



**GROUPE PERMANENT D'EXPERTS EN  
RADIOPROTECTION : GPRAD**

DIRECTION DES RAYONNEMENTS  
IONISANTS ET DE LA SANTÉ

**CODEP-DIS-2010-053036**

Affaire suivie par : Le secrétariat technique  
des GPE radioprotection

Tél : 01 40 19 88 65

Paris, le 27 septembre 2010

**Le Directeur Général de l'Autorité  
de Sûreté Nucléaire**

à

**Monsieur le Président du GPRAD**

**Objet :** Projet européen de passeport de dose proposé par le groupe HERCA (Heads of the European Control Authorities)

**P.J. :** HERCA WG1 Outside Workers & Dose Passbook - Draft European Radiation Passbook for Outside Workers

Monsieur le Président,

A l'initiative de l'Autorité de Sûreté Nucléaire (ASN), l'Association des responsables des Autorités européennes de contrôle de la radioprotection (Heads of European Radiological Competent Authorities, HERCA) a été créée en 2007 dans l'objectif de parvenir à une meilleure harmonisation de la radioprotection en Europe. Dans ce cadre, plusieurs groupes de travail ont été mis en place sur des thématiques jugées prioritaires.

Un des groupes de travail s'intéresse plus particulièrement à la radioprotection des travailleurs itinérants. Il a rédigé un projet de document contenant des propositions visant à établir un passeport de dose européen qui permettrait de répondre aux exigences de la directive 90/641 Euratom. Ce projet, que vous trouverez en pièce jointe, a été adopté par HERCA lors de la réunion qui s'est tenue à Oslo les 30 juin et 1er juillet 2010.

Lors de cette réunion, les actions suivantes ont également été décidées :

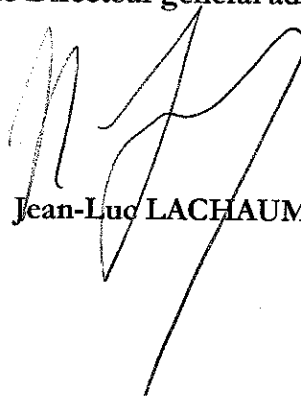
- Le projet sera envoyé par HERCA à la Commission européenne, en vue d'une insertion dans le projet actuel de révision des normes de base de radioprotection (BSS EURATOM) ;
- Les autorités compétentes de radioprotection lanceront, au niveau national, une consultation des parties prenantes sur le projet de document, visant en particulier les services de dosimétrie, les opérateurs et les syndicats.

Dans le cadre de cette consultation, je souhaiterais recueillir l'avis des experts du GPRAD sur ce projet de document. Il conviendra d'associer également des experts du GPMED à cette démarche.

Je vous demande de bien vouloir me remettre cet avis avant le 31 décembre 2010.

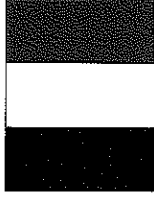
Je vous prie d'agréer, Monsieur le Président, l'expression de ma considération distinguée.

**Pour le Directeur général de l'ASN  
Par délégation,  
Le Directeur général adjoint,**

A handwritten signature in black ink, consisting of several fluid, overlapping strokes that form a stylized representation of the name 'Jean-Luc LACHAUME'.

**Jean-Luc LACHAUME**

**FRONT COVER (Identification of Radiation Worker)**



*Window to allow to see picture on next page*

Radiation worker  
[SURNAME] [2<sup>nd</sup> SURNAME]  
[First name] [Middle names]  
[Unique identification number of the worker]

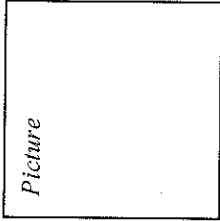
*Ref. of domestic Legislation under which Radiation Passbook is issued*

RADIATION PASSBOOK  
BELGIUM  
[Passbook number]

If found, please return to last named employer (see section ..)

