



Present and future challenges in radiation protection in a medical facility

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History

- 1997-2003: preclinical research at KU Leuven
 - First contact with radioactive sources (H-3,C-14)
 - Liquid scintillation counting
 - Radioactive waste

Contact person for the lab on lab safety and radioprotection







History

- 2004-2007: Project engineer
 - EFRO-project: Detection and prevention of radioactive contaminations in the environment (screening household/ industrial waste at incinerator, recycling centre, hospital)
 - Education (protection against radiation, use of portal monitor, hand-held contamination monitors)
 - **Detection**, isolation and identification of radioactive sources present in the waste
 - **Administrative** follow-up
 - Advise (choice of equipment, writing work procedures, prevention policy and risk management)











History

- 2004-2007: Project engineer
 - Megaports project
 - Supporting the Belgian customs with portal monitor controls and the radiological study of container transport in the harbour of Antwerp



- Continued education
 - Radioprotection medical course of "helper"(XIOS)
 - Radiation protection expert training (XIOS-SCK)



2007- present: health physics expert at UZ Leuven



HDR brachytherapy



medical accelerator



cyclotron



radiopharmacy



medical imaging







new exciting applications and ...

radioisotope therapy

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...and familiar ones



Contamination monitoring







Waste management

- Health physics tasks at UZ Leuven
 - Management of installation-specific licences



- Research and control of existing protective measures and resources concerning ionising radiation
- Proposing complementary protection resources and adapted working procedures, in line with the needs of the departments concerned, while observing the ALARA principle.
- Facility designation, design and shielding
- Reception and physical control of new appliances/sources that transmit ionising radiation
- Research and preceding approval of new or modified manipulations,
 experiments, studies and treatments using radionuclides/ionising radiation

- Health physics tasks at UZ Leuven
 - Control of ordering/receiving/transporting packages containing radioactive material
 - Surveys and survey instruments
 - Contamination/Spill response
 - Incident analysis and follow-up























