



**UNIVERSITY OF SOUTHERN CALIFORNIA**  
**RADIATION PROTECTION**

**APPLICATION FOR USE OF RADIOACTIVE MATERIAL WITH ANIMALS**

<b>Authorized User:</b>		<b>Permit Number:</b>
<b>Building:</b>	<b>Room:</b>	<b>IACUC Number:</b>
<b>Telephone Number:</b>		<b>Begin Date:</b> <b>End Date:</b>
<b>Project Title</b>		
<b>Brief Description of the Project</b>		
<b>Radiation Safety Information</b>		
<b>Species of Animal to be Used:</b>		
<b>Location Where Animals Housed:</b>		<b>Location of Experiment:</b>
<b>Radionuclide(s):</b>		<b>Chemical Form(s):</b>
<b>Dose Schedule/Animal:</b>		<b>Route of Admin.:</b>
<b>Surgical Procedures:</b>		
<b>Biological Halflife of Radiochemical:</b>		
<b>Radionuclide Distribution:</b>		
<b>Describe Excretion Path:</b>		
<b>Amount of Radionuclide Excreted:</b>		<b>Excretion Rate:</b>
<b>Amount of Radioactivity retained by the Animal:</b>		
<b>Describe Handling Procedures, Required Shielding (if applicable) and Contamination Control:</b>		
<b>Describe Decontamination and Monitoring Procedures for Cages:</b>		

<b>Describe Radioactive Waste Disposal Including Disposal of Carcasses and Bedding:</b>	
<b>Procedures to Follow in the Event of Animal's Sickness or Death:</b>	
<b>Animal Care Facility Research Project Information</b>	
<b>Total Number of Animals:</b>	<b>Turnover Rate (e.g. #/month):</b>
<b>Type of Caging Requirements:</b>	
<b>Special Requirements as to Care:</b>	
<b>Authorization</b>	
<b>Permit Holder Signature:</b>	<b>Date:</b>
<b>Radiation Safety Officer:</b>	<b>Date:</b>
<b>Animal Resources Director:</b>	<b>Date:</b>