

INFORMATION SHEET

Task Title: Regional Coordination Meeting (RCM) on Strengthening Radiation Protection in Medicine

Project Number and Title: RAS9055 Strengthening Radiation Protection in Medicine

Place: Manila, Philippines

7 – 11 June 2010

Date:

Deadline for Nominations: **31 March 2010**

Deadline for Submission of Country Reports **30 April 2010**

Meeting Organizers: The International Atomic Energy Agency (IAEA) in collaboration with the Government of Philippines through the Department of Health

Language The language of the meeting will be English

Participants' Qualifications: The meeting will be attended by Government nominated National Project Coordinator (NPC) of RAS/9/055. It is anticipated that the NPC will be fully mandated by the Government authorities to take decisions, including the allocation of resources, on matters concerning the implementation of the project.

For those who participated in earlier RCMs such as RAS9047, the NPC should have shown successful progress in the project in the reports in different tasks selected and have submitted periodic 6 monthly reports after the RCM in 2008. For countries that have either not submitted report or have submitted minimal information, the Member States are encouraged to take advantage of this project and nominate new NPC. The most important factor contributing to success of the project is the choice of a suitable NPC. It is for the country to decide whether the nominated person should be from regulatory body, ministry of health or a hospital. What is most important is the capability to make progress in radiation protection and protection in medicine in line with objectives of RAS9055. The technical capability in subject is essential requirement. Participation only based on managerial capability is not an accepted criterion.

Purpose of the Meeting:

The purpose of this RCM is to have a follow-up to the previous RCM held in Hanoi, Vietnam in October 2008. The action plans were developed in this RCM and all participating countries had agreed to provide 6 monthly reports. Some results have been published in good journals and have received wide media attention too in view of the value the results represent.

Medical use of radiation continues to increase and presents larger and larger share of radiation exposure to population. Moreover, the individual patient doses are increasing as many patients undergo multiple procedures and multiple times. Recent reports from USA covering survey of 31,500 patients have shown that 5% of patients had undergone more than 22 CT scans and 1% more than 38 scan in review period of 22 years. 15% patients had effective dose >11 mSv, 4% 250-1375 mSv and 1% had >399 mSv. This situation can not be unique to USA and it is only through studies in other countries that one can say how well or bad is the situation in different countries. Thus while the focus of the project has been on achieving patient protection through optimization actions, newer issues emerging require attention and development of actions.

There is thus great need to implement means to achieve compliance of International Safety Standards (BSS). Radiation protection of patients in the areas of diagnostic radiology, interventional radiology, interventional cardiology, radiotherapy and nuclear medicine requires considerations besides developing national framework. Based upon feedback from participating countries, the RCM shall arrive at country-specific action plans for 2010-2011 taking into account feasibility and constraints in accomplishing the regional project goals. The meeting is intended to strengthen the programme for protection of patients in diagnostic and therapeutic applications of radiation in the Member States concerned in line with expectations of principal requirements of the International Basic Safety Standards for Protection against Ionizing Radiation and for the Safety of Radiation Sources (BSS 115).

Specific objectives of the meeting are:

(i) to present, discuss and evaluate results of actions taken by country in the last 2 years, particularly following the previous RCM (ii) to prepare draft report giving summary of achievements (iii) to prepare country-specific action plans based on results presented and goal set in the project (iv) to agree on IAEA input for the project implementation in 2010 and 2011 (V) discuss and develop project framework for next five years.

Country Reports:

A written comprehensive Country Status Report and a Power Point Presentation (15 minutes) should be prepared. The report and presentation should include following:

How have you been benefited by participation in IAEA projects, this one or national on medical exposure? How has country been benefited? How has patient been benefited? What was situation of patient dosimetry and dose management in your country in 2005 and what is the situation now? Where you would like to be in coming 3 years? It will be good if you bring

information on number of CT (single slice and MDCT) scanners in your country, workload of CT on adult patients and on children, exposure factors in children in comparison to adults (in same hospital), also please include the number of MRI systems with city distribution,

All data on radiation protection of children and on repeated examination on same patients in number of years (if available). Also information on tracking radiation exposure of individual patient, requirements of radiation passport or another method for tracking. Also information on requirements to record patient doses.

Papers presented in the conferences, published in journals from the results of the IAEA project.

Please bring along following:

Photographs of interesting situation in your country e.g. manual film processing, very old X ray machines and others that depict extreme situation either of better side or worse side.

The submission of the Report and presentation is prerequisite to the IAEA's supported participation in this regional event. Please email the report to Mr. Madan Rehani (M.Rehani@iaea.org) and Mr. Xiankai Shen (X.Shen@iaea.org).

**Application
Procedure:**

Nomination for National Project Coordinator should be submitted on the standard IAEA Nomination Form for *Meeting/Workshop and National Consultant* (available through the IAEA's website). Completed forms should be endorsed by relevant national authorities and returned to the Agency through the official channels. Applications must be received by the International Atomic Energy Agency, P.O. Box 100, A-1400, Vienna, **not later than 31 March 2010.**

Nominations received after that date or applications sent directly by individuals or by private institutions cannot be considered. Advanced nominations by facsimile (+43-1-26007), or e-mail (Official.Mail@Iaea.Org) are welcomed. The facsimile / e-mail should contain the following basic information about the candidate: name, age, academic qualifications, present position including exact nature of duties carried out, proficiency in English and full working address including telephone / facsimile numbers.

**Administrative
and Financial
Arrangements:**

Governments will be informed in due course of the full details on the procedures to be followed with regard to administrative and financial matters.

During their attendance at the workshop, participants from countries, eligible to receive technical assistance, will be provided with a stipend sufficient to cover accommodation, food and minor incidental expenses. The Agency will also bear the full cost of their round-trip air ticket, economy class, from their home countries to Dhaka, Bangladesh and return. Shipment of accumulated workshop materials to the participants' home countries is not the

responsibility of the Agency.

The organisers of the workshop do not accept liability for the payment of any cost or compensation that may arise from damage to or loss of personal property, or from illness, injury, disability or death of a participant while he/she is travelling to and from or attending the workshop, and it is clearly understood that each Government, in nominating participants, undertakes responsibility for such coverage. The Governments would be well advised to take out insurance against these risks.