

**INSTRUCTIONS FOR [RH 2261C](#)****I. USE OF RH 2261C**

**CAUTION:** Do not use RH 2261C for changes in ownership.

**Use this form when all of the following conditions are met:**

- Your facility, business, or practice has an existing registration number issued by the California Department of Public Health, Radiologic Health Branch (CDPH-RHB);
- You wish to notify the CDPH-RHB of a change to your existing registrant information, registered machine information, or machine inventory (adding or removing a machine); and
- Your facility, business, or practice possesses one or more radiation machines, as defined below.

**NOTE:** If your facility, business, or practice is no longer in possession of any radiation machines **or** all radiation machines that are still in your possession have been made incapable of producing radiation you should not use this form. **Instead**, use the “Radiation Machine Registration for Withdrawal of Registration”, [RH 2261W](#).

**II. IMPORTANT INFORMATION ABOUT CHANGES IN OWNERSHIP**

- Registration numbers are not transferrable.
- A person, as defined below, should submit a completed “Radiation Machine Registration for New Registrants”, [RH 2261N](#), within 30 days of taking ownership of a facility, business, or practice that possesses a radiation machine.
- An existing registrant that has sold or transferred ownership of its facility, business, or practice should submit a completed “Radiation Machine Registration for Withdrawal of Registration”, [RH 2261W](#), within 30 days of transferring ownership.
- A change in ownership has occurred if, but not limited to, any of the following actions:
  - A sole proprietor becomes a partnership, limited liability company, or corporation.
  - A partnership has changed partners or becomes a limited liability company or corporation.
  - A limited liability company or corporation becomes a partnership or sole proprietor.

**III. REGULATORY AUTHORITY**

Title 17, California Code of Regulations, section 30115 requires that “the registrant shall report in writing to the Department, within 30 days, any change in: registrant's name, registrant's address, location of the installation, or receipt, sale, transfer, disposal, or discontinuance of use of any reportable source of radiation.”

**IV. DEFINITIONS**

- “Authorized Representative” means an individual who has been authorized to act on behalf of the registrant.
- “Incapable of producing radiation” means a radiation machine is no longer functional.  
**UNPLUGGING A MACHINE OR PLACING A FUNCTIONAL MACHINE IN STORAGE ONSITE OR OFFSITE, FOR USE AT A LATER TIME, DOES NOT MEAN THAT A MACHINE HAS BEEN MADE INCAPABLE OF PRODUCING RADIATION.**

- “Mobile machine” is a radiation machine that is in a mobile vehicle, or is transported for the purpose of providing radiation services at a different location, but does not include a radiation machine moved from room to room at the same physical address.
- “Person” means any individual, corporation, partnership, limited liability company, firm, association, trust, estate, public or private institution, group, agency, political subdivision of this State, any other state or political subdivision or agency thereof, and any legal successor, representative, agent, or agency of the foregoing, other than the United States Nuclear Regulatory Commission, the United States Department of Energy, or any successor thereto, and other than Federal Government agencies licensed by the United States Nuclear Regulatory Commission, under prime contract to the United States Department of Energy, or any successor thereto.
- "Radiation machine" means any device capable of producing radiation when the associated control devices are operated, but excluding devices which produce radiation only by the use of radioactive material.
- "Registrant" means any person, as defined above, who is registering or who has registered with the CDPH-RHB. Federal agencies are exempt from the registration requirements.
- “Registration number” means a unique number issued by the CDPH-RHB to identify a specific registrant.

## V. INSTRUCTIONS

**TYPE OF ACTION.** Choose all actions that apply and complete all required sections.

### A. REGISTRANT INFORMATION

- **Registrant.** Enter the registered name of the facility, business, or practice **before the change**. If applicable, include the “doing business as” name (dba).
- **Registration Number.** Enter the registration number issued by the CDPH-RHB for this facility, business, or practice. **STOP completing this form if you do not have a registration number.** To be issued a registration number, you should submit a completed “Radiation Machine Registration for New Registrants”, [RH 2261N](#).
- **Mammography Provider.** Check this box if you provide mammography services.
- **Physical Address.** Enter the physical address of the facility, business, or practice **before the change**.

