



Radiation Health Committee

an advisory body to the CEO of ARPANSA, established under the ARPANS Act 1998
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EXTRACT OF DISCUSSION AT RADIATION HEALTH COMMITTEE MEETING 19-20 March 2003

Agenda Item 6.2 - Intervention Levels (RHS #32)

The Committee was informed that 26 submissions had been received on the Draft Recommendations for Intervention in Emergency Situations involving Radiation Exposure. A summary of the major issues arising from comment was discussed, as follows:

- *Intervention level for iodine prophylaxis in children.* A number of submissions felt that the reasoning given for using 30mGy instead of adopting the WHO level of 10mGy was inadequate. The Committee agreed that there was a need for further explanation. ARPANSA will produce a Technical Report on the known risks associated with exposure to radioiodine and relevant protective actions in the context of the other risks during a radiological emergency situation, which will be a public document.
- *Distribution of iodine tablets.* A number of submissions proposed that iodine tablets must be pre-distributed to ensure that they were available within a short time. Practical issues of other distribution systems were also raised in submissions. The Committee agreed that the paragraph referring to pre-distribution should be changed to discuss advantages and disadvantages of pre-distribution, should recognise that pre-distribution may be an appropriate response for some situations, and should acknowledge that the decision on whether to pre-distribute iodine was an operational decision for emergency management organisations.
- *General issues and Relevance to Australia.* Some submissions considered that the draft appeared to place too much emphasis on international documents based on power reactors rather than emergency situations relevant to Australia. The Committee agreed that the draft should focus more on issues relevant to Australia, and that the working group should re-examine the balance of the draft in this context. The Committee also asked that the working group distinguish the planning aspects of the document more clearly from the implementation/operational aspects.
- *Immediate Sheltering.* Some submissions argued that sheltering should take place immediately an incident was known to have occurred rather than await information on whether sheltering is advised because intervention levels would be exceeded. The Committee agreed that short-term sheltering to await advice on the extent of the incident was appropriate, however sheltering for longer periods of up to one or two days should be decided on the basis of the intervention levels and other risks.
- *Terminology.* Some submissions raised issues of inconsistency of terminology used in the draft with that used in Australian emergency management. The Committee agreed that terms should be consistent with Australian emergency management terminology, except in the case of terms used in planning arrangements for nuclear installations or other radiation-specific situations, where it should be consistent with IAEA terminology.
- *Protection of emergency workers and "volunteering".* Several submissions had commented that reliance on "volunteers" did not provide adequate protection of the public. Emergency organisations also commented on the levels of exposure appropriate for emergency workers. It was agreed that the context of the word "volunteer" needed further clarification and elaboration in the document. The Committee also asked the working group to examine the various suggestions about the exposure of emergency workers put forward in submissions.
- *Comments on Zones.* Submissions commented that the extent and boundaries of some of the emergency planning zones were not adequately defined, and that this had implications for emergency response. The Committee asked the working group to re-examine this issue, in particular the use of "trigger" levels in determining whether a radiological incident had occurred. Regulatory members were asked to inform the secretariat of "trigger" levels currently in use in their jurisdiction.

A revised draft of the Intervention Recommendations will be released for a further round of public comment.