# **Laboratory or Equipment Decontamination Certification**

1. I certify that the rooms or equipment listed below, previously used by my laboratory, have been emptied of biological and chemical materials: **Equipment** 

# 2. DECONTAMINATED

The surfaces of these rooms/equipment have been decontaminated (if equipment: inside and outside) with: (specify decontaminants and percentages, (i.e. 70% Ethanol, if 10% bleach is used, it must be freshly made up).

## 3. CHEMICALS

All chemicals contained within the rooms or equipment have been removed or drained and collected for proper disposal (including, but not limited to:

- Oil If the equipment contains a pump or other oil reservoir, oil must be drained and collected as Hazardous Waste in the laboratory's Satellite Accumulation Area. Contact EHS for assistance.
- Mercury If there is a thermometer or other device inside or associated with the equipment or space the device must be removed and collected as Hazardous Waste in the laboratory's Satellite Accumulation Area. Contact EHS for assistance.
- Refrigerant Gas If the equipment involved cooling and relied on refrigerant gas, this gas must be removed prior to disposal. Facilities Management must be contacted as only licensed mechanics can perform this service.
- Lead Shielding If the equipment used lead as a shielding agent, this material must be removed prior to disposal. Contact EHS to assist in lead removal.

YES NO N/A

All chemicals contained within the rooms or equipment have been removed or drained and collected for proper disposal

# 4. RADIOACTIVE MATERIAL

YES	NO	N/A	If the space or equipment contained or was used with any radioactive material (isotopes, sealed sources, etc.), the laboratory per-
ILO			sonnel have decontaminated the area and equipment. Radiation Safety has been contacted, has surveyed the equipment, and has
			certified it free of detectable radioactive contamination and arranged for the removal of any lead shielding.

<sup>\*</sup> Complete a Radiological Equipment Release Survey Request.

#### 5. SINK TRAPS

YES	NO	N/A	I
			All sink traps (including those in Fume hoods) have been bleached and flushed with water (use 1 cup of concentrated bleach, wait
			20 minutes, then flush thoroughly with water).
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#### 6. FLUID

YES NO N/A

Does equipment contain fluid (water bath, antifreeze, etc.)?

## **OTHER PIs & CO-PIs**

Note: All BU Pls, Co-Pls and associated department Chairs must sign this form.

Last Name First Name Phone Ext. Date

Department Building & Room Number Decontaminated By Principal Investigator

Signature Date

Please return/fax completed form to Environmental Health and Safety **BMC/BUMC:** Fuller Building, 4th Fl (M-470), fax: 617-358-7842

CRC: 704 Comm. Ave., 2nd Fl, fax: 617-353-5646

