

MIOSHA UPDATE FOR HEALTHCARE – HEALTH STANDARDS

Consultation Education & Training Division
Michigan Occupational Safety & Health Administration
www.michigan.gov/miosha
517-284-7720



WE ARE A NEW DOCTOR/DENTIST OFFICE? WHAT DO WE NEED TO BE MIOSHA COMPLIANT?

MIOSHA Compliance "Starter Kit" for Doctor and Dentist Offices

Oftentimes, new or existing doctor and dentist offices call MIOSHA and ask us:
"What do we need to have in place to be in compliance with MIOSHA Health Standards?"

The answer to this question is summarized below.

Standards:

The MIOSHA Health Standards that apply include but are not necessarily limited to: **Part 554, Bloodborne Infectious Diseases (BID), Parts 92/430, Hazard Communication, Parts 33/433, Personal Protective Equipment (PPE)** Note: The PPE referenced in the PPE Standard is related to employee exposures to chemicals, disinfectants, particulates, etc., which are not directly addressed under the BID Standard, **Part 472, Medical Services and First Aid** (An eyewash is needed if corrosive or injurious chemicals are used) and certain sections of the MIOSHA Act 154, P.A. 1974, as amended, which pertain to pipe labeling and having certain required posters.

A **Doctor and Dentist Office Compliance Checklist (CET-6952)** lists these Health Standards and other Safety Standards that may apply as well.
http://www.michigan.gov/lara/0,4801,7-154-61256_11407_30453-174562_00.html

DOCTOR AND DENTIST CHECKLIST

Doctors/Dentist Office Checklist

Michigan On The Job Poster & other workplace posters
www.michigan.gov/lara/0,4801,7-154-61256_11407_30453-174562_00.html

Hazard Communication – Parts 92/430

Written Program (needs to be site specific)
Posters
Containers labeling (secondary containers)
Employee training
Chemical inventory list
Sample Written Hazard Communication Plan – CET Handout 5530 (doc)
www.michigan.gov/documents/lara/lara_miosha_cetp22_379146_7.doc (Compliance Guide)

Personal Protective Equipment – Parts 33/433

Written Hazard Assessment Certification
Employee training
www.michigan.gov/documents/lara/lara_cetp16_336065_7.doc (samples)

Bloodborne Infectious Diseases – Part 554

Written exposure control plan (site specific)
Hepatitis B vaccination for all Category A employees (or declination statement)
Standard operating procedures

MIOSHA REGULATIONS IN HEALTHCARE

- Hazard communication (MIOSHA Part 42/92/430)
- Personal protective equipment (MIOSHA Part 433)
- Bloodborne infectious diseases (MIOSHA Part 554)
- Portable fire extinguishers (MIOSHA Part 8)
- Other applicable safety standards (e.g., electrical issues, fire exits)
- Injury and illness recordkeeping (for non-exempt facilities with 11 or more employees)
- Occupational disease reporting

TOP TEN HEALTH VIOLATIONS

10 Most Serious Cited MIOSEA Occupational Health Violations - 2015					
Rank	Part	Standard Rules	Description	# Serious Violations	Proposed Penalty
1	430	CFR1910.1200	Hazard Communication	141	\$88,930
2	433	325.60001	Personal Protective Equipment	136	\$40,050
3	451	29CFR1910.134	Respiratory Protection	93	\$101,700
4	554	325.70001	Bloodborne Pathogens	81	\$93,550
5	472	R325.47201(3)	Medical Services & First Aid	66	\$63,550
6	490	29CFR1910.146	Permit-Required Confined Spaces	35	\$41,300
7	380	29CFR1910.95	Occupational Noise Exposure	18	\$43,650
8	315	29CFR1910.1026	Chromium (VI) in General Industry	15	\$11,450
9 (tied)	154	408.1011(a)	General Duty Clause	12	\$16,500
9 (tied)	305	29CFR1910.1001	Asbestos for General Industry	12	\$53,800
10	301	325.51103(iii)	Air Contaminants for General Industry	7	\$9,000

[HTTP://WWW.MICHIGAN.GOV/MIOSHAPUBLICATIONS](http://www.michigan.gov/mioshapublications)

SELECT "SAMPLE PLANS & PROGRAMS"

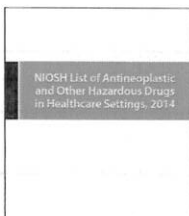


HAZARDOUS DRUGS

- Anti-neoplastic medications
- Anti-viral drugs
- Hormones
- Bioengineered drugs