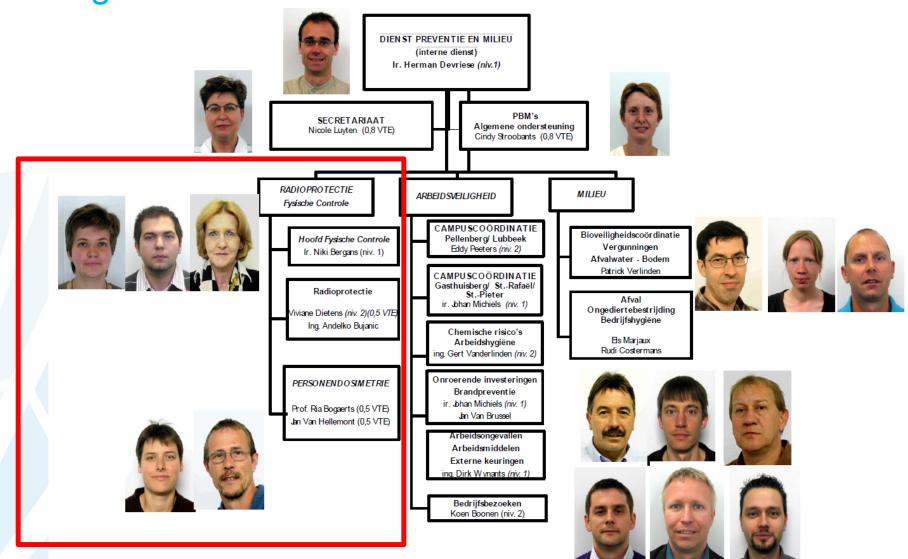


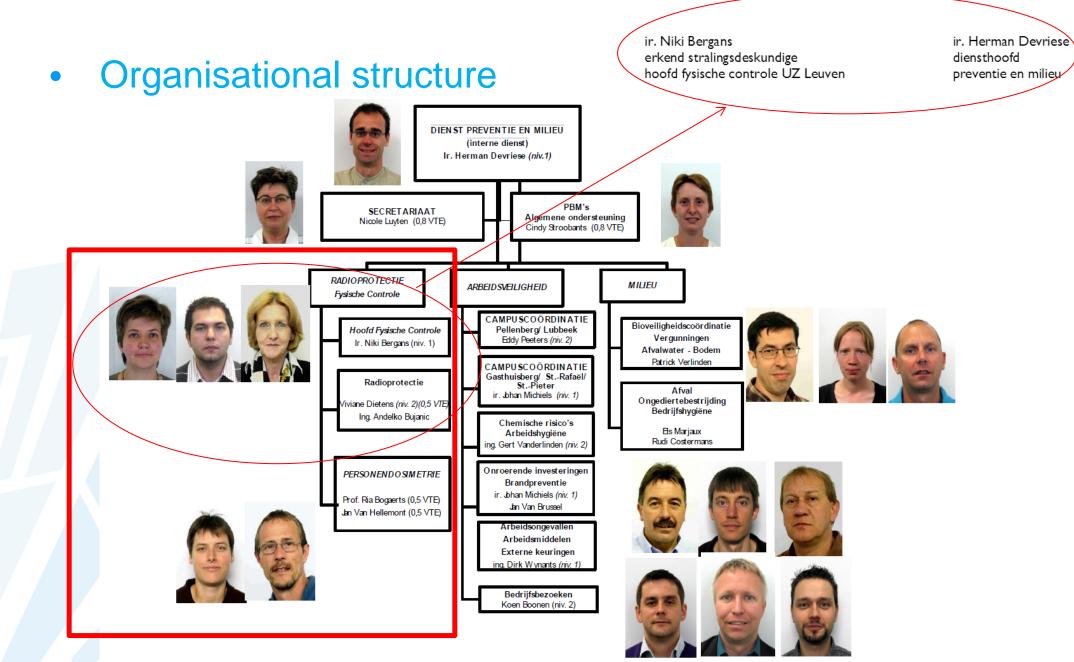


- Health physics tasks at UZ Leuven
 - Oversee a record system to assure that the appropriate records are maintained in accordance with applicable regulations
 - a) inventory and management of radioactive waste
 - b) inventory and monitoring of radioactive sources and X-ray appliances/therapy appliances with ionising radiation
 - Waste disposal: return to authorized recipient/ management of the internal stock of waste-by-decay record keeping, control measurements, calculation of released activities (effluents, airborne)
 - Information sessions on radioprotection
 - a) General introduction for new employees (half-yearly frequency).
 - b) Instruction of workers (annually)
 - Personnel monitoring

Bestuurscomité prof. dr. G. Mannaerts Medische Raad **Organisational structure** prof. dr. M. Decramer Ombudsdienst Voorzitter Directiecomité m artsen rygiëne eheer Dienst Communicatie J. Verhaeghe Algemeen Secretaris Dienst Onthaal tering Personeelsdienst M. Vael werking Directeur Personeelsbeleid Juridische zaken DIENST PREVENTIE EN MILIEU Preventie en Milieu (interne dienst) Ir. Herman Devriese (niv.1) PBM's SECRETARIAAT Algemene ondersteuning Nicole Luyten (0,8 VTE) Cindy Stroobants (0,8 VTE) RADIOPROTECTIE MILIEU ARBEIDSVEILIGHEID Fysische Controle CAMPUSCOÖRDINATIE Bioveiligheidscoördinatie Pellenberg/ Lubbeek Hoofd Fysische Controle Vergunningen Eddy Peeters (niv. 2) Ir. Niki Bergans (niv. 1) Afvalwater - Bodem Patrick Verlinden CAMPUSCOÖRDINATIE Gasthuisberg/ St.-Rafaël/ St.-Pieter Radioprotectie Afval ir. Johan Michiels (niv. 1) Ongediertebestrijding viviane Dietens (niv. 2)(0,5 VTE) Bedrijfshygiëne Ing. Andelko Bujanic Chemische risico's Es Marjaux Arbeidshygiëne Rudi Costermans ing. Gert Vanderlinden (niv. 2) Onroerende investeringen PERSONENDO SIMETRIE Brandpreventie ir. Johan Michiels (niv. 1) Prof. Ria Bogaerts (0,5 VTE) Jan Van Brussel Jan Van Hellemont (0,5 VTE) Arbeidsongevallen Arbeidsmiddelen Externe keuringen ing. Dirk Wynants (niv. 1) Bedrijfsbezoeken Koen Boonen (niv. 2)

Organisational structure





- structural link between health physics and users of ionizing radiation
 - Regular (every 2 to 3 months) consultation with important departments
 - Radiology
 - Radiotherapy-oncology
 - Nuclear medicine
 - Cathlab and Interventional Radiology

Ad hoc consultation with the other medical departments, technical and logistic services, quality assurance,

Participants

- Health physics expert
- Head of internal prevention service
- Head of the department
- Local coordinator radioprotection (head nurse)
- medical physicist
- + others /specific per department (quality control, technical department, IDEWE, radiopharmacist,...)

