



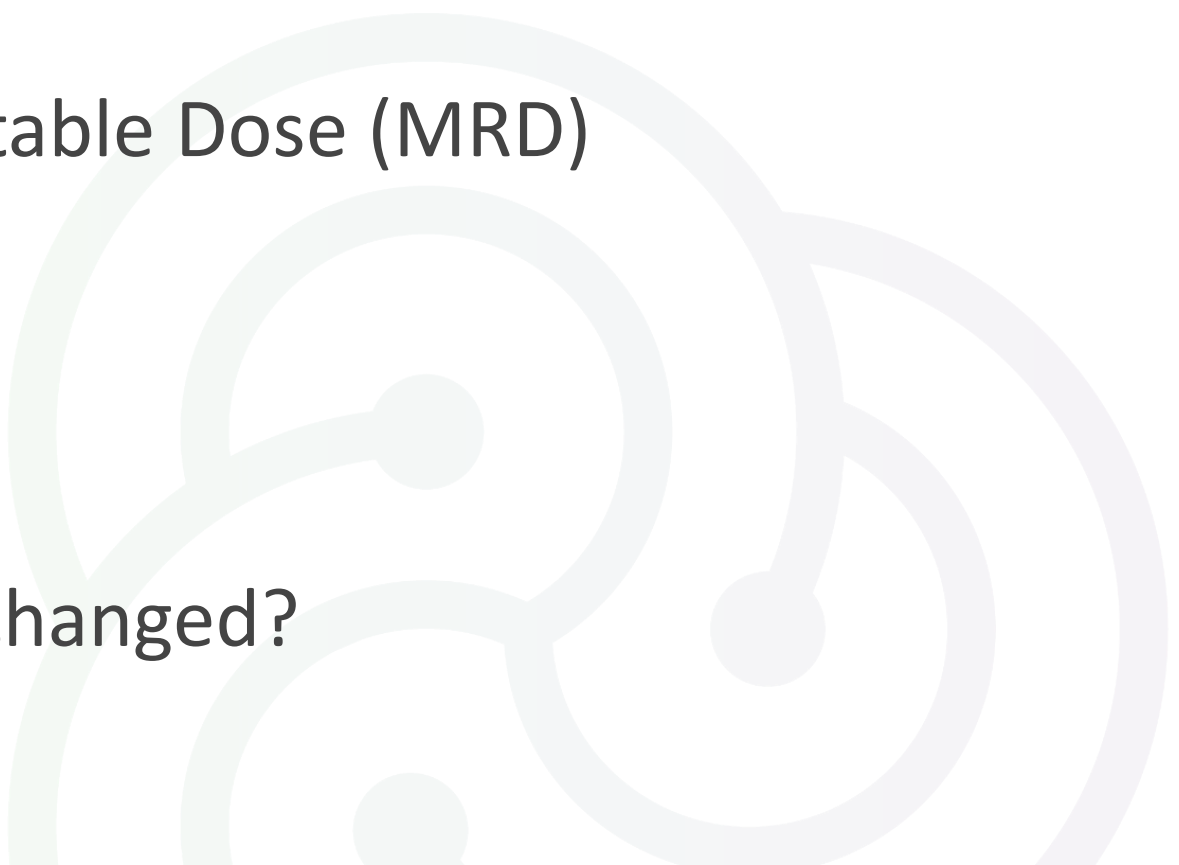
**Australian Government**  
**Australian Radiation Protection  
and Nuclear Safety Agency**



# Minimal Report Dose

**What is an acceptable level of uncertainty in Personal Dosimetry**

# ARPANSA's Minimum Reportable Dose

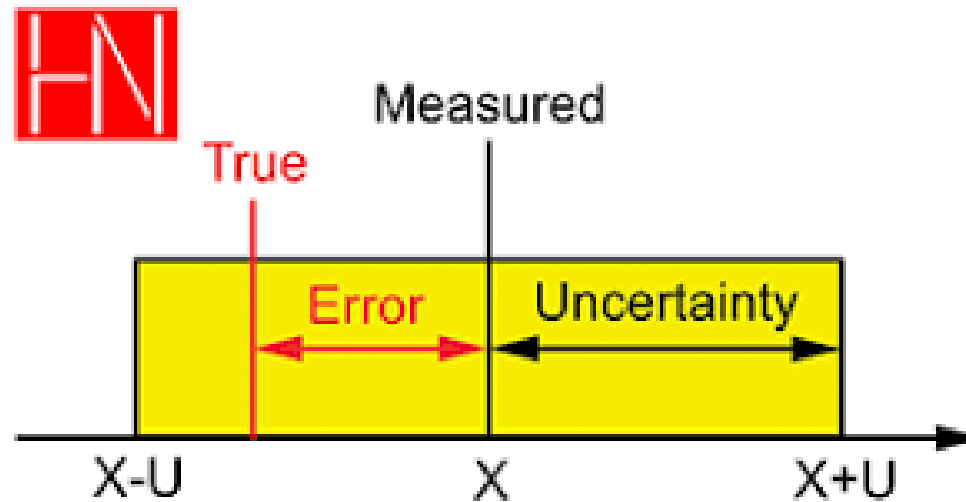
- 2016 swapped technology from TLD to OSL
  - 2018 updated Minimum Reportable Dose (MRD)
    - Increased from 10uSv to 100uSv
    - Currently under review
    - Looking for feedback
  - How is it that the MRD can be changed?
- 