LIST OF HAZARDOUS DRUGS



www.cdc.gov/niosh/docs/2014-138

- Carcinogenicity
- Teratogenicity or other developmental toxicity
- Reproductive toxicity
- Organ toxicity at low doses
- Genotoxicity
- Structure and toxicity profiles of new drugs that mimic existing drugs determined hazardous by the above criteria
- Proposed 2016 revision



NIOSH LIST OF HAZARDOUS DRUG

- **Table 1:** Antineoplastic drugs
- **Table 2:** Non-antineoplastic that meet one or more of the NIOSH criteria for a hazardous drug
- **Table 3:** Drugs that primarily pose a reproductive risk to men and women who are actively trying to conceive and women who are pregnant or breastfeeding



WHAT ARE THE HAZARDS OF EXPOSURE?

Hazardous drugs may cause the following:

- Cancer
- Developmental or reproductive toxicity
- Genotoxicity: Chromosome 5 or 7 changes
- Harm to organs:
 - Liver
 - Kidney
- Nausea
- Rashes
- Hair loss
- Hearing loss



HAZARDOUS DRUGS THAT ARE CARCINOGENS

<u>Known Carcinogens</u>		<u>Probable Carcinogens</u>	<u>Possible Carcinogens</u>
Arsenic trioxide	Tamoxifen	Azacitidine	Amsacrine
Azathioprine	Thiotepa	Carmustine	Bleomycin
Busulfan	Treosulfan	Cisplatin	Dacarbazine
Chlorambucil	MOPP*	Doxorubicin	Daunorubicin
Cyclophosphamid	ECB*	Lomustine	Mitomycin
Etoposide		Nitrogen Mustard	Mitoxantrone
Melphalan		Procarbazine	Streptozocin
Semustine		Teniposide	

*Combination regimens

International Agency for Research on Cancer (IARC)
<http://www.iarc.fr/>



WHO IS AT RISK?

- Pharmacy staff
- Nursing staff
- Physicians
- Medical assistants
- Operating room staff
- Veterinary care workers
- Research staff in laboratories
- Environmental service workers
- Shipping and receiving personnel
- Others



POTENTIAL ROUTES OF EXPOSURE

- Dermal absorption:
 - Direct drug contact
 - Contact with contaminated surfaces*
 - Contact contaminated body fluids
- Injection:
 - Sharps
 - Breakage
- Ingestion via contaminated:
 - Food, gum
 - Hand-to-mouth transfer
- Inhalation:
 - Aerosols
 - Vapors

ASHP, 2006; NIOSH, 2014; Polovich, et. al. (ONS), 2014; Polovich, 2011



EXPOSURE OPPORTUNITIES: DRUG PREPARATION

- Unpacking / stocking hazardous drugs
- Handling drug vials
- Breaking open ampoules
- Reconstituting / mixing drugs
- Pressure build-up in vials
- Transferring drugs from one container to another
- Needle sticks
- Crushing oral forms



EXPOSURE OPPORTUNITIES: DRUG ADMINISTRATION

- Injected drugs
 - Aerosols from purging air
 - Needle-sticks
- Intravenous infusions
 - Spiking into a drug-filled bag
 - Leaks from prime tubing
 - Loose connections
 - Needle-sticks
 - "Un-spiking"
- Intracavitary drugs
 - Poor fitting connections
 - Splashing
- Oral drugs
 - Broken tablets / capsules
 - Crushing tablets / opening capsules
 - Spilling liquid forms



EXPOSURE OPPORTUNITIES: DRUG DISPOSAL

- Handling contaminated materials
 - Used IV equipment
 - Residual drug
 - Used personal protective equipment
- Carrying drug waste from administration site to disposal site
- Reaching into waste containers
- Using wrong containers
- Over-full containers



EXPOSURE OPPORTUNITIES: CONTAMINATED EXCRETIONS

- Variable HD excretion: hours to days (48 hours average)
- Handling body fluids of patients who have received HDs
 - Urinals / urine
 - Bedpans / stool
 - Emesis basins / emesis
 - Sweat (?)
 - Flushing toilets
 - Linen contaminated with bodily fluids