### B. CHANGES TO REGISTRANT INFORMATION

**CAUTION: Make sure to update only those items that have changed. A completed field indicates a change.**

- **Registrant.** Enter the **new or corrected** name of the facility, business, or practice. If applicable, include the “doing business as” name (dba).
- **Business Phone Number.** Enter the **new or corrected** phone number for the facility, business, or practice.
- **Type of Facility, Business, or Practice.** Enter the **new or corrected** type of facility, business, or practice (e.g. dental, medical, veterinary, etc.).
- **Mammography Provider.** Check this box if you will be providing mammography services.
- **No Longer a Mammography Provider.** Check this box if you have discontinued providing mammography services.

- **Physical Address.** Enter the **new or corrected** physical address of the registrant. If you only possess mobile machines, enter the physical address where the mobile machines are stored during non-business hours.
- **Mailing Address.** Enter the **new or corrected** mailing address of the registrant.

### C. CHANGES TO REGISTERED MACHINE INFORMATION

Use this section to update registered machine information. Complete and attach additional copies of page 2 as needed. **The machine has to be registered with CDPH-RHB to make any changes.**

- **Registered Machine.** Provide the manufacturer, model, and machine location of the registered machine you wish to update information on.
  - **Manufacturer.** Enter the name of the manufacturer.
  - **Model.** Enter the manufacturer's model name and/or number.
  - **Room Name or Number.** Enter the room name or number where the radiation machine is installed. Enter "Multiple" if used in multiple rooms at the same physical address. Enter "Mobile" for mobile machines.
- **Changes.**

**CAUTION: Make sure to update only those items that have changed. A completed field indicates a change.**

  - **Manufacturer.** Enter the **new or corrected** name of the manufacturer.
  - **Model.** Enter the **new or corrected** manufacturer's model name and/or number.
  - **Room Name or Number.** Enter the **new or corrected** room name or number where the radiation machine is installed. Enter "Multiple" if used in multiple rooms at the same physical address. Enter "Mobile" for mobile machines.
  - **Number of X-ray Tubes, Waveguides or Electron Guns.** Enter the **new or corrected** number of X-ray tubes, waveguides, or electron guns.
  - **Type Code.** Enter the **new or corrected** Type Code that matches the radiation machine's intended use. The Type Codes can be found under "Categories of Radiation Machines" starting on page 6. If none of the Type Codes match your machine, write "NA" and provide a detailed description of the machine and its use under "Additional Information".
  - **Additional Information.** Enter any relevant information about the machine that is not covered above, e.g., a detailed description of the machine and its use that does not fall under any Type Codes.

### D. REMOVING REGISTERED MACHINES

- List all registered radiation machines that are no longer in your possession. Complete and attach additional copies of page 3 as needed. You should submit a completed "Radiation Machine Registration for Withdrawal of Registration", [RH 2261W](#), if you are no longer in possession of any radiation machines **or** all radiation machines in your possession have been made incapable of producing radiation.
- **Registered Machine.** Provide the manufacturer, model, and machine location of the registered machine you wish to remove from your registration.
  - **Manufacturer.** Enter the name of the manufacturer.
  - **Model.** Enter the manufacturer's model name and/or number.
  - **Room Name or Number.** Enter the room name or number where the radiation machine is installed. Enter "Multiple" if used in multiple rooms at the same physical address. Enter "Mobile" for mobile machines.

- **Removal Action.**
  - **This machine is no longer in my possession.** Check this box if you have sold, transferred, donated, or disposed of the machine.
  - **This machine has been made incapable of producing radiation.** Check this box if you still possess this machine but have made it incapable of producing radiation.
  - **Removal Action Date.** Enter the date of the Removal Action. It should be in the format mm/dd/yyyy. If you do not know the actual date, enter an approximate date.
- **Additional Information.** Enter any relevant information about the machine that is not covered above.

