**Laboratory Equipment Decontamination**

All equipment must be appropriately cleaned prior to disposal or relocation by general handlers

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| --- |
| GENERAL EQUIPMENT INFORMATION |
| Click or tap here to enter text. | Click or tap here to enter text. |
| Building & Room Number | Equipment Description |
| Click or tap here to enter text. | Click or tap here to enter text. |
| Manufacturer, Model #, Serial # | FIU ID # |
|  |  |
| MATERIALS/CHEMICALS/AGENTS USE INFORMATION |
| [ ] Has never been used with radioactive materials, chemicals, or biological agents |
| [ ] Does not contain a laser |
| [ ] Has been used with the following materials: |
|  | [ ] Radioactive Materials (list isotopes used): |
|  | Click or tap here to enter text. |
|  | Click or tap to enter a date.      | Click or tap here to enter text. |
|  | Date Radioactive Materials Removed | Certified by R.S.O |
|  | [ ] Chemicals (list high risk chemicals, carcinogens, water/air reactive, poison, etc.): |
|  | Click or tap here to enter text. |
|  | [ ] Biological Agent (list biological agents used) |
|  | Click or tap here to enter text. |
| The above named equipment has been cleaned with | Click or tap here to enter text. | , |
| which is suitable for (*describe process and agent used below*) deactivating/removing/disinfecting the hazardous materials. |
| Process and agent description: | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. |
| Name and Title of Person Doing Cleaning | Signature and Date |
| Click or tap here to enter text. | Click or tap here to enter text. |
| Principal Investigator Name | Principal Investigator Signature |
| Click or tap here to enter text. | Click or tap here to enter text. |
| Title | Department |
| Click or tap here to enter text. | Click or tap here to enter text. |
| EH&S Representative and Title | Signature and Date |