HAZARD COMMUNICATION/RTK



HAZCOM & ACT 154 ELEMENTS

- **Written Hazard Communication Program**

- Chemical Inventory List (i.e., list of SDSs)
- Safety data sheets (SDSs – previously MSDSs)
- Employee information and training
- Non-routine tasks and procedures
- Labeling
 - Secondary Containers
 - Pipes and piping systems

SAFETY DATA SHEETS (SDS)

- Obtain for hazardous chemicals, including:
 - liquid and powdered drugs and
 - pills that are crushed or crumbled
- English
- Specified content
- Consumer use exemption
- Contact manufacturer/distributor/supplier when required SDS not received

EMPLOYEE INFORMATION AND TRAINING

- Must cover operations in work areas where hazardous chemicals are used (e.g. disinfecting chemicals, liquid injectables, etc.)
- Location and availability of:
 - Written hazard communication program
 - Chemical Inventory List
 - SDSs & associated section contents
- Methods and observations used to detect exposure
- Physical and health hazards of chemicals
- Protective measures



REQUIRED CONTAINER LABEL INFO

Manufacturer

(Primary Label)

- Identity of substance
- Hazard warning
 - target organ effects
- Name and address of manufacturer

In-house System

(Secondary Label)

- Identity of substance
- Hazard warning including target organ effects



MIOSHA RESOURCES

www.michigan.gov/ghs

- CET-5531 HAZARD COMMUNICATION - GHS Overview of Major Changes to the Hazard Communication Standard
- Voice over PowerPoint modules for employers to use to [train employees](#)
- Guidance documents - sample written program
- Posters **Free!**
- DVDs on GHS and Haz Com through [CET DVD/Video library services](#) 517-322-2633 or
- [Free streaming videos](#) (just need to email for password)

FEDERAL OSHA GHS RESOURCES

HAZ COM WEB PAGE -
WWW.OSHA.GOV/DSG/HAZCOM/INDEX.HTML

Regulatory

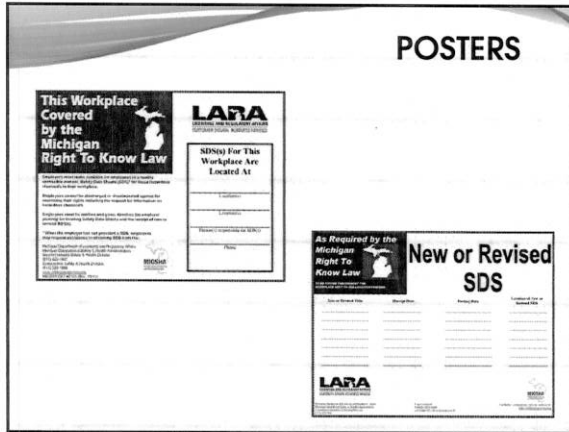
- Haz Com 2012 Final Rule
- Haz Com Comparison: (1994 vs. 2012)
 - Side-by-side
 - Redline Strikeout of the Regulatory Text
- FAQs

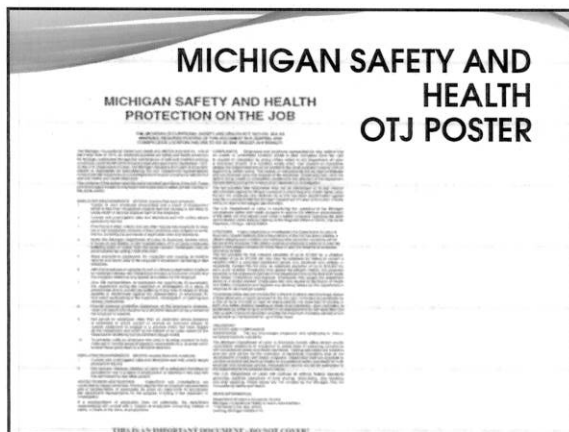
Guidance

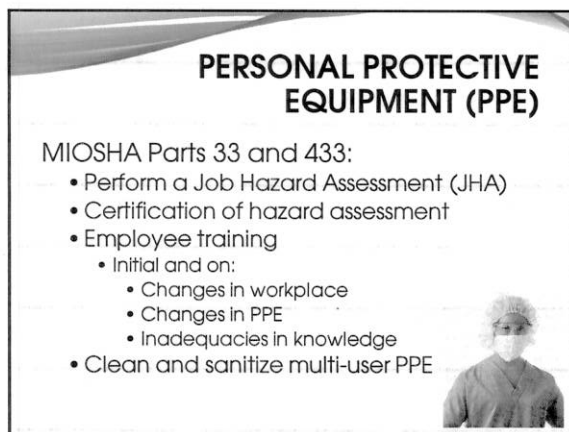
- OSHA Briefs
 - Fact Sheet
 - Quick Cards
 - Labeling
 - Safety Data Sheets
 - Pictograms
 - Effective Dates
 - OSHA Guide to GHS
- www.osha.gov/dsg/hazcom/ghs.html
- GHS documents (links to purple book)



