**Example Training Records for IR(ME)R Duty Holders at** *name of dental practice*

|  |  |
| --- | --- |
| **Name of duty holder** |  |
| **Job title** | *e.g. dental nurse* |
| **Entitlement** | *e.g. Operator* |

**Training reviewed by: Date:**

**Next training review due:**

**External Training**

|  |  |  |
| --- | --- | --- |
| **Type of training** | **Qualification** | **Date** |
| *e.g. dental nurse training including radiography* | *Certificate in Dental Nursing* |  |
| *e.g. CPD training on radiation protection* |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**In-house Training** (if applicable)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Site/Room/Equipment | *e.g. Glasgow Dental Practice, Exam room 2, Intra oral machine* | | | |
| Task | | 🗸 | Trainer initials | Date |
| Switch x-ray equipment on and off | |  |  |  |
| Aware of exposure charts and protocols | |  |  |  |
| Can select appropriate exposure factors | |  |  |  |
| Undertake an intra oral dental exposure | |  |  |  |
| Use rectangular collimation | |  |  |  |
| Emergency procedure for equipment failure | |  |  |  |
| Complete room log including exposure factors/dose when appropriate | |  |  |  |
| This person has received training on the above tasks | | | | Date |
| Signature of trainer |  | | |  |
| Name of trainer |  | | | |
| Signature of duty holder |  | | |  |
|  |  |  |  |  |
| Site/Room/Equipment | *e.g. Glasgow Dental Practice, Exam room 2, Desktop processor* | | | |
| Task | | 🗸 | Trainer initials | Date |
| Switch x-ray equipment on and off | |  |  |  |
| Process a film | |  |  |  |
| Clean processor | |  |  |  |
| Change chemicals in processor | |  |  |  |
| Processor QA | |  |  |  |
| This person has received training on the above tasks | | | | Date |
| Signature of trainer |  | | |  |
| Name of trainer |  | | | |
| Signature of duty holder |  | | |  |
|  |  |  |  |  |
| Site/Room/Equipment | *General* | | | |
| Task | | 🗸 | Signature of duty holder | Date |
| Familiar with the responsibilities and processes described in the Employer’s Procedures and Local Rules | |  |  |  |
|  |  |  |  |  |

*Additional or alternative records for training should be included as appropriate for each duty holder. Training should map to the required competencies for each IR(ME)R duty holder (see EP1).*