Georgetown University

Office of Environmental Health and Safety

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Radiation Safety
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RADIOACTIVE WASTE TRANSFER FORM

Authorized User's Name _____ Authorization Number _____ Date of Transfer _____

Building _____ Rooms _____ Printed Name of Transferee _____

Instructions

Description / examples of required data

Waste tag date ..... date as shown on package tag
Radionuclide ..... I-125, H-3, P-32, S-35, Na-22, Cr-51, etc.

Activity (uCi) ..... in package, container or total of all vial trays by isotope

Physical form ..... Solid ..... Aqueous liquid ..... Stock vials,
Animals ..... Organic liquid ..... Vials (scintillation)
Sharps.....Filter Mats (Beta Plates)

Chemical Contents ..... list all chemical compounds or solutions and percentages present in the liquid waste delivered to RSO **or** scintillation cocktail brand/type

Liquid pH ..... list the actual adjusted pH of the liquid (Must have a pH between 5.5 and 8.5)

Volume (liquid), ... 2 liters, ½ gal, 300 ml
or No. of vials ..... total of all vials in trays by isotope **or** stock vial total isotope

RSO ID number ..... number assigned by the RSO at time of transfer

TO BE COMPLETED PRIOR TO TRANSFER							COMPLETED BY RSO
Waste Tag Date	Radio-nuclide	Activity (uCi)	Physical Form	Chemical Contents & Percentages	Liquid pH	Volume / # of vials	RSO ID Number