ENVIRONMENTAL HEALTH & SAFETY | RADIATION SAFETY

Dosimetry Service Change Request

For use by current dosimeter wearers only. Complete all fields and submit to raddosimetry@cuanschutz.edu. For initial enrollment or to reinstate suspended service, complete and submit the Dosimetry Service Request. Contact EHS at 303-724-0345 with questions.

Personal In	formation							
Employee (n	ot student) ID:	Email:		@cuanschutz.ea				
Last name: _			First name	o:				
PI name:		Depar	tment:					
Change Info								
1. RAM	l used:							
	Unsealed sources in	lab (e.g., P-32 on benchto	op; I-125 RIA ki	it)				
	Irradiator operator or other sealed source user							
	Other (specify)							
2. Requ	uested change:							
	Add							
	extremity do	simeter fetal de	osimeter (subm	nit <u>Declaration of Pregnancy</u>)				
	Terminate							
	all dosimeter	extremity dosin	neter only	fetal dosimeter only				
	Transfer to another la	ab						
	new PI:	D	epartment:					
3. Effec	ctive date:							
4. Reas	son for dosimetry termin	on for dosimetry termination, if applicable:						
	Not using radiation g	enerating devices or work	ing with RAM a	at levels that require monitoring.				
	Transferring to a lab using RAM which does not require monitoring.							
	Fetal badge no longe	er needed.						
	Leaving the universit	y. (Complete next page.)						
Signature: _		D:	ate:					
FOR EHS	USE ONLY							
Date cancelled:		EHSA updated:	5	Spreadsheet updated:				

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Dosimetry Reports Forwarding Address

In order for the university to provide annual radiation exposure data to monitored individuals, as required by CDPHE regulation 6 CCR 1007-1, Part 10, a forwarding address must be provided by any dosimeter wearer who leaves the university. If you would like your records to be delivered by mail, reach out to us at raddosimetry@cuanschutz.edu.

All personal information is secured and may be released only with the permission of the individual.

Employee (not stud	ent) ID:		
Name:			
Forwarding Email:			