

The University of Texas  
**Southwestern Medical Center at Dallas**

**Description of Room Where  
Radioactive Materials are Used or Stored**

1. Principal Investigator: \_\_\_\_\_

2. Room number: \_\_\_\_\_

3. Phone Number: \_\_\_\_\_

4. Draw a floorplan of the room in the box provided below. Please include all countertops; sinks; fume hoods; shielding; locations of detectors, counters, and dose calibrators; locations for storage and use of RAM; and the locations of radioactive waste containers.



