

<http://vesta.cumc.columbia.edu/ehs/wastepickup/><http://vesta.cumc.columbia.edu/ehs/radioactivewastepickup/>**CHECKLIST FOR RADIATION PERSONNEL CHANGE**

Principal Investigator: _____ Building & Room #: _____
 Department: _____ Telephone Contact #: _____
 Personnel Leaving (UNI): _____ Replacement Name (UNI): _____

It has come to our attention that you will soon be vacating your position with the lab. We appreciate you taking the time to contact Environmental Health and Safety to notify us of this upcoming change.

We wish you the best on your upcoming endeavors and we would like to ensure an easy transition for both your laboratory and EH&S. As such, we have developed the following checklist to ease your concerns regarding radioactivity in your lab space:

RADIOACTIVE MATERIALS (RAM) CHECKLIST FOR RADIATION PERSONNEL CHANGE	✓ when completed
Ensure that all violations from previous RAM surveys have been closed out (Please see attached)	
Inventory Verification form has been filled out and returned to EH&S	
Survey meters with sealed check sources present and calibrated	
Emergency Response and Waste Disposal guides posted	
RAM signage posted as appropriate in areas where RAM is present	
Dosimeter badges that will no longer be in use returned to CUMC Dosimeter Badge Coordinator	
In your yellow Radiation Safety Binder, please ensure the following are present and up to date:	
☐ Dosimeter badge reports	
☐ Training certificates of all lab personnel, PI included, ensuring that each member of the lab is up-to-date with their training requirements as specified for the lab by EH&S training requirements	
☐ Copy of PI's RAM Permit updated	
☐ Monthly wipe reports (Recorded in DPM)	
☐ Pre- and post- RAM work area wipe reports	
☐ Packing slips with Isotope Use Log	
Waste	
☐ Segregated by isotope and waste type (liquid vs solid) with secondary containment present for liquid waste containers	
☐ Proper shielding as necessary	
☐ Labels properly affixed to containers and properly filled out	
☐ Lead pigs and sharps not present in waste containers	

Departing RAM Safety Officer (Print Name & Sign): _____ Date: _____

New RAM Safety Officer (Print Name & Sign): _____ Date: _____

Research Safety Specialist (Print Name & Sign): _____ Date: _____

Radiation Safety Officer, Research (Print Name and Sign): _____ Date: _____