

RETURN TO:
 Environmental Health & Safety
 Box 400322
 PHONE: 982-4911

**UNIVERSITY OF VIRGINIA
 APPLICATION FOR AMENDMENT TO RADIOACTIVE
 MATERIALS USE AUTHORIZATION**

Please keep a copy for your records.
 Please print and fill out completely.

INDEX NO: _____

1. NAME (last, first, m.i.)	2. POSITION/TITLE	3. PI/AU #.	4. DATE
5. DEPT & MESSENGER MAIL ADDRESS:	6. PHONE & E-MAIL	7. BUILDING & ROOM(S) WHERE Radioactive Material Handled	

8. PROPOSED USE OF EACH ISOTOPE REQUESTED (Include activity and a brief experiment description. May use separate sheet .)

NUCLIDE	REQUESTED LIMIT	PROCEDURE	MAX ACTIVITY PER PROCEDURE (mCi)	ESTIMATED # PROCEDURES PER MONTH

9a. USE WITH HUMAN SUBJECTS PROPOSED? YES NO (If yes, has protocol been submitted to the IRB?)

9b. ANIMALS USED? YES NO

10. RADIATION SURVEY INSTRUMENTS

Type, Model, and Description of Instrument (include probe type)

Serial No.

A. _____

B. _____

11. LABORATORY MONITORING/SURVEYS

Any laboratory under my authorization will be surveyed at least once each calendar week if radioactive material is being used.

12. PERSONNEL MONITORING AND PROTECTION

Please refer to the **Radiation Dosimetry Guidelines** on the back of this application to determine the need for dosimetry.

- I currently have a whole body badge.
- I currently have a ring badge.
- I do not require a badge since I will be using only ¹⁴C, ³H, ³⁵S, or ³³P.
- I will call Tim Quesenberry at 3-3010 to order dosimetry for myself and/or my lab personnel.

13. SIGNATURE: _____ **DATE:** _____
 Principal Investigator

14. RSO Approval: _____ **DATE:** _____

RADIATION DOSIMETRY GUIDELINES

You may be required to wear dosimetry during your radioactive material work. The following table will assist you in deciding whether you need to be included in the UVa dosimetry program. Only personnel who are using radioactive materials in the amounts shown in the table will be issued dosimetry. These guidelines are based upon the total activity used in one month. Please call the Environmental Health & Safety Office at 982-4911 to request a dosimetry application.

Radioisotope(s)	Activity, mCi	Type of Monitoring
C-14,H-3,P-33 & S-35	any amount	none required
P-32	< 6 mCi	none required
	≥ 6 mCi to < 30 mCi	ring dosimeter
	≥ 30 mCi	ring badge & whole body dosimeter
Ca-45	< 50 mCi	none required
	≥ 50 mCi	ring dosimeter
Low Energy Gamma Ray Emitters, < 200 keV (I-125, Tc-99m, Tl-201)	< 50 mCi	none required
	≥ 50 mCi	ring and whole body dosimeter
High Energy Gamma Ray Emitters, ≥ 200 keV (Cr-51, I-131, Co-60, Cs-137)	< 2 mCi	none required
	≥ 2 mCi to < 5 mCi	ring dosimeter
	≥ 5 mCi	ring badge & whole body dosimeter