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Q:- Differentiate between deterministic and Stochastic effect of radiation.

→ Deterministic effects of Radiation →

Deterministic radiation responses are those that exhibit increasing severity with increasing radiation dose.

→ there is a dose threshold, and the dose-response relationship is non-linear.

→ these early effects have been studied extensively with laboratory animals and some data have been obtained from observation of humans.

P.T.O.

→ After exposure to a high radiation dose, humans can experience a response within a few days to a few weeks. This immediate response is called deterministic effect.

→ They are produced by high radiation doses delivered over a short time period.

Stochastic effects of radiation: →

Stochastic effects of radiation exposure are the result of low doses delivered over a long time period.

→ If the incidence of the radiation response increases with increasing radiation dose, it is called stochastic effect of radiation.

→ Radiation exposure experienced by personnel in diagnostic imaging are low dose and low linear energy transfer (LET).

→ The radiation exposures that we experience in diagnostic radiology

are low and low of (LET), they are chronic in nature because they are intermittently over long time period therefore stochastic radiation effects are of particular importance.

→ The principal stochastic effects are radiation-induced malignancy and genetic effects.

→ Stochastic effects of radiation exposure exhibit an increasing incidence of response - not severity - with increasing dose.

→ No dose threshold has been established for a stochastic response.

→ The stochastic dose-response relationship is linear.

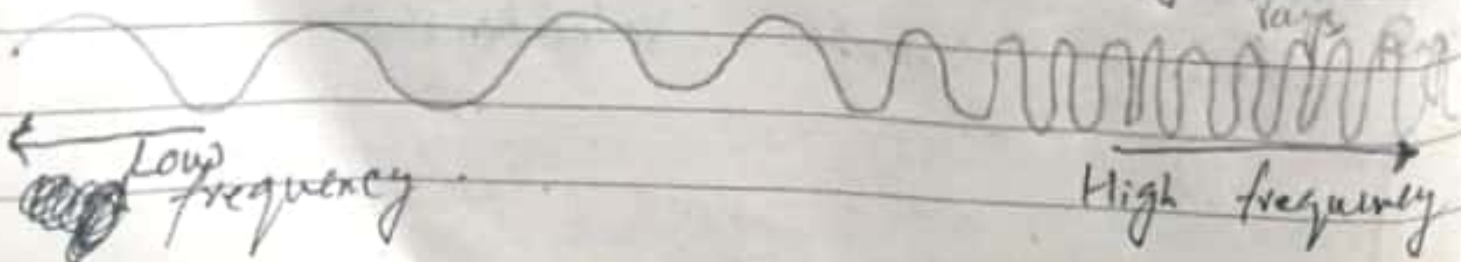
→ Our radiation protection guides are based on the stochastic effect of radiation and on linear, non threshold dose-response relationship.

Q 2:- Explain briefly the following terms:
 Radiation, Radioactivity, non-
 Ionizing radiation and harmful
 radiation.

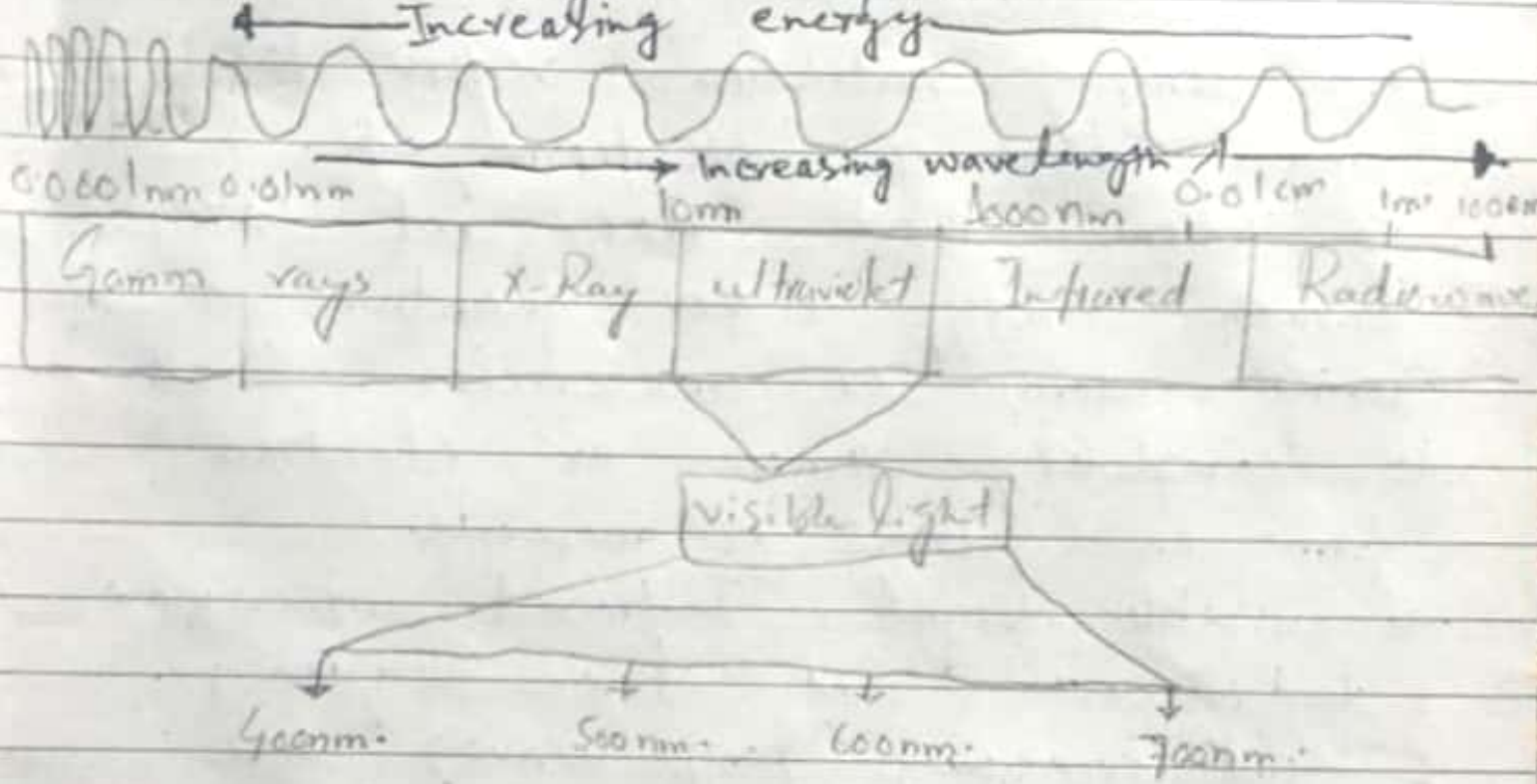
Radiation →
 Energy emitted and transferred
 through space is called radiation.
 Radiation is the transfer of energy.