# Detection Limits and MRDs

- Detection Limit
  - Smallest signal of interest which can be confidently detected with the applied measurement procedure
  - This determines whether or not the measurement procedure satisfies the requirements and is therefore suitable for the intended measurement purpose
- Limit of Quantification
  - The smallest signal of interest which has an **acceptable uncertainty**
  - Used by ARPANSA as the Minimum Reportable Dose (MRD)

# Measurement uncertainty

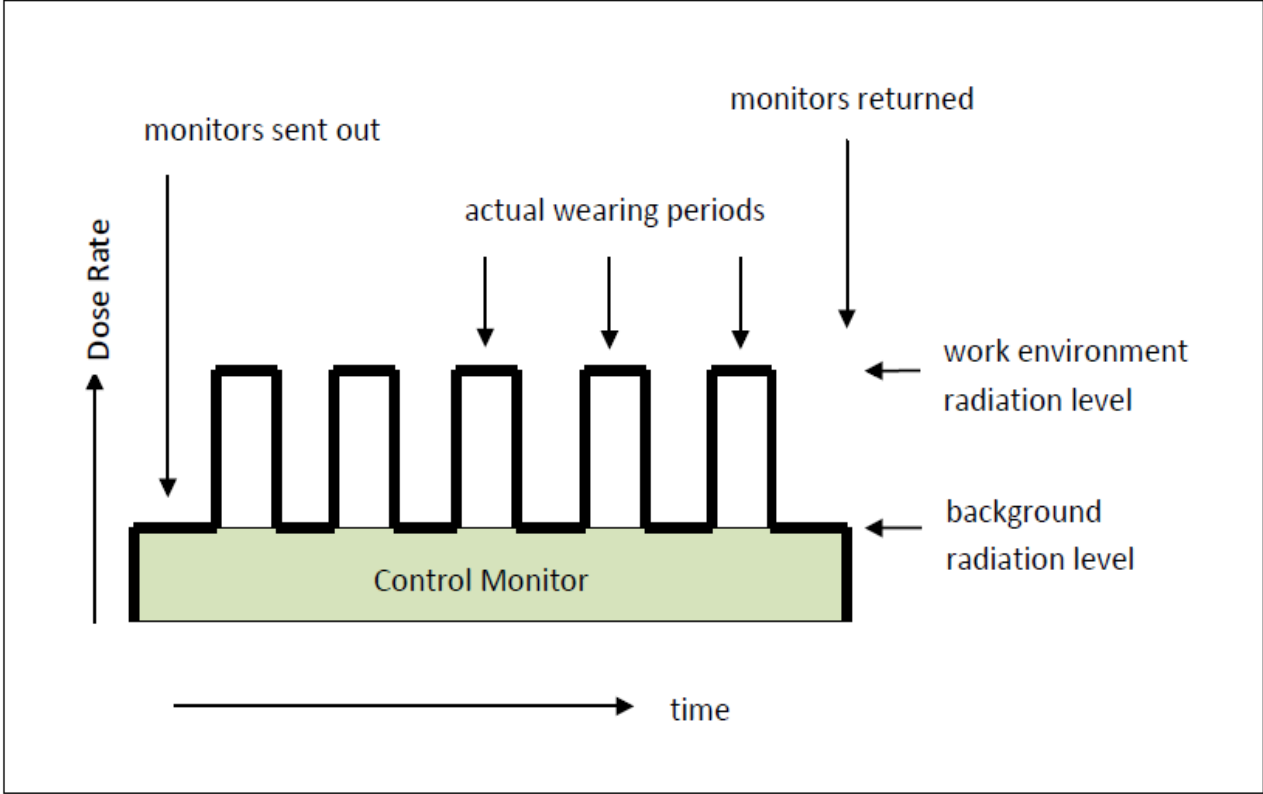
*“range of possible values within which the true value of the measurement lies”*



