



## Personal Radiation Monitoring Service - New wearer registration

Centre/customer no:		Centre name:	
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Wearer 1			
Surname		Given name	
Middle name – initial only		Previous name(s)	
Date of birth		Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female
Have you previously been monitored by ARPANSA?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please quote your wearer registration number (if known)	
What type of monitor do you require?	<input type="checkbox"/> OSL <input type="checkbox"/> Neutron <input type="checkbox"/> Extremity		
Occupation code (see over)			
If your centre has multiple control groups please specify which group to add your wearer to.			
When would you like to receive your first monitor?	<input type="checkbox"/> ASAP <input type="checkbox"/> Included in the next wearing cycle		
Shipping (note: you will need to pay for the return)	<input type="checkbox"/> Standard delivery (free) <input type="checkbox"/> Express Post (\$10 extra)		
Do you require a clip?	<input type="checkbox"/> Yes <input type="checkbox"/> No		

Wearer 2			
Surname		Given name	
Middle name – initial only		Previous name(s)	
Date of birth		Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female
Have you previously been monitored by ARPANSA?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please quote your wearer registration number (if known)	
What type of monitor do you require?	<input type="checkbox"/> OSL <input type="checkbox"/> Neutron <input type="checkbox"/> Extremity		
Occupation code (see over)			
If your centre has multiple control groups please specify which group to add your wearer to.			
When would you like to receive your first monitor?	<input type="checkbox"/> ASAP <input type="checkbox"/> Included in the next wearing cycle		
Shipping (note: you will need to pay for the return)	<input type="checkbox"/> Standard delivery (free) <input type="checkbox"/> Express Post (\$10 extra)		
Do you require a clip?	<input type="checkbox"/> Yes <input type="checkbox"/> No		

Wearer 3			
Surname		Given name	
Middle name – initial only		Previous name(s)	
Date of birth		Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female
Have you previously been monitored by ARPANSA?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please quote your wearer registration number (if known)	
What type of monitor do you require?		<input type="checkbox"/> OSL <input type="checkbox"/> Neutron <input type="checkbox"/> Extremity	
Occupation code (see over)			
If your centre has multiple control groups please specify which group to add your wearer to.			
When would you like to receive your first monitor?		<input type="checkbox"/> ASAP <input type="checkbox"/> Included in the next wearing cycle	
Shipping (note: you will need to pay for the return)		<input type="checkbox"/> Standard delivery (free) <input type="checkbox"/> Express Post (\$10 extra)	
Do you require a clip?		<input type="checkbox"/> Yes <input type="checkbox"/> No	

Wearer 4			
Surname		Given name	
Middle name – initial only		Previous name(s)	
Date of birth		Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female
Have you previously been monitored by ARPANSA?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please quote your wearer registration number (if known)	
What type of monitor do you require?		<input type="checkbox"/> OSL <input type="checkbox"/> Neutron <input type="checkbox"/> Extremity	
Occupation code (see over)			
If your centre has multiple control groups please specify which group to add your wearer to.			
When would you like to receive your first monitor?		<input type="checkbox"/> ASAP <input type="checkbox"/> Included in the next wearing cycle	
Shipping (note: you will need to pay for the return)		<input type="checkbox"/> Standard delivery (free) <input type="checkbox"/> Express Post (\$10 extra)	
Do you require a clip?		<input type="checkbox"/> Yes <input type="checkbox"/> No	

The collection of personal information will comply with our [Privacy Policy | ARPANSA](#)

Occupation codes Classification of wearer occupations	
<b>Diagnostic radiology</b>	<b>Veterinary</b>
<b>01</b> Radiation safety officer, hospital physicist	<b>51</b> Veterinary
<b>02</b> Radiologist	<b>Industry, research and education</b>
<b>03</b> Medical practitioner (other than 07 below)	<b>61</b> Those using X-ray diffraction units and/or electron microscopes, etc.
<b>04</b> Radiographer and others X-raying patients (including trainees)	<b>62</b> Those working outside totally enclosed installations
<b>05</b> Assistant to 01, 02, 03 or 04	<b>63</b> Those using non or partially enclosed radiation sources (other than 64)
<b>06</b> Diagnostic radiology receptionist, office worker, etc.	<b>64</b> Those using radioactive isotopes in tracer techniques
<b>07</b> Medical specialist (e.g. cardiologist, urologist, surgeon)	<b>66</b> Teacher/demonstrator
<b>Radiotherapy</b>	<b>67</b> Student (other than post-graduate research included in above classifications)
<b>11</b> Radiotherapist, dermatologist, gynaecologist	<b>68</b> Radiation safety officer (industry, research and education)
<b>12</b> Radiation safety officer, hospital physicist, therapy radiographer (including trainees)	<b>Uranium mining</b>
<b>13</b> Those nursing patients with radioactive sources in situ	<b>71</b> Mine worker
<b>14</b> Assistant to 11, 12 or 13	<b>72</b> Mill worker
<b>15</b> Radiotherapy receptionist, office worker, etc.	<b>73</b> Miscellaneous
<b>Nuclear medicine or pathology</b>	<b>74</b> Radiation safety officer (uranium mining)
<b>21</b> Radiation safety officer, hospital or medical physicist	<b>Mineral sand mining</b>
<b>22</b> Nuclear medicine specialist or pathologist	<b>81</b> Miner
<b>23</b> Nuclear medicine technologist or medical laboratory technologist (including trainees)	<b>82</b> Wet plant operator
<b>24</b> Assistant to 21, 22 or 23	<b>83</b> Dry plant operator
<b>25</b> Nuclear medicine or pathology receptionist, office worker, etc.	<b>84</b> Miscellaneous
<b>Dentistry</b>	<b>85</b> Radiation safety officer (mineral sand mining)
<b>31</b> Dental	<b>90</b> Installation and maintenance personnel
<b>Chiropractic</b>	<b>91</b> Inspector
<b>41</b> Chiropractic	