CAL STATE LA

RISK MANAGEMENT / ENVIRONMENTAL, HEALTH & SAFETY

# Radiation Use Authorization (RUA)

An authorization to use radioactive materials in accordance with the laws and regulations of the State of California and policies and guidelines of the University is granted to the responsible principal investigator (PI) also known as the Authorized User indicated below. Project Authorization is valid for a period of **one year only**. At the end of each year, the Authorized User may reapply.

| | |
|---|---|
| **Name of Authorized User:** | |
| **Position Title:** | |
| **Department Name:** | |
| **Building Name(s) where radioactive materials will be used:** | |
| **Emergency Contact Number:** | |
| **RUA Number*:** | |
| **Beginning date for this project (mm/dd/yyyy):** | |
| **Ending date for this project (mm/dd/yyyy):** | |
| **Expiration Date*:** | |

*If approved a RUA number and expiration date will be assigned by the Radiation Safety Officer (RSO).

## Authorized Locations for the Use and Storage of Radioactive Materials

Radioactive material may only be used or stored at the location(s) indicated in the table below. Any changes to these locations will require an amendment to the existing authorization.

| **Building Name and Room Number:** | **Purpose (Select all that apply for each location):** |
|---|---|
| | ☐ Storage ☐Use |
| | ☐ Storage ☐Use |
| | ☐ Storage ☐Use |

## Profile of Material and Activity for Possession and Use

The Authorization is extended only for the items and use as profiled below. Any changes to this profile will require an amendment to the existing authorization.

| Radioisotope Source | Type | Chemical Form | Quantity | Proposed Use |
|---|---|---|---|---|
| | ☐ Sealed<br>☐Unsealed | | | |
| | ☐ Sealed<br>☐Unsealed | | | |
| | ☐ Sealed<br>☐Unsealed | | | |
| | ☐ Sealed<br>☐Unsealed | | | |
| | ☐ Sealed<br>☐Unsealed | | | |

## Additional Information Regarding Use

| |
|---|
| **Will experimental animals be used?** ☐ Yes ☐ No |
| **If yes, what kinds of animals? What is the activity per carcass? What is the method of disposal?** |
| |
| **If applicable, please provide the date of Institutional Animal Care and Use Committee (IACUC) approval (mm/dd/yyyy):** |
| |
| **Will an airborne radioactive gas, vapor, or aerosol be generated?** ☐ Yes ☐ No |
| **If yes, what will become airborne? What is the quantity that will become airborne? How will it be contained? What is the method of disposal? How will it be monitored?** |
| |

| **Description of the project, including the hazardous operations.** |
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| |

## Recognized Users of Radioactive Material(s) for this Authorization

The individuals indicated below are the only individuals recognized under this authorization to use or handle radioactive material. The RSO should be notified of the departure of anyone on this list or change of personnel. All new users must complete the *"Training and Experience Form"* and Radiation Safety Training prior to working with radioactive material. *Dosimetry is determined by the RSO.

| **Name (Last Name, First Name)** | **User Type** | **Dosimetry Required*** | **Training and Experience** |
|---|---|---|---|
| | ☐ Authorized User<br>☐ Designated User | ☐ Yes ☐ No | ☐ On file with RSO<br>☐ Uploaded to this document |
| | ☐ Authorized User<br>☐ Designated User | ☐ Yes ☐ No | ☐ On file with RSO<br>☐ Uploaded to this document |
| | ☐ Authorized User<br>☐ Designated User | ☐ Yes ☐ No | ☐ On file with RSO<br>☐ Uploaded to this document |
| | ☐ Authorized User<br>☐ Designated User | ☐ Yes ☐ No | ☐ On file with RSO<br>☐ Uploaded to this document |

## Survey Profile Requirements for Removable Contamination

Every laboratory using radioactive material must perform surveys to ensure the minimization of potential exposures. The table below profiles the surveys that must be performed under this authorization to minimize exposure due to removable contamination. **All surveys should be performed and recorded by an authorized user or designated user.**

| Survey Required | Survey Frequency and Method | Documentation Required | Requirements to Notify the RSO |
|---|---|---|---|
| **After each experiment (*safe laboratory practice*)** | After each experiment. | None. | • **If internal contamination is suspected.**<br>• **If contamination is found in "non-controlled" areas.**<br>• **If contamination exceeds twice background.**<br>• **Any contamination found on skin.** |
| **Items in storage, but not in use.** | Survey at least once per semester. | Yes. Document surveys must be retained for 3 years for state inspection. | Same as Above. |
| **Material(s) in "active" use. Use occurs at least monthly.** | Survey once a month. | Yes. Documented surveys must be retained for 3 years for state inspection. | Same as Above. |

## Special Requirements from the RSO and the Radiation Safety Committee (RSC)

1. Include the following wording on purchase order for every purchase of a radionuclide:

   *"Approval by the Radiation Safety Officer (RSO), Steven Thomas Melgar. California Radioactive Materials License Number is: 6039-19 (Expiration Date: 3-4-2028). After arrival at Cal State Los Angeles, hold in the Receiving Department until shipment is inspected. Please contact Steven Thomas Melgar, RSO at extension 3-3748, mobile 1-213-278-4798, or RMEH&S at extension 33531 until arrangements for inspection of shipment and delivery to Authorized User."*

2. Contact the RSO for disposal of radionuclides.
3. At the end of the project, contact the RSO for pick-up of remaining radionuclides and for inspection/survey of the facilities used.
4. Attach a drawing of the room in which the radioisotope will be used. Use this drawing to indicate where surveys or swipe tests have been done at either the end of each laboratory exercise (for classroom), the end of each experiment, or at a minimum of monthly intervals (use the Monthly Contamination Survey Worksheet)
5. Waste disposal: All liquid waste containing radionuclides will be collected and transferred to the RSO after labeling with identity and quantity of radioisotope. All dry waste, including gloves, vials, dishes, pipettes, paper towels, and bench paper, will be collected and transferred to the RSO after labeling with identity and quantity of radioisotope.

## RUA Dates for Use and Expiration

| | |
|---|---|
| **RUA Effective Date:** | |
| **RUA Expiration Date:** | |

## Agreement and Signature:

As the principal investigator and authorized user of the above-stated radioactive material(s), I have filled out this form as accurately as possible to ensure the proper information is maintained and available for review for the RSO. I have ensured that all personnel working under my supervision have been trained prior to the use of any radioactive materials and any training received is documented. In addition, I agree to maintain an active chemical inventory and proper use record when working with radioactive materials. Any disposal of radioactive materials, waste, or chemical waste has been addressed prior to the use of the radioactive material. If it is recommended that dosimetry be used, agreement for the pick-up and drop-off of any used dosimeters has been discussed and documented.

| **Signature of Authorized User/Principal Investigator:** | **Date:** |
|---|---|
| | |
| **Signature of the RSO:** | **Date:** |
| | |

**Original: Office of Academic Research**
**Copies: Authorized User, Radiation Safety Committee- Chair, Radiation Safety Officer**