

VIRGINIA INSTITUTE OF MARINE SCIENCE
SCHOOL OF MARINE SCIENCE

REQUEST FOR RADIOISOTOPE APPROVAL AND USE

Name of Researcher(s): _____

Training and Experience with Radioisotopes: (Describe type of training, duration of courses attended, date, and location. Furnish copy of certificates issued. Describe experience, type and duration of experiments conducted and names and quantities of radioisotopes used.) _____

Date(s) during which Proposed Experiment will be conducted and Location of Laboratory: _____

Type, Form, and Quantity of Radioisotope(s) Requested: _____

(If experiment to be conducted in phases, state amount of radioisotope required for each phase and totals) _____

Description of Experimental Protocol: (Attach copy of protocol or additional pages as required)

Safety and Monitoring Procedures: Describe overall safety/security measures and lab monitoring/survey techniques to be employed. Furnish a copy of lab survey/wipe test form with a sketch of work areas and equipment locations to be surveyed _____

Quantity and Types of Waste Anticipated: (Estimate quantity of solid and liquid waste to be generated and list the constituents of each. Are mixed hazardous/radioactive wastes anticipated and give details.) _____

Is a VIMS/SMS Research Vessel required upon which work with radioactive material will be performed? _____ (State approximate size of vessel and crew required as well as any equipment required as part of the vessel.) _____

Any Additional Information Pertinent to Above Request: _____

Principal Investigator's Approval: (Signature required) _____

Radiation Safety Officer (Signature required)

Approval and Date: _____

Please return form to:
Tom Grose, Director
VIMS Safety and Environmental Programs
Clayton Annex 103
804-684-7152
twgrose@vims.edu