**Appendix 5**

**Physical and mechanical inspection of X-ray equipment – record sheet**

**Date:**

**X-ray equipment ID:**

|  |  |  |
| --- | --- | --- |
|  |  | **Pass (√) Fail (x)** |
| **1** | Cables are free from breaks, kinks / knots and electrical connections are secure |  |
| **2** | Cables are not under heavy equipment |  |
| **3** | All equipment interlocks and brakes are working |  |
| **4** | X-ray table and tube move smoothly |  |
| **5** | The X-ray table top is horizontal  |  |
| **6** | The vertical column is vertical |  |
| **7** | Light beam diaphragm is functioning, free from dust and has an adequate intensity |  |
| **8** | X-ray tube is free from dust and there are no oil leaks |  |
| **9** | Operator’s view of the patient from the control area is unobstructed |  |
| **10** | Control panel has working meters and lights |  |
| **11** | Control panel has visible and accurate read-outs of exposure factors |  |
| **12** | There is proper operation of an undamaged hand-switch |  |
| **13** | The source-to-image distance display is accurate |  |
| **14** | The X-ray tube and generator model and serial numbers are clearly marked and readable |  |