

**Checklist for Hospital-Based Radiation Professionals
Dealing with a Radiological Incident**

CONSIDERATIONS	COMPLETE	REMARKS
<p>INCIDENT HISTORY</p> <ul style="list-style-type: none"> ○ Type of incident: RED, RDD, Dispersal device-no explosion, IND, NPP release, Nuclear Weapon, etc. ○ Radionuclide ○ Activity ○ Exposure only or with Contamination ○ Number of people affected ○ Other hazards-chemicals, etc. ○ ETA for victims ○ How many coming to your hospital 		
<p>NOTIFICATIONS REQUIRED</p> <ul style="list-style-type: none"> ○ Hospital administrators and staff (on and off-shift, regulators, outside agencies requesting assistance) ○ Information available to provide public information officer information about radionuclide from a medical perspective – important for a small scale incident; coordination with joint information center for larger scale incident-notification to public on who should/and should not come to hospital 		
<p>Request for additional radiological resources (from where?, how many?, etc.)</p>		
<p>Radiation expertise in the Hospital Emergency Operations Center to aid in communications and decision making</p>		
<p>RADIOLOGICAL INSTRUMENTATION</p> <ul style="list-style-type: none"> ○ Contamination Survey Instrument (calibration, batteries, operability, background, etc.; ○ Dose Rate meter; ○ Identify where a gamma spectroscopy analysis is available. 		

<p>TREATMENT AREA AND PATIENT RECEIVING SETUP</p> <ul style="list-style-type: none">○ Room access controls and control line,○ Postings/signage,○ Radiological monitoring supplies○ Control line		
<p>DECONTAMINATION SUPPLIES AND SETUP</p> <ul style="list-style-type: none">○ Decontamination supplies,○ Outside triage area, decontamination tents, etc.○ Alternative clothing for patients after decontamination○ Additional PPE – especially if incident duration is extended		
<p>Dosimetry (monitoring capability in the treatment areas and/or on staff to measure accumulated dose) so there is adequate follow-up documentation on worker/hospital personnel doses.</p>		

Trained/qualified radiological survey person to assist in treatment areas (posters that cover instrument readings/documentation, surveying patient and personnel, and the job aid above to check out an instrument)		
Just-in-Time briefings for staff to reinforce contamination control techniques and processes being used to limit dose and potential contamination		
Assist with contamination control techniques (good techniques, contain contamination, segregate radiological material- get out of the room and store)		
Documentation of readings		
Rapid Dose Assessment capability to aid in medical management (evaluate external exposure and intake potential to estimate dose); provide advice to health care providers about radionuclide hazard, dose estimations, and potential consequences at the estimated dose		
Follow-up instructions and plan for dealing with whole body counting, bioassay, cytogenetic biodosimetry, etc...		

Radiological Waste management: isolation, storage and disposal		
Not necessarily responsibility of hospital RSO, but someone has to be prepared to deal with potential contamination (survey, decontamination, etc.) of personal vehicles, ambulance, family		
Cleanup, survey, and recovery		

Expert Consultation: REAC/TS available 24/7: +1 865-576-1005