

Dose Calibrator Linearity Test Record

Site: _____

Date: _____ D.C. Model #: _____

Start Time: _____ Serial #: _____

Source: _____ of Tc-99m in 3 mL syringe

Assay Date	Assay Time	Elapsed Time (hr)	Measured Activity (mCi)	Expected Activity (mCi)	% Deviation
	8:02 AM	0.00		0	#DIV/0!
	10:30 AM	2.47		0.00	#DIV/0!
	12:00 PM	3.97		0.00	#DIV/0!
	2:00 PM	5.97		0.00	#DIV/0!
	8:00 AM	-0.03		0.00	#DIV/0!
	10:05 AM	2.05		0.00	#DIV/0!
	5:00 PM	8.97		0.00	#DIV/0!
	9:00 AM	0.97		0.00	#DIV/0!
	12:00 PM	3.97		0.00	#DIV/0!
	4:00 PM	7.97		0.00	#DIV/0!
	10:00 AM	1.97		0.00	#DIV/0!

All deviations of the assayed values must be within 10% of the expected values.

Instrument Linearity Test Result: **#DIV/0!**

Performed by: _____

Reviewed by: _____

Site Technologist

Radiation Safety Officer