

X-RAY MACHINE STATUS FORM

If any radiation producing equipment at this facility has been removed, replaced, sold, transferred, donated, or is inoperable, complete and return this form to: Kansas Department of Health and Environment, Bureau of Environmental Health, Radiation and Asbestos Control Section, 1000 SW Jackson, Suite 330, Topeka, KS 66612-1365. (See reverse for regulation requirements)

Kansas Registration # _____ (this # is located on your Certificate of Registration)

Contact Name: _____

Facility Name: _____

Facility Address, City, State & Zip: _____

Check all statements below that apply:

_____ **Radiation producing equipment is inoperable. Complete the enclosed affidavit and send it back to this office, with this form, stating the reason why the equipment is inoperable.**

Number of inoperable machines _____ Type of machine (i.e. radiographic, dental intra-oral, etc.) _____
Inoperable machine has been replaced: YES or NO If yes, type of machine installed _____

_____ **Radiation producing equipment has been scrapped and is no longer at the facility. Where was it scrapped? Trash, landfill, etc. (please explain below):**

Number of scrapped machines _____ Type of machine (i.e. radiographic, dental intra-oral, etc.) _____
Scrapped machine has been replaced: YES or NO If yes, type of machine installed _____

_____ **Radiation producing equipment was sold, transferred or donated to another facility. You are required to provide the name and address below of the recipient of the radiation producing equipment.**

Number of machines _____ Type of machine (i.e. radiographic, dental intra-oral, etc.) _____
Machine has been replaced: YES or NO If yes, type of machine installed _____
Name and address of recipient _____

_____ **Radiation producing equipment has been removed and replaced.**

Number of machines removed and replaced: _____
Type of machine removed and replaced (i.e. radiographic, dental intra-oral etc.) _____
Type of machine installed (i.e. radiographic, dental intra-oral etc.) _____
Name and address of company or individual that removed the equipment from the facility _____

Check the appropriate statement below:

_____ I **still have** other registrable radiation producing equipment at the above facility and the registration form and fee have already been sent to your office OR the fee and corrected Certificate of Registration are enclosed with this form if I am adding radiation producing equipment to the inventory of equipment on file with KDHE.

_____ I **no longer have any** registrable radiation producing equipment at the above facility.

Signature of individual completing this form

Date that above changes to equipment took place

K.A.R. 28-35-152, “Persons registered. Any person possessing a registrable item shall register with the department in accordance with the rules and regulations in this part”. A registrable device is any radiation device that is primarily intended to produce, and is capable of producing, ionizing radiation or any device that is not primarily intended to produce, but does produce, ionizing radiation at a level greater than 0.5 mR/hr at any point five centimeters from its surface.

If the radiation producing equipment in your possession is capable of producing ionizing radiation as stated above, **even though it may be in storage and is not being used**, the equipment, by regulation, is still considered registrable and is required to be registered with this Department and the registration form completed and returned with the annual fee due.

If the radiation producing equipment in your possession is not capable of producing ionizing radiation, you are required to report to this Department the reason that the equipment is not capable of producing ionizing radiation. You are also required, under K.A.R. 28-35-165 Disposal of registered items, whenever a registrable item is disposed of, by any method, you shall give written notice to the Department of the disposal within 30 days. The notice shall include the date of disposal, the method of disposal, and, if transferred to another person, the name and address of the recipient.