Radiation Shielding Design Request Form SPECT / CT Room

Contact Inform	nation		
Facility Name		Room ID or Number	
Street Address		State	
City		Zip Code	
First Name		Last Name	
Title		Company	_
Email		Phone	
Equipment Inf	ormation and Workload		
Manufacturer		Model	
Nuclear Medicine Co	omponent		
Est. Maximum # of N	Nuclear Medicine Patients Per Week		
Procedure Types ☐ General Nuclear Medicine		☐ General Nuclear Medicine and I-137	Therapy
	Nuclear Cardiology	☐ General NM, Nuclear Cardiology, a	nd I-131 Therapy
	General NM and Nucelar Cardiology	□ Other	
	RY Radioisotope Used? 🛮 Tc-99m 📋	「I-2021 □ I-123 □ Ga-67 □ Ra-223	□ <i>I-131</i> □ <i>In-111</i>
% of Procedures Usi	ng Tc-99m	□ Other	
Average Activity (mCi)		Average Scan Time (min)	
What Is The SECONE	DARY Radioisotope Used? □ Tc-99m [] TI-2021 🛘 I-123 🖶 Ga-67 🗘 Ra-2	23 🛮 1-131 🔻 In-11
Average Activity (m	Ci) Average Sca	n Time (min) Othe	er
CT Component			
Number of Slices for CT Scanner		Maximum kVp	
Est. Maximum # of CT HEAD Studies Per Week		Est. Maximum # of CT BODY Studies Per Week	
% of CT Procedures	Using Contrast		
*Please Upload The	Manufactuer Isodose Maps in PDF For	mat (If Available).	
Construction I	nformation		
Construction Type	□ New Construction	Is There a Previous or Existing	□ Yes
	☐ Remodel of Existing Building	Shielding Design For This Space?	□ No
	☐ Remodel of Existing Shielded Rm		
	□ Equipment Replacement	Is This a Multiple Story Building?	□ Yes □ No
	□ Other	*If YES, please answer the addition	al questions below.
Which Floor Is the Room On?		What Is The Floor to Floor Height?	
What Is The Floor / 0	Ceiling Building Material?		
What Is The Floor / 0	Ceiling Building Thickness?		
Are There Occupied Spaces Above or Below?		□ Below □ Both	
What Is Above or Be	elow?		
Describe the areas t	hat are on the opposite sides of each	wall (ie: office space, work areas, hallv	ways, bathrooms, etc.
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All walls are assumed to contain standard gypsum wallboard with a total	thickness of 1.25". If additional materials
are known to be present, please list known compositions and thicknesses	(ie: 0.79 mm of lead, 8 inches of concrete)

Comments

Please include a scale (1/4") drawing of the room in PDF format. The drawing should include the placement and orientation of equipment as well as surrounding spaces.

Please submit this form to info@olympichp.com. For questions, call 253.254.6988.

