

## Safety Approval Checklist (Part A) – Non-Ionising Radiation Safety

(For all projects that involve laser, ultraviolet radiation, sub-radiofrequency, radiofrequency and microwave radiation)

**This checklist is to be used by the principal investigator to determine if approval can be granted by the Head of Department or whether a more detailed Risk Assessment (Part B or equivalent) is needed.**

Name of Principal Investigator (PI): \_\_\_\_\_ Department: \_\_\_\_\_

Project Title: \_\_\_\_\_

<b>What type of non-ionizing radiation will be used in the project?</b>		Please specify briefly:
	Yes No	
1. Laser		e.g. class 3b laser, open beam
2. Ultraviolet radiation		e.g. UVC, upper air disinfection, 1.7 $\mu$ W/cm <sup>2</sup>
3. Sub-radiofrequency EM field		e.g. 25kHz magnetic field, 16A/m
4. Radiofrequency & microwave radiation		e.g. UHF land mobile transceiver
5. Other _____		e.g. Any equipment that may have non-ionizing radiation hazards which have not been revealed above.

Describe briefly what procedures will be carried out:

**Answer questions a to c if you tick Yes for question 1 above**

<b>a</b>	<b>Will class 3b and/or class 4 lasers be used?</b> Yes I/We will follow Code of Practice on the Use of High-Power Lasers, The University of Hong Kong. No
<b>b</b>	<b>Will the laser be used for medical/health care activities?</b> Yes I/We will follow Code of Practice, Health Care Laser System, Hong Kong Medical Association and the Hong Kong Surgical Laser Association. No
<b>c</b>	<b>Will the laser be used for industry, display or entertainment?</b> Yes I/We will follow Laser Safety Guidance Notes for Industry, Display and Entertainment, EMSD, Hong Kong No

**Answer questions d to e if you tick Yes for question 3 or 4 above**

<b>d</b>	<b>Will radio-communication apparatus or any apparatus emitting radio frequency energy be used?</b> Yes I/We will apply for licence from the Communications Authority (CA). No
<b>e</b>	<b>Will industrial, scientific or medical (ISM) equipment be used?</b> Yes I/We will apply for Industrial Scientific and Medical Electronic Machine (ISMEM) Licence. No

**The PI is responsible for ensuring the safe use of all equipment even where there is no local legislation. If this is the case please follow the available guidelines and code of practice.**

If all these issues have been clearly addressed then the Head of Department should be able to endorse the application. Otherwise, a fuller risk assessment should be carried out i.e. Part B or other equivalent assessment.

**Declaration of Principal Investigator**

I/we are aware of my/our safety responsibilities as a PI spelt out in the University's Safety Policy.

I/we will ensure the facilities; safety equipment and procedures are in place to enable this work to comply with relevant licence conditions, code of practice and SOP's if applicable.

I/we will ensure everyone carrying out the work is appropriately trained,

I/we will report all near misses and accidents and all symptoms of relevance to what I/we am/are working with.

I/we will also report any new conditions that may be related to the safety of the work.

I/we will provide supervision and instruction to all personnel working on the project.

\_\_\_\_\_ Signature of Principal Investigator \_\_\_\_\_ Date

\_\_\_\_\_ Endorsed by Head of Department \_\_\_\_\_ Date