



Quality Control form

Procedures and instructions Compiled by **Gendentsa Inspection Body**

Contact no. **0634783407**
Dedicated to helping Dentists in optimising X-ray Quality Control and safety

The following is the protocol to follow for Routine in house testing to be done by the Licence Holder. An inspector or your supplier will go through each test with the licence holder and explain how to conduct these tests

Test No.	Start Date:												
Month		Acceptance	2	3	4	5	6	7	8	9	10	11	12
Initials													
Extra-oral X-ray tubes with intra-oral image receptors, (The sensor that goes in the mouth and the actual x-ray machine)													
Test number	Test	How to do the test	Date and Sign										
1	Lead and rubber aprons (if applicable)	If available check there are no cracks or holes in the apron											
2	Indicators mechanical and other safety checks and warm up	Switch the x-ray unit on and check that it goes through a startup sequence (Note some machines do not have a startup sequence). Make sure there are no error warnings. If the x-ray unit has an emergency stop check it is working. If the x-ray unit is a wall mounted intra oral unit make sure it is securely fastened to the wall and not loose											
													User Notes

3	Tube Head Stability	<p>Take the x-ray head and place it in the various positions that would be expected to be placed when taking an x-ray. Leave the head and check that it does not move from the position you have placed it. The tube head should stay in place and not drift. An x-ray head that drifts is a major cause of repeat x-ray exposures or may require someone to hold it in place this would not be considered safe practice.</p>													
4	Appropriate technique chart Displayed at X-ray unit	<p>This only applies to timers on x-ray units that do not display a technique chart. If the timer has only a mechanical dial then make sure you are using the recommended exposure chart for your intra oral sensor or your developing procedure</p>													
5	Condition of digital detectors	<p>Every 3 months check the sensor especially the intra oral sensor Check and make sure the cables are not damaged. A damaged cable may not necessarily affect the image quality. However a note of the damage must be made and the image chain must be checked for any anomalies.</p>													
6	Evaluation of total image chain	<p>The image chain consists of The x-ray unit the sensor and the diagnostic monitor. Using a suitable step wedge take an exposure every month of the step wedge. Refer to online video instructions For panouramic and cephalometric. Please note It is compulsory to have a phantom</p>													

	Panouramic Radiographic reproducibility and 7 uniformity	This test can be done with the lowest setting. Check the image that it is the same shade on either side of the centre vertical point. Please note some panouramic images will have a dark vertical centre this is normal. However some may not. The important part of analysing the image is that the image left from centre and right from centre should look the same. You must always compare the initial image taken to the most current image and check for any differences in the image. Remember in order to get the same image you must always use the same settings.													
8	Panouramic radiography Beam alignment and synchronistaion of exposure with tube motion.	Take a blank exposure observe the image. The image should have a small white border. Note this border may be very small. If there is no white border on the image then this could indicate a mis alignment of the x-ray collimnator													
10	Cephalometric Beam alignment.	Take a blank exposure observe the image. The image should have a small white border. Note this border may be very small. If there is no white border on the image then this could indicate a mis alignment of the x-ray collimnator													