

## Radiation Safety Investigation

Date of Occurrence:

Date Notice Sent:

Principal Investigator:

Lab:

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**Nature of Occurrence:**

Radionuclide involved:

Radiation Machine:

Other:

Description of occurrence:

Location:

Additional Information:

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**Required Response to this Notice:**

1. Prompt Investigation into the cause of this notification.
2. Prompt implementation of corrective actions.
3. Report results of investigation to Radiation Safety Officer
4. Implement preventative actions as specified by timing on investigation report.

**INVESTIGATION RESPONSE**

**Brief Description:**

**Pertinent Facts (please number your facts as needed)**

**Cause(s): please number as needed**

**Actions to Prevent Recurrence**

**Responsibility**

**Timing (date)**

**Investigated By (Team Members):**

**Signature of PI or Supervisor / Manager: \_\_\_\_\_aaaaaaaaaaaaaaaa\_ Date:**