Southwest Medical Ltd

EQUIPMENT DECONTAMINATION FORM

It is a Health and Safety requirement that this form be completed when any handling of equipment is required for the purposes of inspection, servicing, repair or disposal (Health & Safety at Work Act). This form is a declaration that the equipment has been decontaminated, and is deemed safe for workshop personnel to work on. Where an item of equipment has not been exposed to any hazardous materials a negative return is required for equipment that is being sent away or disposed of. Please note it is illegal to knowingly send contaminated items through the postal service.

Custo	mer:			
Item:			Manufacturer:	
Serial	No:		Model:	
1. Has the equipment been exposed to any hazardous materials? YES NO If YES, please tick relevant box and specify:				
YES		Blood, body fluids, respired gases, pathological	ogical samples:	
YES		Other biohazards:		
YES		Chemicals or substances hazardous to health:		
YES		Other hazards:		
2. Has the equipment been cleaned and decontaminated? If YES, then how? General purpose detergent High level disinfectant wipes Other. Please specify If NO, give reason:				
I hereby certify that appropriate decontamination procedures have been carried out on the above equipment				
Name: Please print)			Signed	
Position Held:			Date	

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