# Contributions to the signal dose

- Occupational dose: the exposure of the worker due to their work (what we actually want to know)
- Background radiation at the place of work
- Exposure of the monitor in transit

# Therefore, we need a control monitor:



# Measuring Occupational Dose

$$D_O = D_W - D_C$$

$D_O$  is the worker's occupational dose

$D_W$  is the gross dose on the worker's monitor

$D_C$  is the gross dose on the control monitor

# Uncertainty in Occupational Dose

- Control Monitor:  $260 \mu\text{Sv} \pm 3\% = 260 \pm 8 \mu\text{Sv}$
- Worker Monitor:  $360 \mu\text{Sv} \pm 3\% = 360 \pm 11 \mu\text{Sv}$
- Occupational Dose:  $360 - 260 = 100 \mu\text{Sv}$
- Uncertainty:  $\sqrt{8^2 + 11^2} = 13.6 \mu\text{Sv} (k=1)$
- Reported Dose:  $100 \pm 27 \mu\text{Sv} (k=2)$

**27% Uncertainty**

**95% confidence interval between 73 and 127  $\mu\text{Sv}$**



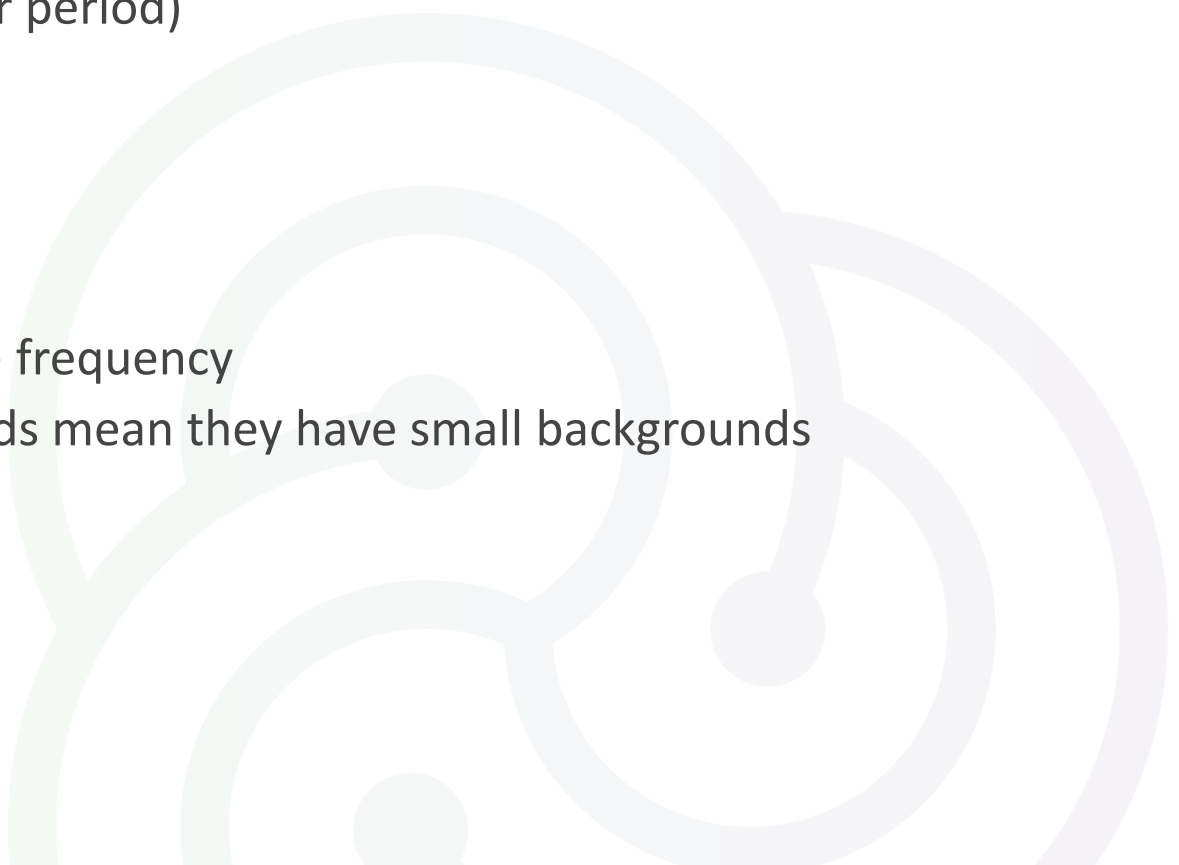