POSTERS







PPE HAZARD ASSESSMENT

An employer shall:

- Assess the workplace to determine hazards present
- Select PPE needed and required to perform the job
- Communicate selection decision to employees

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PPE HAZARD ASSESSMENT

An employer shall:

- Verify written PPE assessment certification which includes:
 - Workplace evaluated
 - Person who certified assessment
 - Date of hazard assessment completion

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Personal Protective Equipment Hazard Assessment Certification

Area Or Job Being Assessed _____ Date _____

Assessed By _____

Position Or Title Of Assessor _____

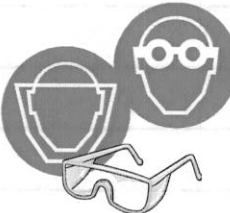
Refer to: The "Selection Chart" on page 8 of the General Industry Safety Standard part 32 on Personal Protective Equipment, and all applicable Occupational Health Standards, for additional hazards and applications.

 EYE HAZARDS ...flying particles ...dust & dirt ...chemical splash ...molten metal ...sparks ...weld flash ...electrical other _____	 HAND HAZARDS ...skin absorption ...punctures ...severe cut or laceration hazard ...chemical or thermal burns other _____
 HEAD HAZARDS ...falling objects ...flying objects ...electrical ...hoist entanglement ...hot surfaces ...chemicals other _____	 FOOT HAZARDS ...falling objects ...rolling objects ...powered lawn equipment ...wet process areas ...logging areas other _____
 FACE HAZARDS ...impact hazards ...chemical ...heat ...corrosive cutting ...welding ...casing ...high temperature exposures other _____	 BODY HAZARDS ...wet process areas ...chemical ...burning ...sand blasting ...polishing ...hot liquids (water, grease, acids, etc.) other _____
 HEARING HAZARDS ...loud process and/or equipment ...air and electrical impact tools ...forging ...logging ...tree trimming other _____	 BREATHING HAZARDS ...spray finishing ...fumes ...vapors ...dust ...welding ...foundries ...permit required confined spaces other _____

EYE AND FACE PROTECTION

HAZARDS

- Flying Particles
- Chemical splash (corrosives - e.g. bleach)
- PPE required (e.g. safety glasses, face shield, goggles)



Eye protection shall be in compliance with ANSI - Z87.1 Standard

ARM AND HAND PROTECTION

HAZARDS

- Skin Absorption
- Chemical Burns
- Thermal Burns
- Punctures



ARM AND HAND PROTECTION

- Gloves
 - Select based on hazards identified
 - Cold protection (Liquid nitrogen)
 - "Cidex" (glutaraldehyde), disinfectants, etc.
- Many types to choose from...
 - Nitrile
 - Butyl Rubber
 - Latex
 - Etc.



BODY PROTECTION

HAZARDS

- Chemical Contact
 - "Cidex" (glutaraldehyde), disinfectants, etc.
- Thermal Burns
- Extreme Cold
- Severe Lacerations



BODY PROTECTION

- Body Protection Types
 - Lab coat
 - Aprons
 - Full body suits



TRAINING REQUIREMENTS

Employees Shall Be Trained In The Following Areas:

- When PPE is necessary
- What PPE is necessary
- How to:
 - Put it on
 - Take it off
 - Adjust, and wear PPE

TRAINING REQUIREMENTS

- Limitations of Equipment
- Useful Life
 - Care
 - Maintenance, and
 - Disposal

RETRAINING AGENDA

Employers Shall Retrain Employees When:

- Changes in the workplace or operation
- Changes in the types of PPE
- Inadequate knowledge or use

MEDICAL SERVICES AND FIRST AID: EYEWASH/SHOWER STATIONS

When are they required?

