

Transfer of Radioactive Material (Off Campus)

UCSD Environment, Health and Safety Isotope lab. Phone 858-534-6418 Fax 858-822-5524 Mail code 0035

This document and a shipping memo must be completed for all out bound shipments of radioactive material.
Submit 1 week in advance of the desired ship date for domestic shipments, 2 weeks for international shipments.

Institution transferred from:

University of California San Diego
Campus Services Complex Bldg E 119,
La Jolla, CA 92093-0035

1339-37 _____ 12/31/2021
Radioactive materials license No. & Exp. date

PI: _____ RUA: _____

Signature: _____

Printed name: _____

Title: _____

Phone: _____

_____ Fax : _____

Email: _____

Date: _____

Isotope: _____ Total MBq: _____ Total mCi: _____ Index number _____

Chemical Form: _____ Physical form: (circle one) Solid / Liquid / Gas

Inner container(s): Quantity: _____ Type: (circle one) vial / ampoule / other (please state): _____

Shipping temperature: (circle one) Frozen (dry ice) Refrigerated (wet ice) Ambient (none)

Wipe test results (dpm/10cm²): _____ please provide printout from detection device.

For use in or incident to research, medical diagnosis, or treatment? (circle one) Yes / No

Subsidiary Hazard Type and Quantity: Infectious Substance _____

Biohazard _____

Hazardous Material _____

*****↓ Reserved for EH&S ↓*****

Outer package: Type : _____ Wipe test (dpm/300cm²): _____ mR/hr.: contact/1m _____ / _____

DOT proper shipping name, hazard class, I.D. number: _____

Label: Ltd Qty W I / Y II / Y III T.I. _____ UCSD Shipping memo number: _____

US Census Bureau Schedule B description(s) and I.D. number(s): _____

UCSD agent: Printed name: _____ Signature: _____

Title: _____ Date: _____

UCSD affiliates desiring a transfer complete the top two sections. All spaces must be acknowledged.
Provide a means & point of contact to the "institution transferred to" column then fax to the UCSD Isotope lab.
1 copy to each individual signing this document.