

Did you know?

Selections from the Iowa Administrative Code.

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Most dentists think that they are governed by the Iowa Board of Dental Examiners when it comes to what they do in their professional lives. For the most part this is true. However, that would make life too simple. There are sections of the Iowa Administrative Code (IAC) that also impact on dental practice. The parts that will be dealt with, from time to time, in this column deal with radiation and the parts of the IAC that pertain to things we do in our dental practice. The reason for this column is that I have, for several years, reviewed for the IDA proposed changes in the IAC dealing with radiation. I had done this for several years when one day I asked myself "How does the average Iowa dentist learn about changes in the IAC that may prescribe or proscribe actions that he or she may undertake?" I raised this question to Mr. Larry Carl, our IDA Executive Director. After some discussion I agreed to write this column, and pull things out of the IAC that might be pertinent to IDA members.

In this first column I shall familiarize you with those parts of the IAC that deal with radiation and that are of importance to us. Remember that I am not a lawyer, nor am I with the Bureau of Radiological Health (BRH) of the Iowa Department of Public Health (IDPH). I am an oral and maxillofacial radiologist, which means that I am a dentist just like you.

The IAC is divided into chapters. The chapters of interest to us are

Chapter 40 Standards for Protection Against Radiation

Chapter 41 Safety Requirements for the Use of Radiation Machines and Certain Uses of Radioactive Materials

and to a lesser extent (perhaps only to me)

Chapter 38 General Provisions for Radiation Machines and Radioactive Materials

Chapter 39 Registration of Radiation Machine Facilities, Licensure of Radioactive Materials and Transportation of Radioactive Materials

and minimally (perhaps only to me)

Chapter 42 Minimum Certification Standards for Diagnostic Radiographers, Nuclear Medicine Technologists, and Radiation therapists.

The IAC is reviewed by the IDPH from time to time, and proposed changes are circulated to representatives of communities of interest (COIs). Among these are the IDA and The University of Iowa. These proposed changes may be based upon many factors, including the need to delete out-of-date requirements, insert new ones as technologies or knowledge changes, or to edit, renumber and reorganize parts into more logical juxtaposition.

The COIs usually have individuals with expertise in these areas review the proposed changes in light of current knowledge and practice, and comment (usually via the main organization, the IDA in our case) to the BRH about the desirability of or perceived problems with such changes. The BRH looks at all these comments, and may amend or even withdraw some of the proposed changes. Sometimes they will contact the reviewer directly to discuss concerns. After the BRH has made the appropriate adjustments the new regulations come into effect. The current IAC came into effect on May 5, 2004.

Over the next few issues, as Journal space permits, I shall review the current IAC. I shall not limit comments to the most recent changes. Rather, I shall select items that may need to be refreshed in our minds, so that you do not have to read the IAC yourself. However, if you do have such an urge, the chapters of the IAC listed above are on-line at

http://www.idph.state.ia.us/hpevh/radiological_health.asp

The BRH can also be reached for specific questions at (515) 281-3478.

I shall start in this column dealing with some basics from Chapter 38.

Chapter 38 contains many of the definitions of terms used in the other chapters we shall look at. This may be of interest, but can be looked at by anyone who wishes to get exact meanings of words used by the BRH.

You may be aware or have assumed that the state does have oversight with respect to radiation sources within the state.

38.4(1) *Records.* Each licensee and registrant shall maintain records showing the receipt, transfer, and disposal of all sources of radiation. Additional record requirements are specified elsewhere in these rules.

38.4(2) *Inspections.*

a. Each licensee and registrant shall afford the agency at all reasonable times opportunity to inspect sources of radiation and the premises and facilities wherein such sources of radiation are used or stored.

b. Each licensee and registrant shall make available to the agency for inspection, upon reasonable notice, records maintained pursuant to these rules.

38.4(3) *Tests.* Each licensee and registrant shall perform upon instructions from the agency, or shall permit the agency to perform, such reasonable tests as the agency deems appropriate or necessary including, but not limited to, tests of:

- a. Sources of radiation;
- b. Facilities wherein sources of radiation are used or stored;
- c. Radiation detection and monitoring instruments; and
- d. Other equipment and devices used in connection with utilization or storage of licensed or registered sources of radiation.

I think that these paragraphs are sufficiently straightforward, so that no comment is required, but I do periodically get calls from practitioners who are concerned about having been informed that they will be inspected. It is my understanding that the selection of offices may be random, or may be in response to a specific question to the BRH.

Chapter 38 deals with registration fees. I shall just quote that part here so that you can see where Dentistry fits in with respect to costs.

641—38.8(136C) Fees.

38.8(1) Radiation machines.

a. Each registrant shall, at the time of registration and the anniversary date thereafter, as long as the registrant owns the radiation machine, remit to the agency a nonrefundable fee sufficient to defray the cost of registering the equipment with the department. All fees shall be paid annually in the form of a check or money order made payable to the Iowa Department of Public Health. The fees to be paid shall be in the amount computed by the following schedule:

ANNUAL FEE SCHEDULE

Type of X-ray machine	Fee per tube	Maximum fee
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|--------------------------------|--------|--------|
| 1. Medical | \$51 | \$1500 |
| 2. Osteopathy | \$51 | \$1500 |
| 3. Chiropractic | \$51 | \$1500 |
| 4. Dentistry | \$39 | \$1000 |
| 5. Podiatry | \$39 | \$1000 |
| 6. Veterinary Medicine | \$25 | -- |
| 7. (Industrial/Nonmedical Use) | \$50 | -- |
| 8. Food Sterilization | \$1000 | -- |
| 9. Accelerators | \$100 | -- |
| 10. Electron Microscope | \$20 | -- |
| 11. Bone Densitometry | \$25 | -- |

Fees for radiation machines not listed in the above schedule shall not be less than \$50 per unit/tube.

b. Each registrant shall, where appropriate, pay the following special inspections/interpretation fee at the written request of the department:

That is it for the major things in Chapter 38, which, as I stated above, is of lesser importance to us.

Next time I shall look at briefly at Chapter 39, which also has only limited impact on dental practice, and then move one to the next chapters.