- To prevent burns, loss of eye sight
- Consult SDS(s)
- Corrosive materials

- Caustics ≥ 9.0 pH
- Acids ≤ 4.0 pH

- Examples of injurious substances:

Formaldehyde, methylene chloride, phenol, blood at HIV/HBV research facilities, etc



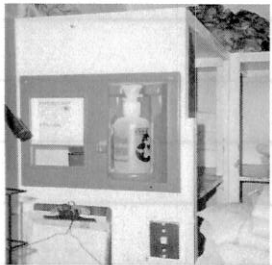
DESIGN REQUIREMENTS FOR SELF-CONTAINED EYEWASH UNITS

- Self-contained eyewash equipment – deliver not less than 1.5 liters per minute (0.4 gallons per minute) for 15 minutes
- Self-contained emergency showers – deliver a minimum of 20 gallons per minute for 15 minutes




PERSONAL WASH UNITS

- Not acceptable as an eyewash!
- Meant to supply immediate flushing to injured person
- Exceptions:
 - Custodial/housekeeping
 - Retail



EMERGENCY EYEWASH/SOWER LOCATION - TRAVEL DISTANCE


- Within 25 feet if:
 - Highly corrosive or severe tissue damage
 - $\text{pH} \geq 11.5$
 - $\text{pH} \leq 2.0$
- Within 100 feet if:
 - Injurious or corrosive substances
 - $\text{pH} > 2$ but ≤ 4
 - $\text{pH} \geq 9$ but < 11.5
 - Blood/OPIM at HIV/HBV research facilities
- Shall be easily accessible, well lit and marked




MIOSHA INSTRUCTION, MIOSHA-STD-07-1R2

Look to MIOSHA instruction for further information regarding:

- Design specifications
- Water source
- Temperature
- Inspections
- Exceptions



BLOOD-BORNE INFECTIOUS DISEASES (BID) MIOSHA PART 554 (AS AMENDED 10/28/14)



EXPOSURE DETERMINATION

- **Category "A"** employees have exposure or reasonably anticipated exposure during routine and non-routine required tasks.
- **Category "B"** employees **do not** perform tasks that involve exposure to blood or other potentially infectious material.
- Without regard to protective equipment.
- **Maintain list of all "A" job classifications.**

BIDS STANDARD REQUIREMENTS

- **Written exposure control plan (includes SOPs)**
- Universal Precautions
- Gloves and PPE
- Housekeeping
- Vaccines and post exposure treatment (i.e., prophylaxis)
- Training – initial and annual refresher



EXPOSURE CONTROL PROGRAM

- Task-specific SOPs must be developed and shall address how inadvertent exposures (e.g. used needle sticks)
- Let's discuss the SOPs related to your site now
- Program must be accessible to Cat A emp:
 - Written and reviewed by knowledgeable person **annually**
- Healthcare must solicit input from non-management personnel

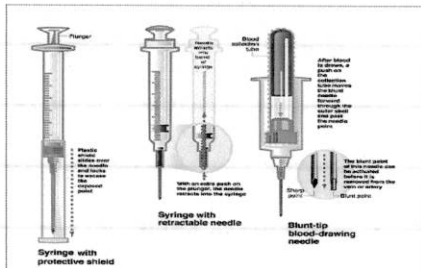
EXPOSURE CONTROL PLAN - HEALTHCARE FACILITIES

Healthcare facility exposure control programs must also:

- Reflect changes in technology that eliminate or reduce exposure to bloodborne pathogens
- Document **annually** consideration and implementation of safer devices that are:
 - Appropriate
 - Commercially available
 - Effective



EXAMPLES OF SAFER DEVICES HEALTHCARE FACILITIES



HEPATITIS B VACCINE

- Vaccine offered to Category A personnel within 10 days of assignment
- If not interested, see Appendix B – Declination Form
- Post-exposure evaluation
- Appropriate counseling on risk versus benefits before undergoing vaccinations, post-exposure prophylaxes, etc.
- U.S. Public Health Service (CDC) guidelines:
 - Must be followed for vaccine and post-exposure evaluation
 - Unless conflicts with the MIOSHA Part 554

PERSONAL PROTECTIVE EQUIPMENT

- No cost
- Appropriate
- Face and body shielding
- Gloves
 - Allergic employees
 - Disposal /utility



HOUSEKEEPING, DISPOSAL AND LAUNDRY

- Housekeeping - Clean worksite, decontamination procedures, broken glassware, specimen transfer, and proper handling of reuse items.
- Disposal - color coded, labeled, closable, leak proof bags/containers.
- Laundry - minimal handling and agitation, collected where generated, transported in appropriate containers.



