Organisation name Site or unit		PLAN Radiation protection programme for dental imaging	
Document ID	DEN-PLN-001	**Version**	1.0
Status	Blank form, to adapt	**Issue date**	
Review date		**Replaces**	
Owner		**Approved by**	
Signature			

Plan · DEN-PLN-001 · Version 1.0 · Approved by the ASF Expert Committee

Supports: 31.9

At a glance

- The clinic has a written radiation protection programme, reviewed every 12 months.
- Each X-ray unit is checked for dose and performance on the schedule (DEN-REG-003).
- Staff who take radiographs are monitored where the programme requires it.
- The programme is reviewed after any incident.
- Stop and get help straight away if: an X-ray unit is used with no dose or performance check on record.

1. 1. Purpose

To make sure the clinic protects patients and staff from radiation through a documented and reviewed programme (31.9).

2. 2. Scope

Applies to	Clinical and support staff in the hospital
Locations	All wards, clinics and departments of the facility

When	Whenever the activity described is carried out
Does not apply to	Activities covered by another document listed in section 15

3. 3. Definitions

Term	Meaning
Clinical lead	The doctor or nurse in charge of the area at the time

4. 4. Background

Staff who take X-rays are exposed to radiation every day. A radiation protection programme, with shielding and dose monitoring, keeps that exposure within limits.

5. 5. Responsibilities

Role	Responsibility	Competence
Radiation protection lead	Owns the programme and its schedule	Clinical director
Clinical director	Approves the programme and its review	Medical director

6. 6. Materials and equipment

Item	Requirement	Condition
Records and forms named in this document	Current version	Checked before use

7. 7. Safety

- Stop and call for help if a patient is at immediate risk. Do not delay urgent care to complete paperwork.

8. 8. Before you start

- Confirm the forms and equipment named in this document are available and current.

9. 9. Procedure

Step 1. Write and approve.

- Write the programme against the national requirement and approve it.

Key point: Approved.

Step 2. Check equipment.

- Check each unit on schedule and record it (DEN-REG-003).

Key point: Checked.

Step 3. Review.

- Review the programme every 12 months and after any incident.

Key point: Reviewed.

10. 10. Decision points

- No decision points in this procedure.

11. 11. Special situations

Situation	Action
Out of hours	Follow the same steps. Use the on-call contact on the wall of the area.

12. 12. Escalation

- Any serious problem goes to the duty clinical lead at once and to the clinical director the same day.

13. 13. Monitoring

Measure	Target	Frequency	Owner	If not met
Units with a current dose check	100%	Quarterly	Radiation protection lead	Escalate to the clinical director

14. 14. Records

Record	Kept in	Retention
Record named in this document	Patient record or the area file	the period set by the facility's records policy years

15. 15. Training

- Staff are trained in this document at induction and refreshed each year, with a recorded competency check.

16. 16. Related documents

ID	Title	Use
DEN-REG-003	Radiation equipment and dose audit register	Register

17. 17. Evidence

Reference	Note
E-009	Based on the CDC guidelines for infection control in dental health-care settings (Kohn et al., 2003), ISO 17665 for moist-heat sterilisation, the Minamata Convention on Mercury (2013), IAEA Specific Safety Guide SSG-46 (2018), Council Directive 2013/59/Euratom, and the ADA guidelines on sedation (2016).
E-006	ASF Policy Framework v1.2. Adapted.
E-009	ASF Expert Committee consensus.

18. 18. Change history

Version	Date	What changed	Approval
1.0	the date of approval	First version	set Expert Committee approval

19. References

- Accréditation Sans Frontières (2026). ASF Policy Framework v1.2. (E-006)
- Accréditation Sans Frontières (2026). ASF Expert Committee consensus on Standard 1. (E-009)

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