

**Minnesota Department of Health
Radiation Control, X-ray Unit**

Processor Quality Control/Crabtree Test

Room # _____

Adult Molar Bitewing Technique mA _____ Time _____ kVp _____

Date	Temperature	Crabtree #	Staff Initial		Date	Temperature	Crabtree #	Staff Initial

Crabtree results must be 3, 4 or 5. If not in this range, complete corrective action and repeat crabtree test until results are in range.



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