DEPARTMENT OF HEALTH

X-ray Unit

HAND-HELD DENTAL X-RAY SYSTEMS

To:	Dental Registrants for Human-Use in Minnesota
From:	Teresa Purrington, BS, RT (R) (CT), Supervisor, X-ray Program
Subject:	Hand-Held Dental X-ray System – Variance Request

Minnesota Statutes, section 144.1215 specifies hand-held dental x-ray system requirements and operators who are authorized according to Minnesota Statutes, Chapter 150A. In addition to these statutory requirements, a registrant must also comply with applicable Minnesota Rules, chapter 4732.

A dental intraoral x-ray system in Minnesota Rules 4732.0880, subpart 2, item E requires the operator to be protected and able to view the patient. A dental registrant for human use may submit a variance request for Minnesota Rules 4732.0880, subpart 2, item E to the Minnesota Department of Health (MDH). MDH will review each registrant's request on a case-by-case basis.

MDH will review the registrant's supporting documentation, which must include:

- A completed MDH X-ray Unit Variance Request Form with the signatures of the registrant administrator and radiation safety officer (RSO)
- Rationale for requesting a variance to the operator protection requirements of Minnesota Rules 4732.0880, subpart 2, item E
- Procedures implemented by the registrant with how to remain protected during each exposure of the hand-held dental x-ray system
- Procedures implemented by the registrant so the hand-held dental x-ray system is operated in a manner that offers the maximum protection to the operator by the backscatter shield during each exposure
- Current calibration according to Minnesota Rules 4732.1100, subpart 11
- Procedures for declared pregnant operators
- A statement from the registrant that the facility will maintain a 0.5 mm lead equivalent apron and have it available for use by the operator and patient when requested
- A statement from the registrant that the variance request is complete and the registrant will comply with the conditions of the granted variance

Direct variance request documentation to the Minnesota Department of Health, X-ray Unit, Attn: Paul Germann, PO Box 64975, St. Paul, MN 55164-0975 or email to <u>health.xray@state.mn.us</u>.

If you have specific questions related to this variance request, please contact Paul Germann at (651) 201-4529.