# Uncertainty in Occupational Dose

- Control Monitor:  $260 \mu\text{Sv} \pm 3\% = 260 \pm 8 \mu\text{Sv}$
- Worker Monitor:  $270 \mu\text{Sv} \pm 3\% = 270 \pm 8 \mu\text{Sv}$
- Occupational Dose:  $270 - 260 = 10 \mu\text{Sv}$
- Uncertainty:  $\sqrt{8^2 + 8^2} = 11 \mu\text{Sv} (k=1)$
- Reported Dose:  $10 \pm 22 \mu\text{Sv} (k=2)$

**220% uncertainty**

**95% confidence interval between -12 and 32  $\mu\text{Sv}$**

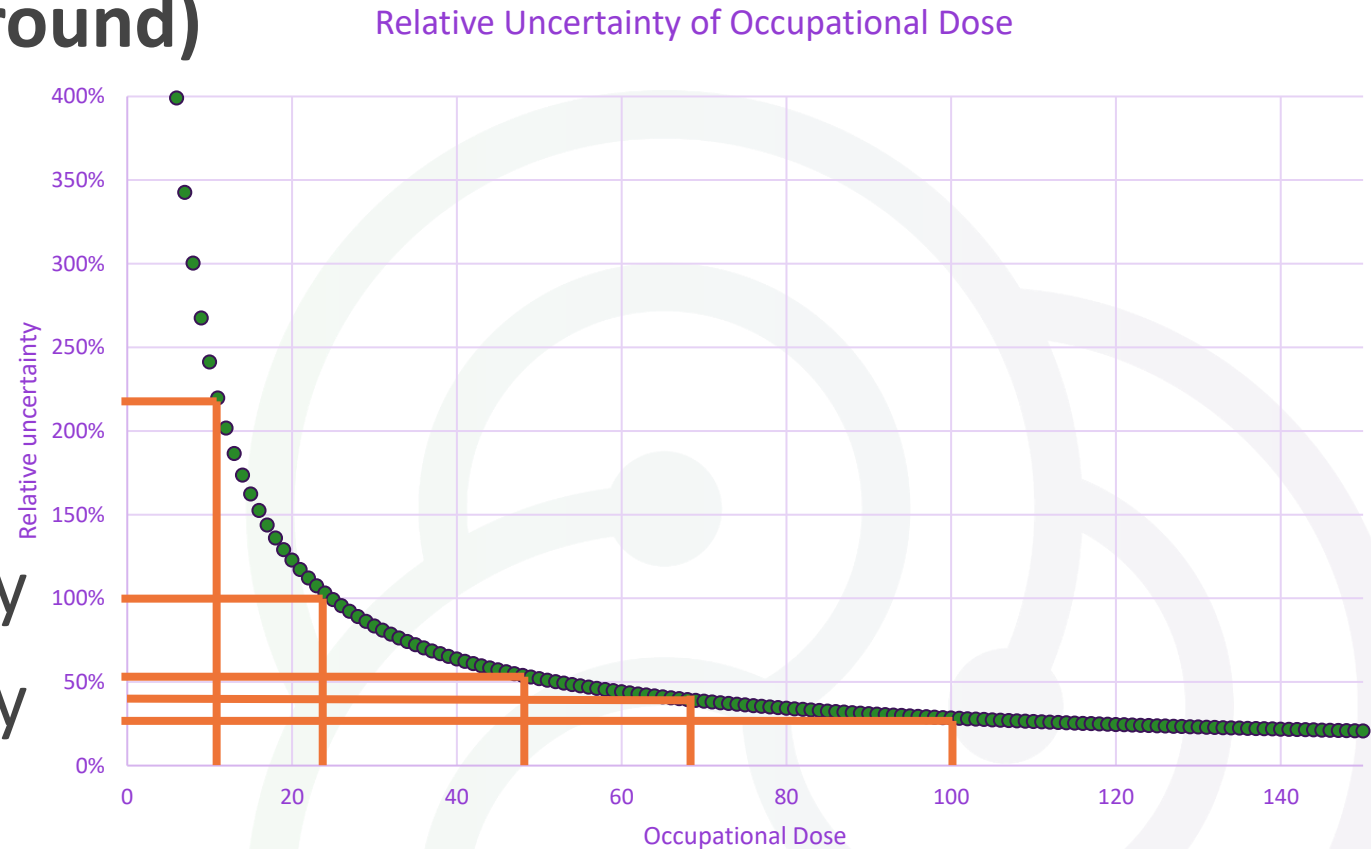
# Reduce the background dose

- PRMS has analysed 2 years of control values (41,000 control)
    - Dose 267uSv
    - Measurement period 16 weeks (12 week wear period)
  - Shield monitors when not in use
  - Decrease the wear period
    - MRD for single measurement decreases but
    - Annual dose @MRD increases due to increase frequency
    - Validation papers that use shorter wear periods mean they have small backgrounds
  - Use multiple controls
    - Historic data
    - Multiple issued control
- 

