

SHIPBOARD RADIOISOTOPE USAGE FORM

NOTE: THIS FORM MUST BE COMPLETED ON BOTH SIDES AND RETURNED TO THE SHIP SCHEDULING OFFICE, 0210, SCRIPPS INSTITUTION OF OCEANOGRAPHY, UCSD, LA JOLLA, CA 92093

Principal Investigator: _____ Radioisotope Authorization # _____ Affiliation: _____ Chief Scientist: _____

Cruise: _____ Cruise Dates: _____ SIO Research Vessel: _____ Van: _____

MATERIAL BALANCE: Please enter all amounts in millicuries.

Radio-isotope	Amount Taken on Cruise	Amount Unused (returned)	Amount in Samples	Waste to SIO		Returned (EH&S)	In Process Losses Disposed of At Sea (Attach log)	Spills or Other Losses (explain on separate sheet)
				SOLID	LIQUID			

Submitted By: _____
Chief Scientist (signature)
Principal Investigator (signature)

Marine Operations Committee	Date	Isotope Usage Panel	Date	Radiation Safety Officer	Date
COMMENTS:					