## SECTION 1 – Details of the radiation worker

(Normally to be completed by the company or institution designated by the competent authority to issue the radiation passbook)

Surname(s)	[SURNAME]	[2 <sup>nd</sup> SURNAME]
First name	[First name]	Middle name(s) [Middle names]
Sex	[M/F]	
Date of birth	[date of birth]	
Nationality	[Nationality]	
Signature	[Signature]	
Unique identification number		
(unique number in the worker's employer's country, for example :		
National number	[National number]	
Social security number	[Social security number]	
Fiscal number	[Fiscal number]	
Relevant dose limits:		
Whole-body dose (Effective dose)	<input type="checkbox"/>	
Eyes (Equivalent dose)	<input type="checkbox"/>	
Skin/Extremities (Equivalent dose)	<input type="checkbox"/>	
Other	<input type="checkbox"/>	

## SECTION 2 – Issuing details of the radiation passbook

(to be completed by the entity issuing the radiation passbook)

Radiation passbook number	[Radiation Passbook number]	
Issuing date	[issuing date]	Valid until [expiry date]
Issuing body	[body issuing passbook]	
Address	[address]	
Tel number	[tel number]	Mark of endorsement
Fax number	[fax number]	
E-mail	[e-mail address]	

## **SECTION 3 – General information**

*(any information needed by foreign operator to interpret the conditions applying to this worker, depending on the nationality of his employer)*

### **3.1. Contents**

(to be completed by the Member States)

### **3.2. Guidelines to fill in the radiation passbook**

(to be completed by the Member States)

### **3.3. General information**

(to be completed by the Member States – including :

- purpose of the passbook
- conditions of use
- scope of application
- temporality
- conditions of issue/renewal
- loss of the radiation passbook/damage to the radiation passbook
- pursuit in case of fraudulent use/entries/amendments
- summary of the legal provisions relative to the operational protection of outside workers, including the definition of the following concepts :
  - operator
  - outside undertaking
  - outside worker
  - official dosimetry
  - operational dosimetry
- national dose limits (explanation)

**SECTION 4 - Current outside undertaking**

*(To be completed by the employer of the outside worker)*

Employer (Name, Identification number, Outside undertaking number, Address, Tel, Fax, e- mail address)	Employment (Start date/End date)	Occupational category (ex: NACE code)	Classification (A or B)	Stamp and signature or identification number of the responsible party



**SECTION 6 – Official dose record up to the radiation passbook issue date**

*(To be completed by the entity issuing the radiation passbook).*

**6.1. Occupational life time dose (mSv)**

External dose			
Uniform		Non-uniform : equivalent dose to specific body location (extremities/other area's)	
photon/electron H <sub>P</sub> (10) {1}	Neutron dose H <sub>P</sub> (10) {2}	Skin dose H <sub>P</sub> (0.07)	Lens dose H <sub>P</sub> (3)

**6.2. Official doses (mSv) for the last 5 calendar years** *(not including the current year – mandatory for persons having a 5 year dose limit.)*

Year	External dose			
	Uniform		Non-uniform : equivalent dose to specific body location (extremities/other area's)	
	photon/electron H <sub>P</sub> (10) {1}	Neutron dose H <sub>P</sub> (10) {2}	Skin dose H <sub>P</sub> (0.07)	Lens dose H <sub>P</sub> (3)

Signature/stamp of the issuing entity and date

Committed effective dose from internally deposited radionuclides {3}	Internal dose			Effective dose [sum of {1}, {2} and {3}]	Authorized signature/ stamp of the issuing entity and date
	Committed equivalent dose to specific individual organs or tissues				
	...	...	...		

Committed effective dose from internally deposited radionuclides {3}	Internal dose			Effective dose [sum of {1}, {2} and {3}]	Authorized signature/ stamp of the issuing entity and date
	Committed equivalent dose to specific individual organs or tissues				
	...	...	...		



**6.3. Details concerning the entity responsible for the record of the official dosimetry** *(To be completed by the entity(ies) responsible for the record of the official dosimetry : approved dosimetry service, National Dose Register or other. Only if different from the entity issuing the passbook.)*

Responsible entity	[name of the responsible entity]
Address	[Address of the responsible entity]
Contact person	[name and job title of contact person]
Tel number	[tel number]
Fax number	[fax number]
E-mail	[e-mail address]

Responsible entity	[name of the responsible entity]
Address	[Address of the responsible entity]
Contact person	[name and job title of contact person]
Tel number	[tel number]
Fax number	[fax number]
E-mail	[e-mail address]

Responsible entity	[name of the responsible entity]
Address	[Address of the responsible entity]
Contact person	[name and job title of contact person]
Tel number	[tel number]
Fax number	[fax number]
E-mail	[e-mail address]