## E. ADDING MACHINES

List all radiation machines that you wish to add to your registration. Complete and attach additional copies of page 4 as needed. **To prevent duplicate registration do not add machines that you have already registered.**

- **Manufacturer.** Enter the name of the manufacturer.
- **Model.** Enter the manufacturer's model name and/or number.
- **Type Code.** Enter the Type Code that matches the intended use of the radiation machine you are registering. The Type Codes can be found under "Categories of Radiation Machines" starting on page 6 of this document. If none of the Type Codes match your machine, write "NA" and provide a detailed description of the machine and its use under "Additional Information".
- **Number of X-ray Tubes, Waveguides, or Electron Guns.** Enter the number of X-ray tubes, waveguides, or electron guns.
- **Room Name or Number.** Enter the room name or number where the radiation machine is installed. Enter "Multiple" if used in multiple rooms at the same physical address. Enter "Mobile" for mobile machines.
- **Acquired Date.** Enter the date you took possession of the machine. It should be in the format mm/dd/yyyy. If you do not know the actual date of acquisition, enter an approximate date.
- **Form FDA 2579.** Check this box if you are attaching a copy of the Report of Assembly of a Diagnostic X-Ray System (Form FDA 2579) for the machine you have listed. Although not required, providing a copy of this form will help the CDPH-RHB maintain a more accurate inventory of your radiation machine. Form FDA 2579 is a federal form that manufacturers/assemblers must complete upon the installation of a diagnostic X-ray system or component(s) **intended for human use**. The manufacturer/assembler provides a copy of the completed form to the facility, business, or practice.
- **Additional Information.** Enter any relevant information about the machine that is not covered above, e.g., a detailed description of the machine and its use that does not fall under any Type Codes.

**F. FACILITY CONTACT INFORMATION**

Provide the name and contact information of the individual that a Radiologic Health Branch representative may contact regarding any information provided on this form. This individual may be different from the authorized representative.

- **Name.** Enter the name of the individual.
- **Phone Number.** Enter the phone number.
- **E-mail Address.** Enter the e-mail address.

**G. SIGNATURE OF AUTHORIZED REPRESENTATIVE**

- **Name.** Enter the name of the authorized representative.
- **Title/Position.** Enter the title or position.
- **Signature.** Enter the signature of the authorized representative.
- **Date.** Enter the date the form is signed.

**NOTE:** A facility, business, or practice that possesses a radiation machine must establish, implement, and maintain a radiation protection program in accordance with state requirements. **A copy of the radiation protection program must be made available for inspection upon request.** For additional information, please visit our website at:

<http://www.cdph.ca.gov/pubsforms/forms/Documents/RHB-Guide-RadProtectionProgram.pdf>

**H. RECORDKEEPING/SUBMISSION**

Submit all pages. Keep a copy for your records. Do not submit multiple copies of the same completed form. No payment is required at this time. **Mail the original** with supporting documents to:

<p><b>If sending by regular mail, send it to</b> Registration and Certification Support Unit California Department of Public Health Radiologic Health Branch, MS 7610 P.O. Box 997414 Sacramento, CA 95899-7414</p>	<p><b>If sending by express mail, send it to</b> Registration and Certification Support Unit California Department of Public Health Radiologic Health Branch 1500 Capitol Avenue, 5<sup>th</sup> Floor, Building 172 Sacramento, CA 95814-5006</p>
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For more information, please visit our website at <http://cdph.ca.gov/rhb> or call (916) 327-5106.