- Agenda with fixed items concerning radioprotection
 - Installation-specific matters (machines, design, safety precautions, warning symbols, survey monitoring, ...)
 - Personnel-specific matters (dosimetry, training, working instructions, ...)
 - Procedure-specific matters (new guidelines, working and emergency procedures ,...)
 - Licence-specific matters (new applications, inventory, personal licences ...)
 - Miscellaneous

Other structural committees

- Preventiecel (internal committee on prevention) CPBW
- Committee on radiation protection (including external experts)



- Daily job
 - A never ending story, no dull moments
 - Very versatile, main focus on radioprotection
 - Interaction with variety of personnel: work floor up to management
 - From measuring waste to aid with installing and implementing new innovative/hightech techniques
 - Interaction with the work floor pays of
 - Workplace analysis
 - Ownership in a safety culture
 - A lot of tasks....always a to do list



Challenges

- A small part in a large framework
- Find a way to make your point
- Communication skills



- ⇒ For radioprotection in medical facility
 - Use the systems of accreditation/quality to your benefit
 - Use the structures of the internal prevention service
 - Use the internal data and procedural management system

JCI – Muzlidoc – Peoplesoft logistiek/personeelsbeheer - GBS

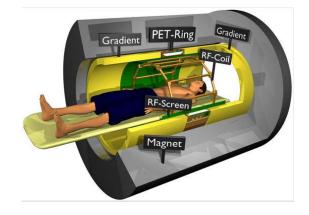
Challenges today and to come: "The Fast and the furious"

Technology in medical imaging evolves fast

New hybrid medical imaging systems



PET-MRI-CT



- Mobile X-ray systems with higher dose rate
 - mobile CT
 - mobile medical accelerator





Dose reducing techniques

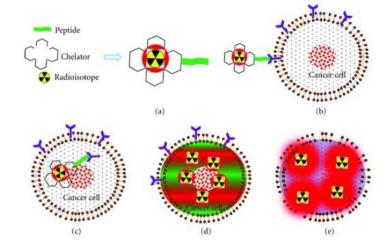
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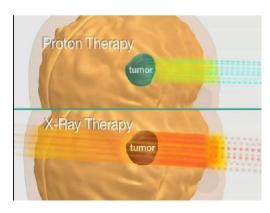
New therapeutic treatments

- Radionuclide therapy
 - PRRT (Lu-177, Y-90)
 - Ra-223 dichloride therapy,...

- Proton therapy







Highly specialised treatment planning systems

Future challenges

Objective: look after the collective dose through justification, optimization and safe practice in the field of medical practices

Organizational level:

- Identify tools for determining the best radiation protection practices
- Risk communication

Staff:

- Safety education and training
- Risk awareness and perception

Equipment:

- Implementation of dose reduction measures
- Implementation of dose management and reporting tools,
 - diagnostic reference levels for interventional radiology
 - use of dose constraints and dose limits for personnel monitoring

Future challenges

 Professionals working in the field need a forum where they can meet and discuss multiple aspects of radiation protection in medicine

The rapid technological development within medical applications is challenging: new applications, procedures and equipment can appear in clinical practice before solid evidence concerning their clinical benefits and the risks they imply has been established.

- ⇒ Enhance the exchange of information on good radiation protection practices and define standards between competent authorities, professionals and manufacturers
- ⇒ Exchange of scientific and technical knowledge and of experience

Strengthen radiation safety culture in health care

- radiation therapy (including planning and verification): external beam therapy, brachytherapy and metabolic therapy: prevention of incidents and accidents in modern radiation therapy – return of experience – lessons learned
- Engage in stakeholder involvement (patients, medical and technical staff, health physics, medical physicists, manufacturers of radiological devices,...)
- Strengthen manufacturers' role in contributing to the overall safety regime

Thank you!

