

# RADIATION MONITORING SERVICE

## Forms and Guidelines

To apply for radiation monitoring at Yale University (**not to include Yale New Haven Hospital or the VA Hospital**) the attached form must be completed and returned via campus mail to the Radiation Safety Office at:

EH&S, Radiation Safety  
135 College Street, Suite 100  
Attn: Peggy Motsinger  
Or  
Fax #: 785-7588

Be certain to complete all sections of the form (especially Previous Dose History information) or it may delay processing.

### **General Guidelines for Proper Use of Personnel Monitoring Devices:**

- *Wear the badge only when working at Yale University*
- *Wear only your own badge - i.e. check the name*
- *Wear the badge outside any protective lead clothing*
- *For ring badges, tell RSS if your left or right hand is the one most likely to be exposed*
- *Do not remove the badge from its holder*
- *Store the badge in a cool, dry place away from sources of radiation when it is not being worn (do not expose badges to chemicals or heat)*
- *Do not take your badge home, or off University property*
- *Submit the badge for processing by the 10th of the month after your new badge is provided*
- *Report loss or damage of badge promptly so that a replacement may be issued.*
- *When transferring to another lab where you will be using radioactive material take your badge with you, and then call the Radiation Safety with the new lab information.*
- *Report personal Nuclear Medicine exams, so that medical exposures are not confused with occupation radiation exposure.*

If you have any questions about personnel monitoring, call the Radiation Safety Section at 737-2114 or 737-2140.



**YALE UNIVERSITY**  
**REQUEST FOR RADIATION MONITORS - PAGE 2**

Please Print or Type

Complete a separate block for each institution which has monitored you for radiation exposure.

INSTITUTION: _____ DEPARTMENT/SUPERVISOR: _____ STREET ADDRESS: _____ _____ CITY, STATE, ZIP: _____ DATES AT INSTITUTION: FROM: _____ TO: _____ ADDITIONAL INFORMATION: _____ I authorize the release of past radiation exposure information to Yale University. Signature: _____
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