

DATE: September 3, 2015

TO: All Schools, Centers and Divisions of the University & Saint Louis University Hospital

SUBJECT: Policy on Radiation Safety Committee (RSC)

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II. SCOPE OF POLICY

This policy applies to all clinical and research units of the University and the Hospital where radioactive materials and/or machine produced ionizing radiation are used. It extends to all faculty, physicians, including residents, medical students, nurses, technologists and other clinical and research staff and students involved in the use of radioactive materials and/or machine produced ionizing radiation.

III. AUTHORITY

The President

1. Authorization: The RS

V. COMMITTEE MEMBERSHIP

Appointments shall be made to the Radiation Safety Committee by the University Vice President for Medical Affairs. Hospital members may be recommended by the Hospital President.

A. Selection of Membership: Membership shall include, but is not limited to, the following positions and at least one representative from the specified areas (listed alphabetically):

- 1. Administration – Saint Louis University (SLU)**
 - a. Vice President for Research, or his/her designee.
 - b. Director, Office of Environmental Health and Safety

- 2. Administration - SLU Hospital**
 - a. Nursing Management
 - b. Associate Administrator or Equivalent

- 3. Clinical Departments (SLU)**
 - a. Nuclear Medicine Authorized User
 - b. Radiation Medicine

- C. Alternate RSC Members:** Under some circumstances alternate RSC members may be appointed for certain RSC members. Alternate members may attend all RSC meetings, but only have voting privileges when the Primary RSC member that they represent is absent from the meeting.

VI. RSC MEETING FREQUENCY

- A. Regular Meetings:** Monthly meetings are scheduled to facilitate timely review and approval of research and clinical protocols, including IRB protocols, authorized users, ALARA reports, equipment acquisitions and to conduct other committee business. Notwithstanding cancellation of one or more monthly meetings, the RSC shall meet at least quarterly.
- B. Ad hoc Meetings:** Ad hoc meetings may be convened to expedite investigation and reporting of abnormal occurrences (e.g., medical events, spills or other contamination events, missing or lost sealed sources, deliberate misconduct, etc.), should they occur. Ad hoc meetings may also be scheduled as needed to facilitate expedited review of research protocol application submissions or resubmissions between regularly scheduled meetings, taking into consideration RSC membership availability.
- C. Cancellation of Regular Meetings:** In the event there is no committee business to discuss, the regularly scheduled RSC meeting may be cancelled prior to the meeting without notice to the University & Hospital communities. Notwithstanding cancellation of a regularly scheduled meeting, ad hoc meetings will be scheduled if needed.
- D. Quorum:** A quorum is required in order to conduct routine committee business. In order to establish a quorum:
- a. The number of voting committee members present must equal at least six.
 - b. The Committee Chairperson or Vice Chairperson must be present.
 - c. The Radiation Safety Officer must be present.
 - d. A University Management representative must be present.
- E. Electronic Mail Balloting/Voting:** The RSC may implement an electronic mail (Email) ballot procedure when it is necessary to act on matters between committee meetings. Discussions made via Email ballot shall be discussed and ratified during the next regular meeting. These Email ballot decisions do not constitute a meeting.

VII. RSC REPORTING

- A. Meeting Minutes:** Minutes of the RSC Meetings shall be provided to the University Vice President for Medical Affairs, and to the RSC Membership, inclusive of the designated Hospital Management representative.
- B. Annual Audits:** Annual RSC audits of the radiation safety program shall be provided to the Vice President for Medical Affairs and School of Medicine Dean, and the designated Hospital Management representative.

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