Australian National University

Ionising Radiation Apparatus Application Form

Description of Equipment/Apparatus/Use/Purpose

_____

_____

Equipment Specifications

- Make: _____
- Type: _____
- Model: _____
- Serial Number: _____
- (Tube) Operating voltage: _____ kVp
- (Tube) Operating current: _____ mA
- Apparatus is *Fixed* *Mobile* *Portable*
- Other: _____

Can be added later

Location

- Building name/ number: _____
- Room number: _____ (storage), _____ (experiment)
- Room characteristics:
  - Shielding ***present*** or *to be* ***installed***:

    _____
  - Shielding potential: *Good* → - - - - - - - - - → - - - - - - - - - → *Poor*

Duty Cycle

The equipment will produce accessible radiation for ____ % of time when used.

Operator Exposure

Not Possible Unlikely Possible Likely
Potentially Significant

Discuss: _____

_____

Operating Instructions/Guidelines/Warning Notices

Please attach a copy of operating instructions, guidelines for use, and warning notices to be provided to users.

Training Requirements

- Local area induction program (Tier 2 and Tier 3).
- Onsite supervisor/training/instruction.
- ANU radiation safety course.
- Non- radioactive experimental trial run (if this has already been conducted- please provide details/outcomes).
- Other: _____

Personal Protective Equipment to be provided/used

- Safety glasses/Face shield.
- Gloves (type: _____)
- Lab coat.
- Other: _____

Type of Radiation Monitoring to be conducted

- Personal (OSL Monitor).
- Finger badge.
- Contamination detection.
- Dose rate monitoring.

Other Control Measures