Equipment Decontamination Certificate

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| **Equipment Details** |  |
| **Manufacturer** |  |
| **Model and Serial no** |  |
| **Room No** |  |
| **Building** |  |

**IMPORTANT**

It is the responsibility of owners to ensure that equipment to be left/relocated/disposed of is, so far as is reasonably practicable, in a clean and ‘safe’ condition, i.e. free from Biological (including GM), Chemical and Radiological contamination.

Please complete Section 1,2,or 3 below as appropriate.

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| 1. The equipment **has not** been exposed to micro-organisms, clinical material, radioisotopes or hazardous chemicals. | |
| Signed:(User) | Date: |
|  | |
| 2. The equipment **has** been exposed to micro-organisms / clinical material / radioisotopes / hazardous chemicals\* and appropriate decontamination has been carried out.  \* delete as appropriate | |
| Signed:(User) | Date: |
|  | |
| 3. Complete decontamination cannot be achieved. | |
| Nature of residual contamination: | |
| Please take the following precautions when handling/moving: | |
| Signed:(User) | Date: |
| Contact the person below if you have any queries regarding the content of this certificate. | |

|  |  |
| --- | --- |
| Name (please print clearly): |  |
| Signature: |  |
| Date: |  |
| Role: |  |