LAB EQUIPMENT DECONTAMINATION FORM

< PLEASE COMPLETE & DISPLAY THIS FORM ON EQUIPMENT >

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| OWNER / CUSTODIAN OF EQUIPMENT: | BUILDING /ROOM LOCATION: |
| EQUIPMENT MODEL NAME OR #: | UNIT SERIAL #: |
| EQUIPMENT DESCRIPTION: |
| RESPONSIBLE PERSON TO BE AVAILABLE ON DATE OF SERVICE FOR QUESTIONS, ETC.:(name) (room/office #) (phone #) |

 *IMPORTANT: ALL EQUIPMENT SURFACES (INCL. top, sides, back) and areas behind and under the*

 *unit must be 1) cleaned and free of dirt, lab debris, residue, etc. and 2) disinfected/*

 *decontaminated if used with hazardous materials. See instructions on back of form.*

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|  □ Biological Materials □ N/A |
| This unit was disinfected by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(name) at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (phone #) on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (date) prior to service call or move. |
|  Disinfection agents/methods used: |
|  □ Radioactive Materials □ N/A |
| This unit was surveyed by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(name)  at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (phone #) on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (date) and found to be clean prior to service call or move, including WIPE TEST for radioactive contamination. |
|  Radiation-clearing agents/methods used: |
|  □ Hazardous Chemicals □ N/A  |
| This unit was cleaned by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(name)  at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (phone #) on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (date) and was found to be residue-free prior to service call or move. |
|  Chemical deactivation agents/methods used: |
|  □ Hazard-Free  |
| To the best of my knowledge, I certify that this lab has not used this unit with  biological agents, chemicals or radioactive materials, and that it was cleaned with  detergent on\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(date) prior to service call or move. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (phone #)  |

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|  Instructions for Lab Personnel 1. USE THIS FORM WHEN:* Lab equipment needs to be certified or serviced by technicians, or by Facilities staff.
* Lab equipment requires relocation or transport by VT movers, hired movers or VT Surplus.

2. ACTIONS TO TAKE:* Clean all dirty equipment surfaces that you can access with a detergent solution.
* Disinfect/ decontaminate accessible inner and outer surfaces according to hazards present.
* Clean and disinfect/decontaminate the area around the unit, if needed.

3. WHEN YOU CAN’T MOVE HEAVY EQUIPMENT TO CLEAN AROUND IT:* Be present when service providers/movers arrive and ask them to reposition the unit.
* Clean/decon equipment surfaces and floor area that become accessible after unit is moved.

4. COMPLETING THE FORM* Fill out all required sections (1st block) and all applicable sections (2nd block) of this form after cleaning/decontamination is complete.
* Attach completed form to the equipment*, and keep a copy with your equipment’s service records.*

5. PROCEDURES FOR SPECIFIC HAZARDS:Chemicals -- Deactivate all hazardous chemicals by appropriate methods, esp. mutagens, corrosives, toxics, mercury or other metals. Biological Agents -- Use an appropriate disinfectant for the full contact time. Radioactive Materials -- Decontaminate using the appropriate methods. *Equipment must be wipe tested by the person performing the decontamination, and found free of radioactive contamination.*6. IMPORTANT: * Equipment lacking a completed, attached form will not be serviced or transported.
* In addition, equipment displaying a Decontamination Form will not be serviced or transported if it is found to be in a questionable state of cleanliness. Service providers/movers can suspend their activity until such time as the unit and/or the area around the unit has been sufficiently cleaned and decontaminated/disinfected.

Instructions for Service Providers/Movers/Surplus Property1. When moving equipment:
* Put on PPE and reposition large or heavy units, if necessary, so lab workers can finish cleaning.
* Check that Decontamination Form for the equipment is present and completely filled out.
* Check that equipment, equipment location, & your work area are clean and free of hazards before moving the equipment.
* Keep the Decon Form and attach it to your work order documents or Surplus Property Report.
* Wear appropriate PPE when handling/ moving equipment (minimum: disposable gloves).
1. Report any problems to your supervisor and/or the responsible party listed on the form; do not proceed with the work order until the situation has been corrected.
2. In the unlikely event that tools or moving equipment come into direct contact with hazardous materials in the lab, ask lab personnel to apply appropriate disinfecting/decontaminating agents.
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