



REPUBLIC OF MAURITIUS

RADIATION SAFETY AND NUCLEAR SECURITY AUTHORITY

RADIOLOGICAL INCIDENT/ACCIDENT NOTIFICATION

The duly-filled form should be submitted to the Radiation Safety and Nuclear Security Authority (RSNSA) as soon as practicable, but not later than 24 hours, following the radiological incident. (Fax: 434-2868, Email: rsnsa@govmu.org)

1. DETAILS OF REPORTING OFFICER

Name of Reporting Officer					
Designation					
Organisation/Department					
Tel.		Mobile		Email	

2. DETAILS OF INCIDENT/ACCIDENT

Date		Time	
Location			

Nature of incident/accident (Please tick as appropriate)				
Theft <input type="checkbox"/>	Fire <input type="checkbox"/>	Lost <input type="checkbox"/>	Radioactive Spill <input type="checkbox"/>	Radioactive contamination <input type="checkbox"/>
Other (Please specify)				

Is there any person(s) over-exposed to radiation following the incident/accident?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, please specify the number of person(s) over-exposed to radiation		

3. DESCRIPTION OF THE RADIATION SOURCE*

(Please provide details of the radiation source involved in the incident/accident)

Radiation Source Type	Radioactive Source <input type="checkbox"/>	Radiation Generator <input type="checkbox"/>
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Radioactive Source

Radionuclide (e.g. Iodine-125, Phosphorus-33)	
Maximum Activity in Becquerel (e.g. kBq, MBq, GBq)	
Sealed or Unsealed (If unsealed, please specify physical form, i.e., solid, liquid or gas)	
Type of Associated Equipment	

Radiation Generator

Type of Machine (e.g. Dental X-Ray, Diagnostic X-Ray, CT Scanner)			
Utilisation Mode (Fixed, Mobile or Portable)			
Max. kV		Max. mA	

** Use additional sheet for more than one radioactive source or radiation generator involved in the incident/accident.*

4. ACTIONS TAKEN

Please provide details on action taken to mitigate the situation.

5. ASSISTANCE FROM RSNSA

Is assistance required from the RSNSA?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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If yes, please specify the kind of assistance that is required.

For emergency assistance please call on 434-3000 or 5254-0477.

Date:

Signature of Reporting Officer:.....