APPROPRIATE DISINFECTANTS

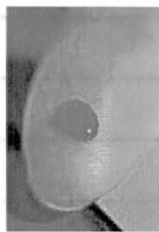
- Work surfaces shall be cleaned and appropriately decontaminated with an appropriate disinfectant.
- One to ten through one to one hundred concentration of household bleach to water (made fresh within 24 hours & not stored in glass containers)



APPROPRIATE DISINFECTANTS

- Consult Environmental Protection Agency (EPA) registered disinfectants lists
<http://www.epa.gov/oppad001/chemregindex.htm>

WHAT IF A WORKER SUSTAINS A NEEDLESTICK?



EXPOSURE INCIDENT

"An incident where an employee has had direct unprotected contact to their eyes, mouth, any other mucous membrane, non-intact skin, or puncture through the skin with blood or other potentially infectious body fluids, during the performance of their duties."

POST EXPOSURE FOLLOW-UP PLAN

- Investigation of exposure incident
- Testing of source individual
- Employee testing
- Employee medical evaluation & counseling



POST EXPOSURE FOLLOW-UP

- Provide employee HIV counseling as required by state law.
- Provide prophylaxis treatment as needed according to U.S. Public Health Service(CDC)
<http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5011a1.htm>
- Healthcare provider must evaluate for relevant illnesses.

BBP Guidelines for Physicians

UPDATED U.S. PUBLIC HEALTH SERVICE
GUIDELINES FOR THE
MANAGEMENT OF OCCUPATIONAL
EXPOSURES TO HBV, HCV, AND HIV
AND RECOMMENDATIONS FOR
POSTEXPOSURE PROPHYLAXIS

CDC. MMWR 2001;50(RR-11)

<http://www.cdc.gov/mmwr/PDF/rr/rr5011.pdf>

PEPLINE

National Clinicians' Post-Exposure Prophylaxis Hotline (PEpline)

- **Free** consultation for clinicians treating occupational exposures to HIV and other bloodborne pathogens...
- 7 days a week (6am-11pm) Pacific Std Time

1-888-HIV-4911



WRITTEN REPORT FROM HEALTHCARE PROVIDER

- Within 15 days after completion, the employee must get copy of medical evaluation report which must contain:
 - HBV vaccination status and
 - Statement that employee has been informed about the results of the medical evaluation conclusions.

EMPLOYEE BID TRAINING

- Access to the standard and an explanation of exposure control plan
- Exposure control plan for the site
- HBV/HIV epidemiology, symptoms and transmission
- PPE and work practices
- Vaccine and prophylaxis info
- Incident reporting procedure
- Signs and labels



TRAINING CONT.

- Training - No cost and during work hours
 - Initially then annually
 - At level of employee
 - Q&A opportunity with a knowledgeable person

SHARPS INJURY LOG

- Applies if required to maintain a 300 log under Administrative Standard Part 11.
- Employers must maintain a sharps injury log for the recording of injuries from contaminated sharps.
- The log must be maintained in a way that ensures employee privacy and must contain, at a minimum:
 - Type and brand of device involved in the incident,
 - Location of the incident, and
 - Description of the incident.



RECORDKEEPING REQUIREMENTS

- ❖ Medical records must be kept confidential
- ❖ Duration of employment plus 30 years.
- ❖ Training records must be kept for 3 years.

RESOURCES

- Exposure to Blood: What Healthcare Workers Need to Know
http://www.cdc.gov/ncidod/dhqp/pdf/bbp/Exp_to_Blood.pdf
- Laundry: Washing Infected Material
http://www.cdc.gov/ncidod/dhqp/bp_laundry.html
- Hand Hygiene in Healthcare Settings
<http://www.cdc.gov/handhygiene/>

RESOURCES

- Division of Healthcare Quality Promotion
Phone: 800-893-0485
Homepage: <http://www.cdc.gov/ncidod/hqp/>
- Hepatitis Hotline
Phone: 888-443-7232
Homepage: <http://www.cdc.gov/hepatitis>
- Needlestick!
Homepage: <http://www.needlestick.mednet.ucla.edu>

MIOSHA RECORDKEEPING

Part 11. Recording and Reporting
Occupational Injuries and
Illnesses



WHO MUST KEEP MIOSHA RECORDS?

