

**MARYLAND RADIATION CONTROL ADVISORY BOARD
MINUTES
April 2, 2019**

**Maryland Department of the Environment
Air and Radiation Administration
Radiological Health Program**

MEMBERS PRESENT

**Richard Hudes, M.D. (Chair)
Jeanette Linder, M.D.
Josephine M. Piccone, Ph.D.
Gregory Smith, CHP
David Bisson, RSO
Thomas Beck, Ph.D.**

MEMBERS ABSENT

**Mr. Sean Austin
Mahadevappa Mahesh, Ph.D.
Ms. Doreen Williams
Allen Brodsky, Ph.D.
Mr. John S. Wojtowycz
David O'Neill, Ph.D.**

OTHERS PRESENT

Maryland Department of the Environment Staff:

**Ms. Eva Nair, Manager, Radiological Health Program
Mr. Charlie Cox, Radiological Health Program
Ms. Shannon Page, Radiological Health Program
Mr. James W. Lewis, Radiological Health Program
Mr. Michael Kurman, Radiological Health Program
Mr. Alan Goldey, Radiological Health Program**

Ms. Bonnie Reynolds, Radiological Health Program, Recording Secretary

Others Present:

***Ken Brenneman, RSO, University of Maryland, Baltimore
James Jordan, MS, DABR, St. Agnes Hospital
Carole Miller, M.D., St. Agnes Hospital
Mark Hall, Director, St. Agnes Hospital
Mary Austin, Chief, Mission Integration Officer, St. Agnes Hospital
Stewart Becker, RSO, University of Maryland Medical Center
Joseph C. Fischer, Health Physicist, JHU/APL***

Meeting Convened

The April 2019 Radiation Control Advisory Board (RCAB) meeting was held at St. Agnes Hospital, Baltimore and was called to order at 2:05 p.m. by the RCAB Chair, Richard Hughes.

Presentation

A presentation on “Just Culture in Radiology” was presented by Dr. Jeannette Linder on Diagnostic Medical Radiation Events (DMRE). It was presented on how DMRE’s are being handled. As a result of DMRE’s, medical and communication errors in radiology prompted the use of diagnostic recording logs, procedural changes to monitor events more closely and to reduce errors. The benefit in more reporting would be more compliance. Human error, risk behavior and reckless behavior can be reduced by changes in choices, processes, procedures, design and trainings. The goal is to protect patients, staff and the public.

Update on Diagnostic Medical Radiation Events

Out of 1,474 registered hospitals, mammography and medical facilities, 115 facilities reported a DMRE over a two year period. This constituted 7.8% of the total registered facilities in the State of Maryland. Statistically, this means that 92.2 % of Maryland’s facilities did not report a DMRE. Geographically, Baltimore City ranked as having the highest amount of DMRE occurrences followed by Baltimore and Montgomery Counties. Corrective actions included, but were not limited to re-education ranking as the most common, counseling, procedural changes, color coded arm bands and stop sign stickers. The study also revealed that the majority of facilities that have reported were repeat offenders. A random audit of the State licensed private inspectors will be conducted to ensure procedures are being followed.

Regulations Update

Supplement 30 - Whole Body Scanners currently used in several prisons – regulations will be proposed. (COMAR 26.12.01.01 Supplement 30).
Electronic Brachytherapy regulations will be part of COMAR 26.12.01.01 Section F.8 and are planned for Supplement 32. Also, in Supplement 32, Section F.9 (medical accelerators) will be reviewed for potential additions.

Other Topics

“A Blueprint for the Primary Prevention of Cancer” – A handout was given out and a detailed discussion was ensued.

Meeting Closed

The RCAB meeting adjourned at 4:02 p.m.