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I would like to thank my former and present colleagues:

NuTeC

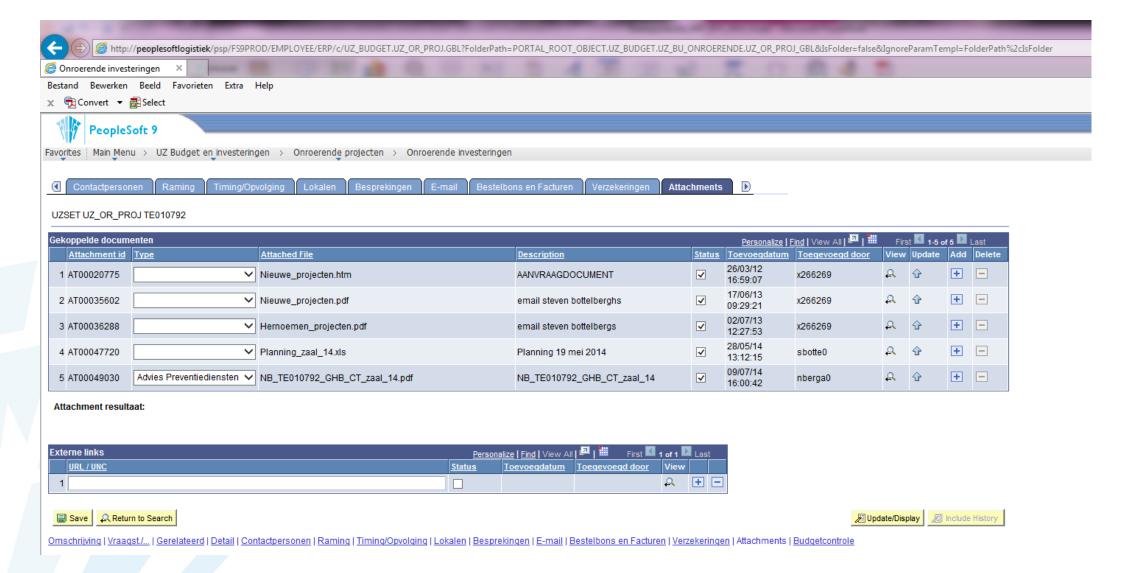
Sonja Schreurs
Sarah Eyckmans
Pascal Fias

UZ Leuven - radioprotectie

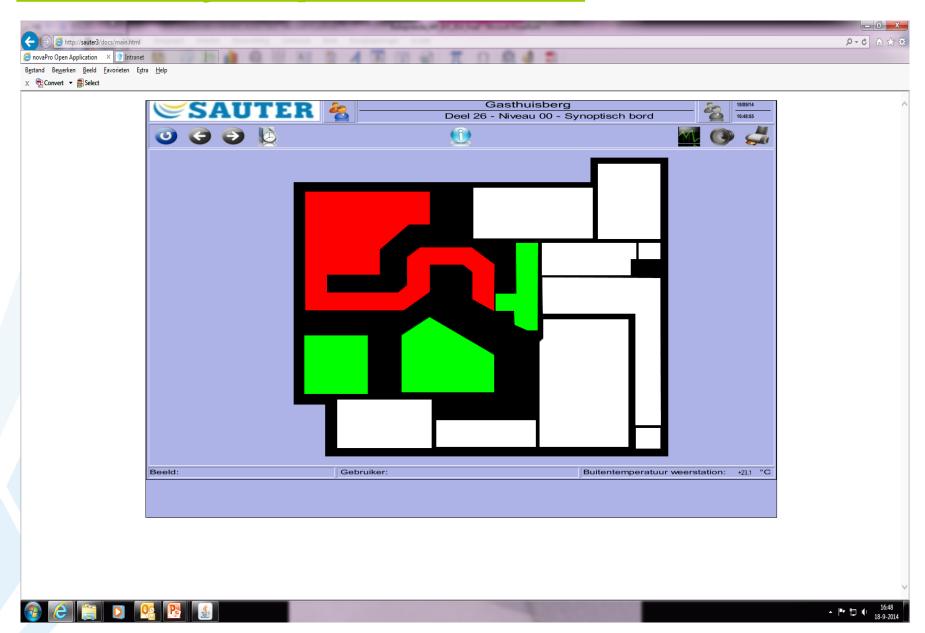


Andelko Bujanic and Viviane Dietens and the other colleagues of dienst preventie en milieu

Peoplesoft logistiek



GBS: Synoptisch bord



JCI Standards

FMS.2 The organization develops and maintains a written plan(s) describing the processes to manage risks to patients, families, visitors, and staff.

FMS.3 One or more qualified individuals oversee the planning and implementation of the program to manage the risks in the care environment.

FMS.5 The organization has a plan for the inventory, handling, storage, and use of hazardous materials and the control and disposal of hazardous materials and waste.

432 AOP.6.3 (V5) Radiation safety program is in place, followed, and documented, and compliance with the facility management and infection control programs is maintained.