- All employers with more than 10 employees at any give time during the previous calendar year.
- Employers notified in advance that they have been selected to participate in the mandatory Bureau of Labor Statistics (BLS) annual survey.
- Partially Exempt employers:
 - Employer who had ≤ 10 employees during the previous calendar year.
 - Employers who conduct business in exempted NAICS codes (e.g. doctor and dentist offices)

- RESOURCES

NAICS Code	Title of NAICS Code
2118	Bakeries and tortilla manufacturing
4411	Automobile dealers
4453	Automotive parts, accessories, and tire stores
4481	Building material and supplies dealers
4492	Specialty food stores
4493	Beer, wine, and liquor stores
4529	Other miscellaneous store retailers
4541	Direct selling establishments
5311	Lessors of real estate
5313	Activities related to real estate
5322	Consumer goods rental
5324	Commercial and industrial machinery and equipment rental and leasing
5419	Other professional, scientific, and technical services
5612	Facilities support services
5617	Services to buildings and dwellings
5618	Other support services
6219	Other ambulatory health care services
6241	Individual and family services
7211	Community food and drinking, and eating and drinking services
7111	Performing arts companies
7113	Promoters of performing arts, sports, and similar events
7121	Museums, historical sites, and similar institutions
7199	Other amusement and recreation industries
7223	Special food services
8129	Other personal services

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New list of partially exempt industries

<http://www.osha.gov/recordkeeping/2014/NAICSReport.pdf>

New list of partially exempt industries

<http://www.osha.gov/recordkeeping/2014/NAICSReport.pdf>

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EXPANDED REPORTING REQUIREMENTS

- All work-related **fatalities** within **8 hours** (same as current requirement)
- Within **24 hours all work-related:**
 - **In-patient hospitalizations** of one or more employees
 - **Amputations**
 - **Losses of an eye**

OCCUPATIONAL DISEASE REPORT -REPORTING OCCUPATIONAL DISEASES

- Employee information
- Employer information
- Illness and comments information
- Report submitted to the State (see MIOSHA website)

Michigan Occupational Disease Reporting Form
State of Michigan Department of Labor and Economic Growth
Division of Occupational Safety and Health

EMPLOYEE INFORMATION	
NAME	
DATE	
DATE OF ONSET	

EMPLOYER INFORMATION	
NAME	
DATE	
DATE OF ONSET	

RECORDKEEPING QUESTIONS?

- ✓ General Assistance
- ✓ Forms
- ✓ Posters
- ✓ Information

www.michigan.gov/recordkeeping

MIOSHA Technical Services Division (MTSD)
Management Information Systems Section (MISS)
(517) 284-7790

X-RAY REQUIREMENTS & RESOURCES

517-284-7840
WWW.MICHIGAN.GOV/RSS



LARA
Department of Licensing and Regulatory Affairs

Navigation Menu:

- ALL ABOUT LARA
- Agencies, Bureau & Commissioners
- Community and Health Services
- Construction Codes
- Corporations, Securities & Commercial Licensing
- Employment Relations
- Fair Services
- Liquor Control Commission
- Michigan Administrative Hearing System

REGISTRATION AND SHIELDING PLAN REVIEWS

- Frequently Asked Questions
- Maintaining Your Radiation Machine Registration
- Online Payment of Registration or Inspection Fees
- Planning or Starting Up a New X-ray Facility
- Radiation Machine Registration Fees
- Radiation Shielding Information

RADIATION SAFETY SECTION

- Inside the Radiation Safety Section: The Radiation Safety Section is responsible for all nonmedical, nonoral radiation machine and facility regulation in Michigan.
- Related Links
- Contact the Radiation Safety Section
- LARA RADIATION SAFETY Subsites

MAMMOGRAPHY

- Breast Density Patient Notification Requirement
- Breast Density Notification - Educating Primary Care Providers
- Mammography
- Mammography Facilities Nationwide Recall
- Mammography Guidance and Policies
- Mammography Rules - Compliance Advice
- Mammography Rules Rollback Effective April

X-RAY REQUIREMENTS & RESOURCES

- FAQ (e.g. Are dosimeters required?)
http://www.michigan.gov/lara/0,4601,7-154-11407_35791-46761--00.html
- Required posting for every x-ray facility called the "Notice to Employees"
http://www.michigan.gov/documents/mdch/bhs-hfs-100_197263_7.pdf
- Required copy of Radiation Safety Section (RSS) rules
http://www.michigan.gov/lara/0,4601,7-154-11407_35791-313217--00.html

QUESTIONS?



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