



## Request to Use Radioisotopes in Live Vertebrate Animals

Principal Investigator(s):

Protocol Title & Number:

Date:

Contact Info:

List each radioisotope and describe all procedures necessary for personnel and animal safety including hazardous waste, carcass disposal, and cage decontamination below:

Name of Isotope:

Name of parent compound:

Half-life: Physical

Half-life: Biological:

Type of Radiation: (please check):

*Alpha*

*Gamma*

*Beta*

Length of time chemical shed or present in bedding:

Route of Excretion (check all applicable):

Respiratory

Urine

Feces

Saliva

Other

Not Excreted

Hazardous metabolites generated:

Yes

No

If yes, please list:

Please describe briefly how waste (carcasses, bedding) will be collected, stored, and disposed of:

**Important Reminder:** Approval from the IACUC and EH&S must be granted before any work utilizing the above agents in/with animals may begin. Based on risk assessment, a hazard start-up meeting between EH&S and PI may be required before initiating this work.

\_\_\_\_\_  
Printed Name of PI

\_\_\_\_\_  
Date

\_\_\_\_\_  
PI Signature

**For Office Use Only: Approval Documentation:**

\_\_\_\_\_  
Environmental Health & Safety      Date      Comments

\_\_\_\_\_  
IACUC      Date      Comments