**Categories of Radiation Machines**

<b>HUMAN DENTAL USE</b>		
<b>Category</b>	<b>Description</b>	<b>Type Code</b>
Radiography	Radiographic radiation machines for oral examination.	XDN
CBVT Scanner	Cone Beam Volumetric Tomography (CBVT) radiation machines for oral examination.	XDT
Handheld Radiographic	Handheld radiographic radiation machines for oral examination.	XDH
<b>HUMAN MEDICAL USE</b>		
<b>Category</b>	<b>Description</b>	<b>Type Code</b>
Radiography	Radiographic diagnostic radiation machines that are digital or film-based, permanently-installed or moved routinely from one room to another. Also includes van or trailer-mounted radiation machines.	XRA
Fluoroscopy	Fluoroscopic diagnostic radiation machines capable of producing real-time moving images, permanently-installed or moved routinely from one room to another. Also includes van or trailer-mounted fluoroscopy machines.	XHF
Radiography – Fluoroscopy Combination	Diagnostic radiation machines capable of producing both radiographic and real-time moving images. Typically, this machine contains two radiation tubes.	XRF
Bone Densitometry	Radiation machines used to examine bone density.	XBD
Chest Photofluorography	Radiation machines used to screen for respiratory disease.	XCH
CT Scanner	Computed Tomography radiation machines.	XCT
CBVT Scanner	Cone Beam Volumetric Tomography radiation machines.	XCB
Mammography – Film/Screen	Radiation machines used to produce a film-based image of the breast.	XMF
Mammography – Digital	Radiation machines used to produce a digital image of the breast.	XMD
Mammography – Interventional Only	Radiation machines used to aid in the removal of breast tissue.	XMJ
Specimen Only	Radiation machines used to analyze human tissue samples.	XMB
Therapy – Linear Accelerator (>500 kVp)	High energy therapeutic radiation machines that use external beam radiation for treatment.	XTL
Therapy – Simulator or Image Guidance	Radiation machines that aid in precisely positioning external beam radiation during treatment. Generally used in conjunction with linear accelerators.	XSM
Therapy – Orthovoltage (200 – 500 kVp)	Radiation machines with energies between 200 to 500 kVp used for therapy.	XTM
Therapy - Superficial Voltage (<200 kVp)	Radiation machines with energies of less than 200 kVp used for dermatology radiation treatment.	XTS
Therapy – Electronic Brachytherapy	Radiation machines where a catheter is used to deliver radiation to a target area.	XTI
Medical Research	Radiation machines used in research for the advancement in the healing arts.	XMR

<b>VETERINARY USE</b>		
<b>Category</b>	<b>Description</b>	<b>Type Code</b>
Radiography	Radiographic radiation machines used for routine diagnostic on animals.	XVR
Fluoroscopy	Fluoroscopic radiation machines used for routine diagnostic fluoroscopy on animals.	XVF
Dental	Radiographic radiation machines used for oral examination on animals.	XVD
Oncology – Therapy	High energy therapeutic radiation machines that use external beam radiation for treatment on animals.	XVT
CT Scanner	Computed Tomography radiation machines used on animals.	XVC
<b>INDUSTRIAL USE</b>		
<b>Category</b>	<b>Description</b>	<b>Type Code</b>
Accelerator ≥ 10 MV	Accelerators with potential energies equal or greater than 10 MV. These devices accelerate atomic particles to high energies.	XAL
Accelerator < 10 MV	Accelerators with potential energies less than 10 MV. Includes ion implanters and electron beam welders.	XAS
Diffraction/Fluorescence	Analytical devices either handheld or in a cabinet. Includes coating thickness analysis. The output from these machines is usually information regarding the chemical composition of the sample.	XDF
Electron Microscopes (all types)	All types of electron microscopes: transmission - TEM, scanning – SEM, reflection – REM, scanning transmission – STEM, low voltage – LVEM, and possibly others.	XEM
Controllers/Gauges/Schools	Industrial gauging, controlling and laboratory imaging. Includes bottle fill checkers, coroner's office radiation machines, and radiologic technology school machines used by technology students only to image phantoms.	XNF
Portable Field Radiography	Radiation machines used in industrial radiography that excludes cabinet X-ray systems and shielded room radiography machines.	XRP
Shielded Room Radiography	Machines are set-up in a room large enough to admit a person. The walls of the room are adequately shielded to protect the public.	XRS
Cabinet Radiation Systems Radiography	Cabinet X-ray systems used in the examination of the physical structure of objects. Also, radiation machines used in the detection of contraband such as package and baggage scanners, or backscatter radiation security scanners.	XRC
Research and Development (Non-Medical)*	Radiation machines used for non-healing arts research such as non-commercially available machines or prototype research. <b>*Use this code only if none of the other Industrial Use codes apply.</b>	XRD