Iowa Radon Measurement Specialist and Laboratory Monthly Test Data Submission

Test data reporting is required by Section 641—43.4 & 43.6 of the Iowa Administrative Code and must be submitted every 30-days and within 30-days after any radon/radon progeny testing. Records must be maintained for a minimum of 5 years. NOTE: you need to report even if no testing was done during the past 30 days.

For questions contact: Randy Lane, Radon Program, Bureau of Radiological Health, at (515) 281-4928 or by email, randy.lane@idph.iowa.gov

- The reporting spreadsheet and the instruction can be downloaded from the "Resources for applicants and certified individuals" section at the bottom of : http://www.idph.iowa.gov/radon/get-certified
- The AMANDA licensing portal instructions can be found here: http://www.idph.iowa.gov/regulatory-programs/radon

Instructions for completing the reporting spreadsheet:

A. Monthly testing activity is to be logged and a copy of the data reporting spreadsheet uploaded through your AMANDA account. See instructions in Attachment B. A spreadsheet ids not required to be uploaded if no testing was done during the reporting month.

B. This is a locked spreadsheet; data entry only is permitted. **DO NOT ADD ANY ADDITONAL LINES OR EXTRA INFORMATION.** Any forms modified from what is provided will be returned.

C. Follow the instructions in Attachment A for completing each of the data columns in the spreadsheet.

D. After completing the spreadsheet each month save and name the file in the following manner, which includes your IA certification number_report month-report year:

Example: RNTST or RNLAB#####_MM-YYYY.xls ⇨ RNTST100001_10-2019.xls

E. **Do not include data for blanks or spikes.**

F. **Specialists –** Even if you send your tests to a laboratory for analysis, you must still submit the test results to the Iowa Department of Public Health. Test results sent from the laboratory will be matched with your test results and the identical data will be eliminated.
Laboratories – Even if you know the specialist is forwarding their test results to the department, you must still submit all the test results as well. This is one way we have to determine how much independent testing is being performed by homeowners.

Attachment A: Spreadsheet Data Entry Instructions Table

Attachment B: AMANDA Licensing Portal Instructions for Logging Monthly Measurement Activity

Attachment A: The below tables explains the data entry requirements for each column of the data submission spreadsheet:

Column	Column Name	Data Description	Number of Characters Allowed	Column Format	Required	Data Entry Requirement
A	Name	Name of Facility or Owner	40	Text	YES	Enter facility name or name of individual, for individual enter as Last name First name, with NO PUNCTUATION. If the test is performed as part of a real estate transaction, the name of the homeowner should be submitted. **DO NOT** enter name of company or individual contracting service if they are not the owner.
B	Address	Physical address of building	40	Text	YES	Enter physical street address of building or residence being tested, **NO PO BOXs**.
C	Location	Location where test device was placed	40	Text		Building #, Room #, etc. if applicable.
D	City	Mailing address City	25	Text	YES	Enter mailing address City where building is located.
E	St	State	2	Text	YES	Enter IA - **Only data for tests done in Iowa** may be submitted.
F	Zip	Zip Code of building	9	Text	YES	Enter 5 digit zip of building (DO NOT USE your ZIP code)
G	Lab #/Device Model #	Testing Lab No., or Model No. of device	6	Text	YES	IA Certification # of laboratory used to analyze result or Model number of CRM or other device used.
H	IA Lab Cert. # or Device S/N	Lab Test No. or device S/N	9	Text	YES	Test # assigned by the lab. (most likely device #) or Serial number of CRM or other identification number.
I	Test Method	Test Method/Device	2	Text	YES	Enter one of the following NUMERICAL codes: 1 = Alpha-Track Detection **Short-term** 2 = Alpha-Track Detection **Long-term** 3 = Activated Charcoal Absorption 4 = Liquid Scintillation 5 = Electret – E-Perm **Short-term** 6 = Electret – E-Perm **Long-term** 7 = Continuous Radon Monitor 8 = Continuous Working Level Monitor 9 = Grab Radon Monitor 10 = Grab Working Level Sampling 11 = Radon Progeny Integrated Sampling
J	Test Media	Test Media	1	Text	YES	Enter one of the following NUMERICAL codes: 1 = Air 2 = Water 3 = Soil
K	Device Placement	Test Device Placement	1	Text	YES	Enter one of the following NUMERICAL codes: 1 = Basement 2 = Sub-basement 3 = First floor 4 = Second floor 5 = Third floor 6 = Crawl space
L	Test Result	Test Result-Rn in Air	7	Number	YES	Do not round the numbers off. Enter complete result; i.e. 1.236 will

