ENVIRONMENTAL HEALTH & SAFETY | RADIATION SAFETY

Dosimetry Service Request

Complete every field. Sign page 2 (and 3 if necessary), and email to radtraining@ucdenver.edu.

Contact EHS at 303-724-0345 with questions.

| Personal Inf | ormation |
|-----------------------------|---|
| Employee (no | t student) ID: |
| Date of birth: ₋ | Gender: F M |
| Last name: | First name: |
| Email: | @ucdenver.edu Mail Stop: |
| PI name: | Department: |
| Dosimetry Ir | iformation |
| 1. | Type of service and date needed: |
| | Whole body Extremity Fetal (submit <u>Declaration of Pregnancy</u>) |
| | Other: Date needed: |
| 2. | User status: |
| | Radiation worker PI Device operator (e.g., irradiator, DEXA) |
| 3. | Training completed: |
| | Rad Worker – Part I Rad Worker – Part II Other: |
| 4. | Radiation sources to be used: |
| | Isotopes on lab bench Sealed sources (e.g., irradiator) Other (e.g., DEXA, x-ray): |
| 5. | Has applicant been issued a dosimetry badge previously at this university or elsewhere?: |
| | Y * N |
| 6. | Is applicant currently being monitored for occupational radiation exposure elsewhere?: |
| | Y* N |
| | * If yes to item 5 or 6, complete page 3. Obtaining past exposure history is required by law. |

| FOR EHS USE ONLY | | | | | | |
|-----------------------|----|-------------------------|---------|--|--|--|
| Temp. WB #: | 36 | Temp URE #: | 19 | | | |
| Temp. WB #. | | | | | | |
| Date temps issued: | | Date records requested: | | | | |
| Date account created: | | Perm. ID#: | Series: | | | |

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Proper Use of Dosimetry Badges

These requirements must be followed to ensure accurate monitoring:

- When in a controlled area, wear dosimeter at all times.
- Leave dosimeter in secure, non-radioactive area when not in use.
- Only wear personally assigned dosimeter.
- Return dosimeter for previous monitoring period to EHS immediately upon receipt of periodic replacement.

Do not:

- wear or use a dosimeter issued to another individual;
- write on dosimeter;

Applicants (page 4 of this document).

- expose dosimeter to excessive heat, or immerse in water;
- allow dosimeter to be placed in any situation that does not reflect the assigned individual's true exposure.

| | • | | |
|------------|---|-------------------|--|
| Signature: | | Date [.] | |
| olyriature | | Date | |

I have read and understand the above information, and Information for Personal Dosimeter

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|------------|------------|

Dosimetry Service Request

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Release of Radiation Exposure Records

(Complete a separate form for each monitoring facility.)

The person named below was monitored for occupational radiation exposure at the listed facility, and requests release of exposure records on file there.

| First name: | | | | | |
|---|-------|--------|--|--|--|
| | | | | | |
| Last name: | | | | | |
| School or employer: | | | | | |
| Employment dates: from | to | | | | |
| Department: | | | | | |
| Street address: | | | | | |
| City: S | tate: | _ Zip: | | | |
| Country (if applicable): | | | | | |
| I hereby authorize release of my radiation exposure history on file at this facility. | | | | | |
| Signature: | Date: | | | | |

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Information for Personal Dosimeter Applicant

The thermoluminescent dosimeter is used to track an individual's exposure to radiation over time. It measures **external** exposure from sources outside the body, such as x-ray machines and radioactive materials. It does not provide indication of internal exposure by inhalation, ingestion, or cutaneous absorption.

The university Committee on Ionizing Radiation mandates dosimeter use for all persons working with sources of penetrating radiation (i.e., x-rays and gamma rays), and for those working with high energy beta particles with an activity of 1 mCi or more. This requirement is imposed for medicolegal purposes and for the wearer's peace of mind. Dosimeter wearers at this institution are not generally exposed to radiation levels significantly exceeding background.

Dosimetry program requirements include collection of certain confidential personal information (i.e., birth date and employee identification number). This data, along with exposure results, is safeguarded by EHS, and released outside the university only with the express written permission of the individual wearer.

Dosimeter wearers have the legal right to receive their exposure results at any time. EHS retains these records indefinitely.

Reported results reflect periodic shallow (skin), and deep (whole body) exposure estimates. Cumulative totals are also provided for the calendar quarter, year, and since inception. Dose is reported in millirems (mrem), with a detectable minimum of 1 mrem. A report of "ND" (non-detectable) indicates exposure of less than 1 mrem.

The average Colorado resident receives about 15 rmem of environmental radiation exposure monthly. Monitored exposures of 10 - 20 mrem are occasionally reported due to statistical fluctuations, and should not cause concern. The wearer will be informed of any whole body exposure over 125 rmem.

For further information regarding any aspect of the dosimetry program, contact EHS at 303-724-0345.

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