The Energy Spectrum.

Radio	micro-waves.	Infrared	visible light	ultra-violet	Ionizing Radiation X-Ray	Gamma rays
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Electromagnetic Spectrum



Radio Activity :->

Radio activity is the spontaneous emission of particles and energy in order to become stable.

Non-Ionizing Radiation :->

Non-Ionizing radiation refers to any type of electromagnetic radiation that does not carry enough energy per quantum to ionize atom or molecules. that is to completely remove an electron from an atom or molecule.

-> visible light, Infrared, microwave radio waves, and low-frequency radio-frequency (long-wave) are all examples of non-ionizing radiation.

Harmful Radiation :->

Gamma rays are the most harmful external hazard. Beta particles can partially penetrate skin, causing 'beta burns'. Alpha particles can not penetrate intact skin.

Gamma and α -Rays Can pass through a person & damaging cell in their path.

→ Radiation damages the cell that make up the human body

→ low levels of radiation are not dangerous, but medium level can leads to sickness. Headaches vomiting and fever.

→ High levels can kill you by causing damage to your internal organ its difficult to treat high radiation exposure.

→ Exposure to radiation over a long time can cause cancer.

Q-3 (a) Two basic Principles of radiation Protection

① Minimize time →

The dose to an individual is directly related to the duration of radiation of exposure.

→ If the time during which one is exposed to radiation is doubled the exposure will be double.

→ Keep the time of exposure to radiation as short as possible.

→ During radiography, the time of exposure is kept to a minimum to reduce motion blur.

→ During fluoroscopy, the time of exposure also should be kept to a minimum to reduce patient radiation exposure.

③ Maximize Distance: →

→ Maintain as large a distance as possible between the source of radiation and exposed person.

→ As the distance between the source of radiation and the person ~~is~~ increases, radiation exposure decreases rapidly.

→ If the distance from the source exceeds five times the source diameter. It can be treated as point source.

→ Most radiation sources are point sources. The x-ray tube target, for example, is a point source of radiation.

→ The square law was used as to calculate exposure in radiographic technique.

$$\frac{\text{New exposure}}{\text{old exposure}} = \frac{\text{old distance squared}}{\text{New distance squared}}$$

→ In radiography, the distance from radiation source to patient usually is fixed by the type of examination, and the radiologic technologist is positioned behind a protective barrier.

→ During fluoroscopy, the radiologic technologist can exercise good radiation protection procedure.

The technologist should remain as far from the patient as practicable.

Q-3 (B)

Radiation Protection devices

- Radiation protection Aprons.
- Radiation Protection Accessories.
- Radiation Protection Gloves.
- Radiation protection Glasses.
- Radiation protection Thyroids Shields.
- Radiation Protection Apron Racks.
- Radiation Protection Apron Racks and Drap shields.

- Radiation Protection Barrier and table Shields.
- Patient Radiation protection.
- Portable radiation protection in the field or in the imaging suite.

Q-4 i.

Features For Radiation Protection Design.

→ ①. Protective x-Ray tube Housing: →

Every x-Ray tube must be contained within a protective housing that reduces leakage radiation during dose.

→ leakage radiation must be less than 1 mGy/hr (100 mR/hr) at a distance of 1 m from the protective housing.

② Control Panel.

The control panel must indicate the condition of exposure and must positively indicate when the x-Ray tube is energized.

