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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **QS006: CENTRIFUGE OR ROTOR DECOMMISSIONING CHECKLIST** | | | | | | | | | | | | | | | | | | | |
| **Room No.** |  | | | **Building name:** | |  | | | **Address:** | | |  | | | | | | | |
| **Responsible Person:** | | |  | | | | | | **Job Title:** | | |  | | | | | | | |
| **Item type:** | |  | | | | **Item description:** | *Provide more information* | | | | | | **Asset No.:** | | *Provide asset / serial number* | | | | |
|  | | | | | | | | | | | | | |  | | | | | |
| **Actions taken:** | | | | | | | | | | | | | | **Completed:** | | | **Signature:** | | **Date:** |
| All chemicals and biological materials have been removed | | | | | | | | | | | | | |  | | |  | |  |
| All hazard warning signs have been removed from the door, sides and internally | | | | | | | | | | | | | |  | | |  | |  |
| Centrifuge or Rotor completely cleaned and disinfected | | | | | | | | | | | | | |  | | |  | |  |
| “Safe for disposal” sign / note applied to centrifuge | | | | | | | | | | | | | |  | | |  | |  |
| Confirm that centrifuge or Rotor has been left in a condition such that it is safe for personnel to remove it without taken precautions against exposure to any chemical, biological, radioactive or other agents. | | | | | | | | | | | | | |  | | |  | |  |
| Other (please detail): | | | | |  | | | | | | | | |  | | |  | |  |
|  | | | | | | | | | | | | | | | | | | | |
| **Full Name (PRINT):** | | |  | | | | | **Signature:** | |  | | | | | | **Date:** | |  | |
| **University:** | | |  | | | | | **Unit / Department:** | | |  | | | | | | | | |