

Lead Aprons – Best Practice

NRL C5:

3.12 *A protective apron of lead equivalence not less than 0.25 mm **shall** be used by the operator of a mobile or portable x-ray machine.*

*Additional leaded aprons and leaded gloves **shall** always be available with mobile and portable x-ray machines in case patients are required to be held in position during radiography, or other persons are required to assist in any way.*

The wearing of a lead apron is a health and safety issue. Whilst a protection from radiation, for the apron to fulfil this role it must be the right size, and of suitable material so as to be not too heavy for the person wearing it.

It is essential that each DHB has enough lead aprons in both quantity and adequate size range and of the new lightweight material.

Lead aprons must be cleaned regularly.

As part of quality assurance the Lead aprons must be screened for cracks and faults at least annually, preferably more frequently e.g. 6 monthly.

Examples of best practice:

Wellington Hospital and Dunedin Hospital Radiology departments:

A nominated MRT is responsible for the management of lead protective wear:

- A QA chart with an inventory of all lead protective wear, including allocated and non-allocated
- This chart will demonstrate the screening and cleaning schedule which is to be done 6 monthly.
- A process has been implemented of ordering 1 new apron every 3 months to ensure standards and replacement with lightweight material to minimise injury
- Proper storage for the protective gear is installed in all appropriate areas

