SAFETY INSPECTION FORM FOR LABORATORY EQUIPMENT

Please Post On Applicable Equipment

The equipment is being removed for (check one):
☐ Disposal  ☐ Relocation  ☐ Repair  ☐ Storage

Type of Equipment: ____________________________ Building: ________ Room: ________

Institution (circle one): BWH   DFCI

Please indicate whether the following materials were used on or in the equipment:
☐ Biohazardous Material(s)
☐ Hazardous Chemical(s)  OR  ☐ Not Applicable
☐ Radioactive Material(s)

If one or more of the referenced materials were used on or in the equipment, ensure the equipment was:
☐ Disinfected using (check one):
☐ 2% Wescodyne  ☐ 10% bleach  ☐ OTHER: ____________________________

☐ Fully monitored for radioactive materials (inside and out, whenever possible), has been decontaminated, and is not radioactive.

☐ Free of hazardous regulated materials such as lead and asbestos.

☐ Cleared of all hazardous warning labels including biohazard and radiation symbols.

☐ If an incubator, the jacket has been drained and the CO\textsubscript{2} disconnected.

☐ If a refrigerator or freezer, contents have been removed or packed tightly.

I CERTIFY THAT THE EQUIPMENT DOES NOT CONTAIN HAZARDOUS CHEMICALS OR HAZARDOUS MATERIALS EXCEPT FREON, IF APPLICABLE.

Name: ____________________________ Date: __________________

Do Not Use This Equipment Again!

Once all of the above procedure have been completed and checked off, call the Environmental Health and Safety (EH&S) Office at 617-432-2762, Monday - Friday 8:30 a.m. - 4:30 p.m., to request an inspection.

EH&S Representative: ____________________________ Date: __________________

Once this form has been completed, lab personnel or equipment owner must:

✓ Call Operations Center at 617-432-1901 to arrange for FREON removal, equipment relocation, repair, or storage.

✓ Call Amanda Moore-Owens at 617-432-5704 to arrange for equipment disposal.

Facility Management Representative: ____________________________ Date: __________________

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