Laboratory decontamination and area clearance form

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| --- | --- | --- | --- |
| School |  | Building  |  |
| Room number |  |
| Please tick and complete the appropriate sections:  |
| 1. This laboratory has not been used for any purposed involving hazardous substances | [ ]  |
| 2. This laboratory has been used with the following hazardous substances and actions have been taken to decontaminate the area are detailed below  | [ ]  |
|  | Details | Action taken to decontaminate  |
| Biological material |  |  |
| Hazardous Chemical |  |  |
| Radiation | Please specify isotopes:  | See separate decontamination plan for unsealed source laboratories |
| 3. All equipment has been cleared from the laboratory  | [ ]  |
| 4. It has been agreed with E&F that the equipment listed below can remain within the room.  |  |
| Microbiological safety cabinet | [ ]  | Has this been decontaminated by fumigation? | [ ]  YES |
| [ ]  NO |
| If no please detail materials use in cabinet and action taken to decontaminate |  |
| Fume cupboard  |  | Action taken to decontaminate: |
| Other equipment  | Name | Action taken to decontaminate : |
| Sinks – please confirm that all non-transparent sink traps have been removed and checked for foreign objects and objects removed | [ ]  |
| 5. Complete decontamination of some aspects of the fabric, services or fixtures cannot be practicably achieved and some residual contamination may remain | [ ]  |
| Detail aspects and nature of residual contamination: |  |
| Declaration  |
| I confirm the details are correct (person in charge of laboratory) |
| Signed | Print name | Date |
|  |  |  |