



To: Radiology Department

Date: July 25, 2023

Re: Quarterly & Monthly Dosimetry Reports Medical Director Review & Approval

The Occupational Radiation Summary Report provided by Mirion Technologies Dosimetry Services for the 2nd Quarter of 2023 was reviewed and approved by Green Light Imaging's Medical Director Dr. Sim C. Hoffman, MD. There were no radiation exposure issues.

This report includes Green Light Imaging's CT Technologists and Patient Care Assistants.

A handwritten signature in black ink, appearing to be "S. Hoffman", written over a horizontal line.

Dr. Sim C. Hoffman, MD
GLI Medical Director

Occupational Radiation Summary Report

Accredited by the
National Institute of Standards and Technology
through **NVLAP** for the specific scope of
accreditation under lab code 100555-0*

ACCOUNT NO: 26019 LOCATION NO: Main (GREEN LIGHT IMAGING)

LOCATION ADDRESS:
GREEN LIGHT IMAGING
ATTN: ILANA COELHO
8348 ROSEMEAD BLVD, PICO RIVERA, CA 90660
USA

REPORTING PERIOD:	4/1/2023 - 6/30/2023
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WEARER IDENTIFICATION			DOSIMETER & EXPOSURE HISTORY																			
NAME OR OTHER DESIGNATION	ID	X US	BODY REGION	MONTH TO DATE			QUARTER TO DATE			DOSE EQUIVALENT IN MREM FOR PERIODS INDICATED BELOW						LIFETIME TO DATE						
				Hp(10) DEEP	Hp(3) EYE	Hp(0.07) SHALL	Hp(10) DEEP	Hp(3) EYE	Hp(0.07) SHALL	Hp(10) DEEP	Hp(3) EYE	Hp(0.07) SHALL	Hp(10) DEEP	Hp(3) EYE	Hp(0.07) SHALL	FROG NOTES	Hp(10) DEEP	Hp(0.07) SHALL	EXPOSURE LETFIVE			
				YEAR TO DATE	YEAR TO DATE	YEAR TO DATE	YEAR TO DATE	YEAR TO DATE	YEAR TO DATE	YEAR TO DATE	YEAR TO DATE	YEAR TO DATE	YEAR TO DATE	YEAR TO DATE	YEAR TO DATE	YEAR TO DATE	YEAR TO DATE	YEAR TO DATE	YEAR TO DATE			
Adams, Jesse		M	WB CL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	37	37	37	3/1/2016	
Aguinaga, Steve		M	WB CL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	36	36	36	4/16/2019	
Galvan, Elias		M	WB CL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	7/7/2017	
Lovera Rivas, Silvano		M	WB CL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	6/28/2020	
Ma, Yeuk		M	WB CL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	6	6	6	9/28/2021	
Montanez, Steven		M	WB CL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	39	39	39	8/12/2016	
Quinn, Virgil		M	WB CL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	57	57	57	3/1/2016	
Rangel, Fabian		M	WB CL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	10	10	10	3/1/2016	
Rivas, Luis		M	WB CL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	29	29	29	4/8/2019	
Schafer, Steve		M	WB CL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	45	45	45	7/6/2018	
	1	3	4	5	6	7	8	8	8	10	11	12	13	14	15	16	17	18				

SEE REVERSE SIDE FOR COMPLETE REPORT DETAILS BY COLUMN NUMBER
IT IS RECOMMENDED THAT YOU KEEP THIS REPORT FOR YOUR RECORDS

Reports Approved By NVLAP Signatory.

GENERAL INFORMATION

MINIMUM EXPOSURE REPORTED: All dosimeters have a minimum threshold below which an actual exposure cannot be measured with statistical accuracy.

ALL EXPOSURES BELOW THIS MINIMUM WILL BE REPORTED AS AN ASTERISK (*) IN COLUMNS 5-7, 8-10, and 11-13. These minimal exposures will not be carried forward in the cumulative data. Refer to the "Minimum Exposure" section of the NRC Form 5500 for more information.

DOSE EQUIVALENT: The product of the absorbed dose in tissue, quantity factor, and all other necessary modifying factors at the location of interest.

EXTERNAL DOSE: The portion of the dose equivalent received from radiation sources outside the body.

OCCUPATIONAL DOSE: Dose received by an individual in a restricted area or in the course of employment in which individual's assigned duties expose him or her to radiation from a source external to the body and unless sources of radiation whether to the possession of the licensee or other person. Occupational dose does not include dose received from background radiation, such as a patient from medical practices, from voluntary participation in medical research, or as a member of the general public.

EXTREMITY: Hand, elbow, arm below the elbow, foot, knee, or leg

WHOLE BODY DOSE: Head, trunk, arms above elbow, legs above knee.

DEEP DOSE EQUIVALENT: DDE incremental measurement for dose equivalent at a tissue depth of 1 cm (1,000 mg/cm²); applies to whole body exposure.

EYE DOSE EQUIVALENT: LDE incremental measurement for dose equivalent at a tissue depth of 0.3 cm (300 mg/cm²); applies to external exposure of the lens of the eye.

SHALLOW DOSE EQUIVALENT: SDE incremental measurement for dose equivalent at a tissue depth of 0.007 cm (7 mg/cm²); applies to shallow dose of whole body.

SHALLOW DOSE EQUIVALENT: SDE-E incremental measurement for dose equivalent at a tissue depth of 0.007 cm (7 mg/cm²); applies to shallow dose of extremity.

