RADIOPHARMACEUTICAL STOCK RECORD

For use of this form, see TB MED 525; the proponent agency is the Office of The Surgeon General

RADIOPHARMACEUTICAL	MANUFACTURER	DATE	*Place Package Label in This Space*
	LOT NUMBER	EXPIRATION DATE	

NUMBER	PATIENT NAME	PROCEDURE	DATE	TIME	ASSAY (mCi/ml)	PATIENT DOSE		BALANCER EMAIN-ING (ml)	PRESCRIPTION NUMBER	ADMINIS-TERED BY (initials)
						ACTIVITY (mCi)	VOLUME (ml)			

DA FORM 4574-R, 1 NOV 1976

APD LC v1.00