

**APPLICATION FOR USE OF X-IRRADIATOR ON HUMANS INVOLVING
DIAGNOSTIC AND THERAPEUTIC PROCEDURES**

INSTRUCTIONS: A Personal Data Form must accompany this application if not previously filed.

NAME _____ DATE _____

1. Irradiator Type _____
2. Irradiator Location _____ Use Location _____
3. kVp _____ mA _____ Time _____
4. Field Size _____ Source-Skin Distance _____
5. Skin to Critical Organ Distance _____
6. Primary Critical Organ _____ 7. Secondary Critical Organ _____
8. Dose to Primary Critical Organ Per Irradiation _____ Rad
9. Dose to Primary Critical Organ Per Study _____ Rad
10. Dose to Secondary Critical Organ Per Irradiation _____ Rad
11. Dose to Secondary Critical Organ Per Study _____ Rad
12. Dose to Whole Body Per Study _____ Rad
13. Show calculations of items #8, #9, #10, #11 and #12 on separate sheets of paper. State any assumptions and reference all constants.
14. What is the purpose of this study? _____

15. Describe on a separate sheet the plan of investigation. Include the following:
 - a. Complementary drugs to be used and why.
 - b. Number of controls, age range, and sex.
 - c. Number of research subjects, age range, and sex.
 - d. Will pregnant women be tested? If so, why? How will testing of pregnant women be prevented?
 - e. Duration of study.
 - f. Describe any unusual hazards in handling and what precautions will be taken.
 - g. Reference to similar studies.
16. Volunteers should know the intent of the study and the effect of radiation. Will volunteers be given this information? Yes No If not, state why not.