

UWM RADIATION SAFETY PROGRAM
ATTACHMENT TO RS FORM 100
USE A SEPARATE SHEET FOR EACH PROPOSED USE

PROTOCOL SUMMARY SHEET

AUTHORIZED USER:	
CAMPUS MAILING ADDRESS:	PHONE:

RADIONUCLIDE:	CHEMICAL AND PHYSICAL FORM:
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VOLATILE SUBSTANCE: YES NO PROCEDURE PERFORMED AT STANDARD TEMPERATURE AND PRESSURE (STP): YES NO

PROTOCOL: PROVIDE A BRIEF DESCRIPTION OF THE PROCEDURE. INCLUDE SPECIFIC INFORMATION ON THE TYPE OF WASTE MATERIALS THAT WILL BE GENERATED, ANY SPECIAL EQUIPMENT USED TO HANDLE, SHIELD OR CONTAIN THE RADIOACTIVITY, AND ANY UNUSUAL HAZARDS ASSOCIATED WITH THE PROCEDURE.

TOTAL ACTIVITY PER EXPERIMENT:
FREQUENCY OF EXPERIMENT:

WILL MIXED HAZARDOUS AND RADIOACTIVE WASTE BE GENERATED? YES NO
IF YES, PLEASE SPECIFY TYPE AND ANTICIPATED VOLUME:

WILL VERTEBRATE ANIMALS BE USED? YES NO
IF YES PLEASE PROVIDE ANIMAL PROTOCOL NUMBER: #