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Date: January 1, 2014

To: Registrants, Medical Physicists, and Radiation Safety Officers

From: Mary B. Navara RN, MPH, Supervisor  
Indoor Environments and Radiation, X-ray Unit

Subject: Protective Barrier Use in Fluoroscopic Examinations

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**Information Notice 2014-01**  
**January 2014**  
**Protective Barrier Use in Fluoroscopic Examinations**

### **PURPOSE**

The Minnesota Department of Health (MDH) is issuing this Information Notice to Medical Physicists and Radiation Safety Officers of registrants who utilize fluoroscopic equipment. The information notice references Minnesota Rule 4732.0825, subpart 3, item C, regarding the required use of a personal protective garment of not less than 0.5 mm lead equivalency for all fluoroscopic procedures.

The information in this notice is directed to facilities for consideration. The information in this notice does not require a written response to MDH.

### **DISCUSSION**

MDH has received questions regarding the use of personal protective garments by surgical staff when fluoroscopy is used during surgical procedures. Minnesota Rule 4732 requires that all staff present in the room for fluoroscopic procedures wear personal protective garments. Registrants have noted ergonomic concerns when personal protective garments are worn during a surgical procedure, as well as the infection control concerns presented by multiple individuals standing behind a non-structural barrier during the use of fluoroscopy.

The current rule is specific with regard to the use of personal protective garments, and MDH will not interpret or alter this rule outside of the rule revision process. However, the variance request process is an available avenue for a facility proposing alternative measures to the rule. The registrant may submit a variance request for the Commissioner's review identifying the reasons why the rule cannot be met and the alternative measures that will be taken to assure a comparable degree of protection. MDH encourages communication between the Radiation Safety Officer and the personnel staffing the surgical suite. This is to ensure occupational staff, additional individuals necessary for the procedure, and a patient at risk of infection are protected in an *ALARA* (*As Low as Reasonably Achievable*) environment. MDH believes this communication will improve compliance with regulations, manage occupational health, and minimize the likelihood of adverse health outcomes.