

To: Radiology Department

Date: April 1, 2024

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

The Occupational Radiation Summary Report provided by Mirion Technologies Dosimetry Services for the 1st Quarter of 2024 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.

Dr. Sim C. Hoffman, MD GLI Medical Director

Occupational Radiation Summary Report

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

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

LOCATION ADDRESS:

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

REPORTING PERIOD:		1/1/20	24 - 3/31/2024	
PAGE:	1	OF:	1	

WEARER IDENTIFICATION				DOSIMETER & EXPOSURE HISTORY													
			DOSE EQUIVALENT IN MREM FOR PERIODS INDICATED BELOW														
NAME	ID	_ !	BODY REGION		MONTH TO DATE		Ql	UARTER TO DA	TE	YEAR TO DATE				LIFETIME TO DATE			
NAME OR OTHER DESIGNATION		SEX		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.	NO. READS	PROC. NOTES	Hp(10) DEEP	Hp(0.07) SHALL.	INCEPTION DATE LIFETIME
Adams, Jesse		М	WB CL				0	0	0	0	0	0	1	0	37	37	3/1/2016
Aguinaga, Steve		М	WB CL				0	0	0	0	0	0	1	0	36	36	4/16/2019
Alvarez, Nicholas		М	WB CL				0	0	0	0	0	0	1	0	0	0	10/2/2023
Galvan, Elias		М	WB CL				0	0	0	0	0	0	1	0	0	0	7/7/2017
Lovera Rivas, Silvano		М	WB CL				0	0	0	0	0	0	1	0	0	0	6/26/2020
Montanez, Steven		М	WB CL				3	3	3	3	3	3	1	0	42	42	8/12/2016
Morales, Stephanie		F	WB TR				0	0	0	0	0	0	1	0	0	0	2/8/2024
Rangel, Fabian		М	WB CL				0	0	0	0	0	0	1	0	10	10	3/1/2016
Rivas, Luis		М	WB CL				0	0	0	0	0	0	1	0	29	29	4/8/2019
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18



SEE REVERSE SIDE FOR COMPLETE REPORT DETAILS BY COLUMN NUMBER

Reports Approved By NVLAP Signatory.

GENERAL INFORMATION

MINIMUM EXPOSURE REPORTED: All dosimeters have a minimum 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

specification sheet of minimum reportable doses.

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 involve exposure to radiation and to radioactive material from licensed and unlicensed sources of radiation whether in 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 reserach, or as a member of the general public.

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

WHOLE BODY: Head, trunk, arms above elbow, legs above knee. DEEP DOSE EQUIVALENT: DDF Incremental measurement for dose equivalent at a tissue depth of 1 cm (1,000 mg/cm^2); applies to

whole body exposure.

EYE DOSE EQUIVALENT: LDE Incremental measurement for dose equivalent at a tissue depth of 0.3 cm (300 mg/cm^2); applies to external exposure of the lens of the eve. SHALLOW DOSE EQUIVALENT: SDE-WB Incremental measurement

for dose equivalent at a tissue depth of 0.007 cm (7 mg/cm^2); 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/cm^2); 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 wT representing its proportion of the total stochastic (cancer and genetic) risk resulting from irradiation of tissue (T) to the risk when the whole body is irradiated uniformly.

TECHNICAL DATA: Mirion 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

RADIATION TEST SOURCES : Mirion Technologies (GDS) Inc. has demostrated satisfactory performance in accordance with the most recent version of ANSI N13.11 "Criteria for Testing Personnel Dosimetry Performance." DOE/EH-0027: "DOE" standard for the Performance Testing of Personnel Dosimetry System and RADS Part 1 (External Radiations) "Requirements for the approval of dosimetry services under the Ionising Radiations Regulations 1985"

	10 CFR 20 LIMITS:	STATE LIMITS: (if applicable)
Whole Body	5,000 mrem/year	1,250 mrem/qtr.
Lens of Eye	15,000 mrem/year	1,250 mrem/qtr.
Skin SDE	50,000 mrem/year	7,500 mrem/qtr.
Extremity	50,000 mrem/year	18,750 mrem/qtr.

DOSE CONVERSION I mrem = 0.01 mSv

REPORT IDENTIFICATION SECTION

ACCOUNT NO.: Unique identifying number permanently assigned to a

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

LOCATION ADDRESS: Shipping address of the Location specified by

PAGE OF : 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.

WEARER IDENTIFICATION SECTION

COLUMN 1 - Individuals Last Name, First Name, and Middle Initial.

COLUMN 2 - The individual's Identification Number

Whole Body

Not Ide

Blank CL TR FS

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

	Mor	nitored Region	
WB	= Whole Body	NPŪ	= Non-Personnel Use
URE	= Upper Right Extremit	ARE	= Area
ULE	= Upper Left Extremity	UNK	= Unknown
LRE	= Lower Right Extremity	NSE	= Non-Specific
LLE	= Lower Left Extremity		

COLUMN 4b - Specific body part to be monitored if applicable. This field is optional and is provided to help differentiate between multiple badges worn on the same body region based on table:

Monitored Part of Body							
	Extremities						
entified	Blank	Not Identified					

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

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

COLUMN 15 - The number of Process Notes reflected in the reports that constitute the reported dose. See the History Detail 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 Mirion Technologies (GDS) Inc. or actual lifetime start date if data supplied by customer.

REFERENCES

- 1. For rules and regulations applying to Radiation Safety in your state
- 2. Standards for Protection against Radiation are published in the Code of Federal Regulations and may be obtained from the Superintendent of Documents, U.S. Government Printing Office, Washington, DC 20402.
- 3. 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 NRC Form 5
 - * Submitting an annual report to the NRC of the results of individual monitoring (NRC Form 5).
 - Acquiring records of prior exposure (NRC Form 5).

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Dosimetry Services, a Mirion Medical Company conforms to the Personal Information Protection and Electronics Documents Act (PIPEDA) and Nuclear Safety and Control Act of Canada as well as the Health Insurance and Profitability Act (HIPPA) and 10 CFR20 of the USA.