



## RAS FORM 11

### AUTHORIZED USER AUDIT RECORD

1. Authorized User / Department \_\_\_\_\_
2. Locations of radioactive material (RAM) use: \_\_\_\_\_
3. Audit checklist:
  - \_\_\_ a. Receipt, Inventory, Use record (RAS FORM 6) for each material possessed
  - \_\_\_ b. Formal monthly survey record (RAS FORM 4)
  - \_\_\_ c. Survey record daily (or as appropriate for isotope use)
  - \_\_\_ d. Personnel surveys
  - \_\_\_ e. Personnel dosimetry used
  - \_\_\_ f. Waste properly recorded (RAS FORM 6, RAS FORM 7)
  - \_\_\_ g. Fume hood, waste container, lab door, RAM storage areas properly labeled
  - \_\_\_ h. Radioactive material secured
  - \_\_\_ i. Radiation work area demarcated and RAM use equipment segregated from other equipment
  - \_\_\_ j. Lab posted
  - \_\_\_ k. Standard operating and emergency procedures posted
  - \_\_\_ l. Survey meter calibrated within the last year and available to the laboratory
  - \_\_\_ m. Training records
  - \_\_\_ n. Radioactive liquids in secondary containment
  - \_\_\_ o. Food and drink not stored or consumed in the lab
  - \_\_\_ p. No radioactive waste in regular trash
  - \_\_\_ q. Proper use of personal protective equipment including lab coats, gloves, and safety glasses

Date: \_\_\_\_\_ Authorized User: \_\_\_\_\_

Date: \_\_\_\_\_ Radiation Safety Officer: \_\_\_\_\_