UNIVERSITY OF KENTUCKY RADIATION SAFETY OFFICE

RADIOISOTOPE ORDER FORM

DATE	SHIPCODE NUMBER
Preferred Supplier	Department Catalog
Number	Department Catalog
	Authorized User Person Making Request
Element and Isotope	
Chemical Form Assay Date	Delivery Location Amount in Possession
1.1	Amount in Possession Account Number
	Account Number
Other Specifications	Cost
	Signed By
Condition of Package:OK Punctur Transport Index (as read on package label)	red Crushed Wet Other mem/hr @ 1 meter Bkg., mrem/hr
3. Confirm Packing Slip/ Vial Content/ Package Label	Agreement above. Yes No
4. Wipe Results (DOT labeled packages): LSC Results: Outer Inner dpm / cm	<u>n</u> 2
RHT (initials)	

Date Order Placed	Date Received
BySupplier	Via
P.O. Number	
Invoice Number	
To Be Shipped/Delivered	
. 5 25 5/11ppou/20111010u	

Revised: April 11, 2013