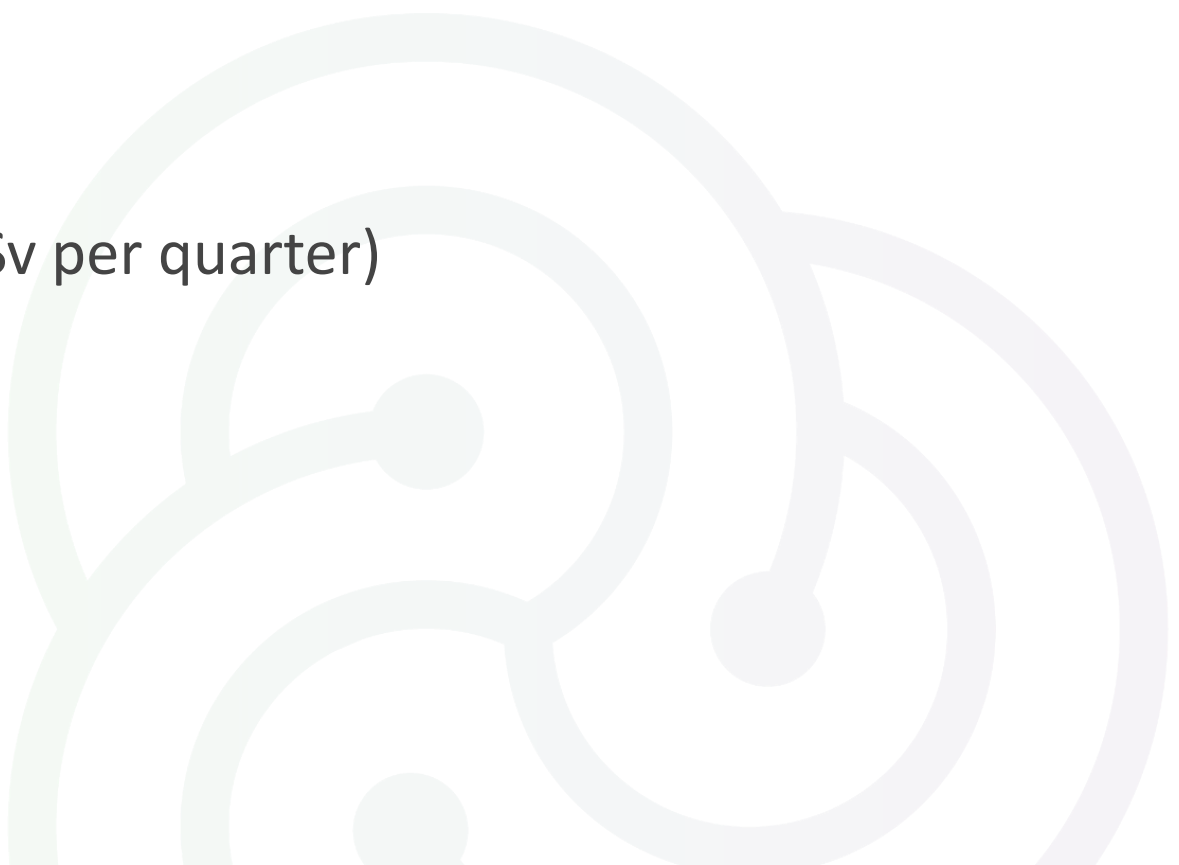
# Increase the uncertainty

The smallest signal of interest which has an **acceptable uncertainty (260uSv background)**

- 100uSv = 27% uncertainty
- 70uSv = 40% uncertainty
- 50uSv = 55% uncertainty
- 25uSv = 100% uncertainty
- 10uSv = 220% uncertainty



# Food for thought

- Is a result over or approaching 100% uncertainty a useful measurement?
    - Not all clients fully understand measurement uncertainty
    - Increased false reading
  - What is the driver for low MRD?
    - History?
  - Public limit 1mSv (action level of 0.25mSv per quarter)
  - Variations in background
  - False sense of precision? Human factors
- 

# Thank you

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