

<b>Q1</b>	<b>Which effect exhibits a threshold?</b>		
(a)	stochastic	(b)	Deterministic
(c)	Stochastic and deterministic	(d)	None of the above

<b>Q2</b>	<b>What is the annual dose limit for a hand in an occupationally exposed person?</b>		
(a)	20mSv	(b)	1Sv
(c)	150mSv	(d)	500mSv

<b>Q3</b>	<b>An example of the deterministic effect is</b>		
(a)	Cancer	(b)	No effect
(c)	Skin Burns	(d)	Improves health

<b>Q4</b>	<b>Analytical x-ray hazard</b>		
(a)	Narrow beam	(b)	High dose rate
(c)	Injury without user noticing	(d)	All of these

<b>Q5</b>	<b>What radiation protection is put forward by the ICRP?</b>		
(a)	Justification of Practices	(b)	Limitation of Doses
(c)	Optimisation of Protection	(d)	All of these

<b>Q6</b>	<b>One radiation safety requirement for all x-ray units.</b>		
(a)	Indication of tube status	(b)	Non slip flooring
(c)	Height of sample loading area	(d)	All of these

<b>Q7</b>	<b>Radiation safety &amp; Protection Plans contain</b>		
(a)	Safety measures	(b)	RSO functions
(c)	Legislation requirements	(d)	All of these

<b>Q8</b>	<b>Safety with research x-ray devices requires</b>		
(a)	Minimal user training	(b)	User training and engineering controls
(c)	Engineering controls only	(d)	Nothing

<b>Q9</b>	<b>X-rays are non ionising radiation</b>		
(a)	True	(b)	False

<b>Q10</b>	<b>Gray (Gy) is the effective dose</b>		
(a)	True	(b)	False

<b>Q11</b>	<b>X-ray equipment require safe working procedure</b>		
(a)	True	(b)	False

<b>Q12</b>	<b>RSO are responsible to ensure compliance with legislation</b>		
(a)	True	(b)	False

<b>Q13</b>	<b>What is an RSPP?</b>		
(a)	Radiation Standard Policy & Procedure	(b)	Radiation State Policy on Protection
(c)	Radiation Safety and Protection Plan	(d)	Risk Situation Planning Procedure

<b>Q14</b>	<b>Users must ensure they comply with RSPP and legislation</b>		
(a)	True	(b)	False

<b>Q15</b>	<b>Protective shields may be removed to allow better access</b>		
(a)	True	(b)	False

<b>Awarded Mark =</b>	/ 15
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**Worker Name & Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Supervisor Name & Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_