



RAM LICENSE AMENDMENT REQUEST FORM

Licensees who wish to amend radionuclides, activity limits, rooms, or complete a license inactivation must complete this form. A Protocol Summary Form is also required if the license change is due to addition of an isotope or an increase in activity being used. Please see the User's Guide for additional information.

Licensee: _____ Permit Number: _____ Date: _____
 Name of Requestor: _____ Requester Email: _____

1. Are you adding a radionuclide? yes no
2. Are you changing activity limits? yes no
3. Will the requested increase in activity limits change the existing protocol? yes no

IF ADDING A RADIONUCLIDE OR CHANGING ACTIVITY LIMITS

4. Please address only the radionuclides to be added or changed.

Radionuclide	Current possession limit (mCi)	Current annual limit (mCi)	Requested possession limit (mCi)	Requested annual limit (mCi)

5. If you are adding a radionuclide, please specify the monitoring method that you will use: Include make, model and probe type:

[If you are using H-3, C-14, Fe-55, or Cr-51, a liquid scintillation counter (LSC) is required as the monitoring method. For information on recommended portable instruments: [Ludlum Model 3 survey meter](#) with a [44-9 G-M pancake detector](#) for most lab uses. I-125 users (or others using low energy gamma emitters) might also need to purchase a [44-3 scintillation detector](#).]

Manufacturer	Model	Serial Number	Type/Model of Detector

***Please also submit a [Protocol Summary Form](#) if you are adding a radionuclide or changing an existing protocol.

6. Are you adding or deleting a room? yes no

IF ADDING / DELETING ROOMS

Room Additions		Room Deletions	
Building	Room	Building	Room

7. With this form, please also submit an updated layout of the lab space in which radioactive materials are used including the new area(s). Indicate hot work areas, hot sinks, fume hood, radioactive waste areas, and entrances.

8. Please select what institution the room change request is for and submit a room sign request form for the respective institution:

a. University of Pennsylvania

i. If you are adding a room at UPenn but NOT in the School of Medicine space, please submit the room sign request form at [Room Sign Request Form](#)

b. University of Pennsylvania School of Medicine

i. If you are adding a room in the School of Medicine space, please submit the room sign request form at [SOM Sign Request](#)

c. CHOP

i. CHOP researchers can reach out to The CHOP Office of Research Safety through their email: researchsafety@email.chop.edu or call them at 267-426-2272 for a new door sign.

d. Wistar

i. To obtain and updated door sign, Wistar Employees should contact Wistar directly via email (ehs@wistar.org) or call at (215) 495-6905.

9. Are you inactivating the license? yes no

a. If you are inactivating please state the reason (leaving institution, no planned radioactivity work, etc.):