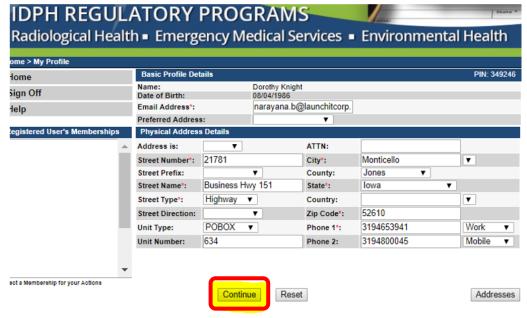|						
	(pCi/L)	(pCi/L) to nearest 1/10		0000.00		automatically be corrected to 2 digits following the decimal
M	Working Level	Test Result-Decay Products (WL) to nearest 1/1000	7	Number 000.000		Not required if column L is answered. Leave blank if not calculated, DO NOT enter 0's. Do not round the numbers off Enter complete result; i.e. 1.2367 will automatically be corrected to 3 digits following the decimal.
N	Start	Test Date Start	8	Date	YES	Enter MM/DD/YYYY
O	Stop	Test Date Stop	8	Date	YES	Enter MM/DD/YYYY
P	Purpose of Test	Purpose of Test	1	Text	YES	Enter one of the following NUMERICAL codes: 1 = Pre-Mitigation: Private Residence 2 = Pre-Mitigation: Real Estate transaction 3 = Pre-Mitigation: Educational facility 4 = Pre-Mitigation: Commercial/Government building 5 = Post Mitigation: Private Residence 6 = Post Mitigation: Real Estate transaction 7 = Post Mitigation: Educational facility 8 = Post Mitigation: Commercial/Government building 9 = Retest of Private Residence 10 = Pre-Mitigation: Daycare/Childcare facility 11 = Pre-Mitigation: Multi-Family Residence (Apartment, Condo, etc.) 12 = Post Mitigation: Daycare/Childcare facility 13 = Post Mitigation: Multi-Family Residence (Apartment, Condo, etc.)

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INSTRUCTIONS TO LOG RADON MEASUREMENT DATA

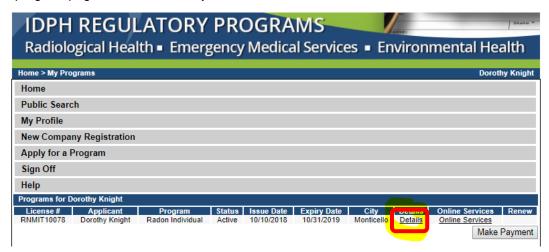1) Go to https://dphregprograms.iowa.gov and click **Sign In**.

2) a) If you are an individual reporting for yourself, click **Continue** from the profile page.
   b) If you are reporting for a **Lab**, select your company FIRST on the left-hand side under "Registered User's Memberships" by clicking on it, and then click **Continue**.

   c) On your program page, click **Details** on your active license.

d) In the program details for the license, click **Radon Measurement Specialist Application Review**.

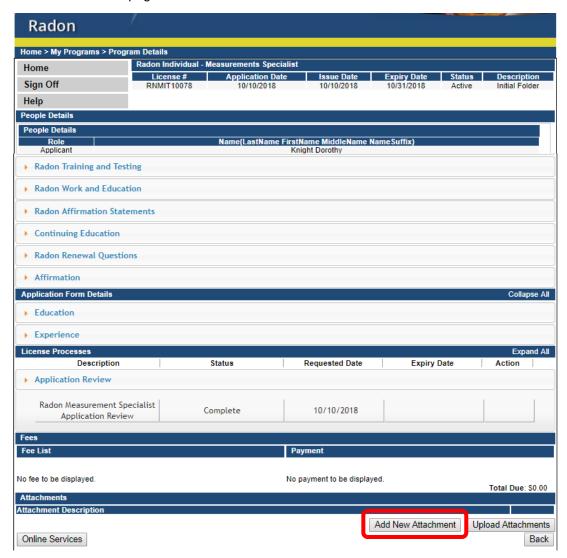e) Click **Expand All** to open up the tabs.

f) Under the Radon Data tab, click Add.
g) Make selections from the information fields about the data you will be uploading.
h) Click **Save**.

i) Once you have saved the information about your data upload, click **Back**.
   a. If you reported no testing, you may skip the attachment steps.

j) Scroll to the bottom of the page and click Add Attachment.

k) Select the **Type** of attachment as "Monthly Radon Test Data."
l) In the **Description** box, enter the YEAR followed by the MONTH for the data you are uploading.
m) Click **Choose File** to select a document.
   (Repeat the above process to attach additional documents.)
n) When you have added all of your attachments, click **Upload Attachments**."

o) When you have finished uploading all attachments, click **Back** to be taken to you program page, or click **Sign Out**.