EFFECTIVE DOSE EQUIVALENT (EDE): The sum over the tissues of the product of the dose equivalent HT in a tissue (T) and the weighting factor w_T representing its proportion of the total stochastic risk when the whole body is irradiated uniformly.

TECHNICAL DATA: Milton Technologies (GDS) Inc. performs calibrations of its dosimetry systems that are traceable to NIST and is accredited by the National Institute of Standards and Technology through NVLAP.

RADIATION TEST SOURCES: Milton Technologies (GDS) Inc. has demonstrated satisfactory performance in accordance with the most stringent requirements of ANSI N13.11 "Quality Standard for the Dosimetry Performance." DOE/EH-0027 "DOE" standard for the Performance Testing of Personnel Dosimetry System and RADS Part 1 (External Radialions) "Requirements for the approval of dosimetry services under the Ionizing Radialions Regulations, 1985".

10 CFR 20 LIMITS: STATE LIMITS: (if applicable)
 Whole Body 50,000 mrem/year
 Lens of Eye 1,500 mrem/year
 Skin SDE 50,000 mrem/year
 Extremity 7,500 mrem/yr.
 18,750 mrem/yr.

DOSE CONVERSION
 1 mrem = 0.01 mSv

WEARER IDENTIFICATION SECTION

COLUMN 1 - Individual's Last Name, First Name, and Middle Initial.
COLUMN 2 - The individual's Identification Number.
COLUMN 3 - Individual's gender/sex
COLUMN 4a - Two unique fields, first 2 digits reflect the general region of the body to be monitored or reflects non-personal use based on table:
COLUMN 4b - Specific body part to be monitored if applicable. This field is used to identify the location of the badge between multiple badges worn on the same body region based on table:

Monitored Region		Monitored Part of Body		Extremities	
WB	= Whole Body	Blank	= Not Identified	Blank	= Not Identified
LRE	= Upper Right Extremity	CH	= Chest	PH	= Finger
LLE	= Upper Left Extremity	CO	= Collar		
LFE	= Lower Left Extremity	TR	= Torso		
LLE	= Lower Left Extremity	FS	= Feet		

Monitored Region
 NPJ = Non-Personnel Use
 ARE = Area
 UNK = Unknown
 NSP = Non-Specific

REFERENCES

- For rules and regulations applying to Radiation Safety in your state contact your State Health Department.
- Standards for Protection against Radiation are published in the Code of Federal Regulations and may be obtained from the Department of Energy Documents, U.S. Government Printing Office, Washington, DC 20540.
- Regulatory Guide 8.7 Instructions for Recording and Reporting Occupational Exposure Data "provides guidance on":
 - * Determining the doses in the current monitoring year for all persons who must be monitored and recording them on an individual monitoring report to the NRC of the results of individual monitoring (NRC Form 5).
 - * Acquiring records of prior exposure (NRC Form 5).

This report is furnished to you under the provisions of the Nuclear Regulatory Commission regulation 10 CFR part 19. You should preserve this report for further reference.

This report shall not be reproduced except in full without the written approval of the processing facility.

This report must not be used to claim product endorsement by NVLAP or any agency of the U.S. Government.

Milton Technologies (GDS) Inc. conforms to the Personal Information Protection and Electronic Privacy Act (PIPEDA) of the Privacy and Access to Information Act of Canada as well as the Health Insurance and Portability Act (HIPAA) and 10 CFR20 of the USA.

DOSIMETER AND EXPOSURE HISTORY SECTION

COLUMN 5 - Month to Date Deep Dose (Hp(10)) : DDE for month.
COLUMN 6 - Month to Date Eye Dose (Hp(3)) : LDE for month.
COLUMN 7 - Month to Date Shallow Dose (Hp(0.07)) : SDE for month.
COLUMN 8 - Quarter to Date Deep Dose (Hp(10)) : DDE for quarter.
COLUMN 9 - Quarter to Date Eye Dose (Hp(3)) : LDE for quarter.
COLUMN 10 - Quarter to Date Shallow Dose (Hp(0.07)) : SDE for quarter.
COLUMN 11 - Year to Date Deep Dose (Hp(10)) : DDE for year.
COLUMN 12 - Year to Date Eye Dose (Hp(3)) : LDE for year.
COLUMN 13 - Year to Date Shallow Dose (Hp(0.07)) : SDE for year.
COLUMN 14 - Total number of dose reads summarized for the Year to Date doses.
COLUMN 15 - The number of Process Notes reflected in the reports for the Year to Date doses. The number of Process Notes or Occupational Radiation Exposure Report for more details.
COLUMN 16 - Lifetime to Date Deep Dose (Hp(10)) : Total lifetime deep dose accumulated for the Body Region/Body Part.
COLUMN 17 - Lifetime to Date Shallow Dose (Hp(0.07)) : Total lifetime shallow dose accumulated for the Body Region/Body Part.
COLUMN 18 - Inception Date of Lifetime : Date Lifetime started with Milton Technologies (GDS) Inc. or actual lifetime start date if data supplied by customer.

REPORT IDENTIFICATION SECTION

ACCOUNT NO.: Unique identifying number permanently assigned to a facility.

REPORTING PERIOD: Dates indicate start and end dates of the report query selected by customer.

LOCATION ADDRESS: Shipping address of the Location specified by the customer.

PA SEQUENCE: PA SEQUENCE: Indicates number of report pages in this reporting sequence.

REPORT APPROVED: TPM (Technical Program Manager). Indicates the NVLAP signatory of the doses on the report.