→ The x-Ray beam on must be positively and clearly indicated to the radiologic technologist.

3) Source-to-Image Receptor Distance Indicators →

A Source-to-Image receptor distance (SID) indicator must be provided.

→ This can be as a tape measure attached to the tube housing.

→ The SID indicators must be accurate to within 2% of the indicated SID.

④ Collimation →

light localized, variable aperture rectangular collimator should be provided.

→ The x-Ray beam and the light beam must coincide to within 2% of the SID.

⑤ Positive - Beam Limitation :-→

Automatic localized, variable - aperture collimator were required on all but special x-Ray Imaging Systems manufactured in the United States between 1974 and 1994.

→ These positive - beam limiting (PBL) devices are no longer required but continue to be a part of most new radiographic Imaging Systems.

→ The PBL must be accurate to within 2% of the SID.

⑥ Beam Alignment :-→

To proper collimation, each radiographic tube should be provided with a

a mechanism to ensure proper alignment of the x-Ray beam and the Image receptor.

⑦ Filtration \rightarrow

All general Purpose diagnostic x-Ray beam must have -

① A total filtration (Inherent plus added) of at least 2.5 mm Al when operated above 70 kVp.

x-Ray tubes designed for mammography have 30 μ m Mo or 60 μ m Rh filtration.

⑧ Reproducibility \rightarrow

For any given radiographic technique, the output radiation intensity should be constant from one exposure to another.

\rightarrow The variation in x-Ray intensity should not exceed 5%.

9) Linearity: →

When adjacent mA Stations are used, for example 100mA and 200mA and exposure time is adjusted for constant MAS, the output radiation intensity should be remain constant.

At constant exposure radiation, causing the MAS to increase in proportion to the increase in mA, radiation intensity should be proportional to MAS.

→ The maximum acceptable variation in linearity is 10% from one mA Station to an adjacent mA Station.

Q-5

What is GM Counter.

How it can be used as
radiation protection device.

GM Counter \rightarrow

Geiger-Müller (GM) Counter is a gas-filled detector designed for maximum gas amplification effect.

The principle of a GM Counter is

The center wire (Anode) is maintained at a high positive voltage relative to the outer cylindrical (electrode cathode).

\rightarrow The outer electrode may be a metal cylinder or a metallic film sprayed on the inside of a glass or plastic tube.

Some GM Counters have a thin radiation entrance window at one end of the tube. The cylinder of the tube is sealed and filled with a special gas mixture. typically argon.

When Ionization occurs in GM Counter, electrons are accelerated toward the center wire.

→ Gas amplification in GM Counter as a proportional Counter.

In addition to Ionizing gas molecule the accelerating electron also can cause excitation of gas molecule through collisions. These excited gas molecules quickly ($\sim 10^{-9}$ sec) return to the ground state through the emission of photon at visible or ultraviolet (wave length). If a UV photon interacts in the gas or at the cathode surface by photoelectric absorption.

→ The avalanche Ionization in a GM tube releases a large and essentially constant quantity of electrical charge, regardless of voltage applied to the tube or the energy of Ionizing radiation event.

→ Once the avalanches has terminated in a GM Counter, an additional problem arises.

The positive Ion cloud moves towards the outer electrode. When the Ion cloud is very close to the outer electrode, electrons are pulled out from it to neutralize the positive Ions.

→ Some of these electrons enter higher-energy orbits of the positive Ion. When they eventually drop into the lower-energy orbits, UV radiation is emitted. This can cause the release of electrons from the outer wall and set off another avalanche.

→ Thus if no precautions are taken, a single ionizing radiation event can cause the GM Counter to go into pulsating series of discharge.

→ This problem is prevented by the introduction of quenching gas into the GM counter gas mixture.

Such GM counters are called self-quenched. Effective quenching gases have three properties.

→ Firstly, they tend to give up electron easily.

→ Secondly, when the quenching gas molecules are neutralized by electrons entering higher energy orbits, they deenergize themselves by dissociating into molecular fragments rather than emitting UV photon.

→ Third, the quenching gas molecules are strong absorbers of UV radiation.

Use of GM. Counter

Geiger-Muller Counters operate under even higher ~~voltages~~ voltages between the anode and the cathode.

Usually in the 800 to 1200 volt range.

Like the proportional counter, the high voltage accelerates the charges produced in initial ionization to where they have enough energy to ionize other electron in the gas.

→ The collection of the large numbers of secondary ions in the GM region is known as an avalanche and produce a large voltages plus.

→ The electric circuit of GM Counter counts and records the number of pulses and the information is often displayed in counts per minute.

→ Geiger Counter are used for Contamination Control in nuclear medicine laboratories.

→ As Portable Survey Instrument,
They are used to detect the presence
of radioactive ~~contamin~~ Contamination on
work surfaces and laboratories apparatus.

→ They are not particularly useful as
dosimeters because they are difficult
to calibrate for varying condition
of radiation.

→ They have a sensitive instruments
that are capable of detecting and
indicating single ionizing events.

→ The Geiger counter does not have
a very wide range. most instrument
are limited to less than 1 m Gy/hr
(100 mR/hr).