using a lead shield
10. After a radioactive drug therapy patient has gone home, when will the room be ready for another patient?
- a. as soon as the therapy patient has gone home
 - b. after Radiation Safety has taken the "Caution, Radioactive Materials" sign off of the door

Training Verification

This section is to be completed by the supervisor or charge nurse. Fax a copy of this training document to the attention of the Safety Training Officer at 3-4951.

Score: _____ (At least 7 of 10 answers must be correct to pass.)

Supervisor or Charge Nurse (please print)

Signature