Weill Cornell Medical College

Environmental Health and Safety

RECEIPT OF VIALS			WITHDRAWALS BY INDIVIDUALS					DISPOSAL
Date Vial Received	Amount Received (uCi)	Isotope/Chemical Form	Date Used	By (Initials)	Amount Used (µCi)	Amount Used (cc)	Balance Remaining	Date Vial Disposed in Radiation Waste Bucket

Lot #: (_____)
(Lot number found on container or vial label)

Condition of Package:_____

Survey @ 1 meter:_____**mR/hr**

Survey @ surface:_____**mR/hr**

Package Opening Directions:

a. Open package with gloves.
b. Check condition of internal packaging.
c. If there is reason to suspect contamination wipetest external surface of source vial.
d. Deface radiation labeling befor disposal.
e. Monitor packing materials prior to disposal

P.I./Authorized User: _____

C.I.L Number: _____