

# Equipment Decontamination Form

## 1.0 – Location of Equipment

<b>Department</b>	
<b>Principal Investigator (PI)</b>	
<b>PI Phone</b>	
<b>PI Email</b>	
<b>Lab Building and Room #</b>	

## 2.0 – Equipment Information [Use a separate form for each piece of equipment]

**Note:** This form should be used for all equipment as defined in the Decommissioning policy (*i.e.*, centrifuge, water bath, incubator, freezer, refrigerator, biological safety cabinet\*, chemical fume hood\*, laser, X-ray, etc.

<b>Equipment Type</b>	
<b>Manufacturer / Model # / Serial #</b>	
<b>Reason for Disposal</b>	

\*Call EH&S for additional requirements.

## 3.0 – Equipment Transfer Type

Surplus          Another Institution          Maintenance          Another Lab Assigned to Same PI  
 Another PI/Department Room (List Building & Room):

## 4.0 – Decontamination Status [Check Option 1 or Option 2]

Option 1: This Equipment has never been in contact with biological, chemical, radioactive and/or other hazardous materials. (Proceed to 5.0)

Option 2: This equipment has had prior contact with biological, chemical, and/or radioactive materials and/or has contained a radioactive source, X-ray tube, or laser.

**Note:** All equipment inside laboratories restricted for unsealed radioactive material use must be surveyed by Radiation Safety Staff before the equipment leave the laboratory.

Below, indicate the type of potential contamination and describe how the equipment was thoroughly cleaned and decontaminated:

Contamination/Equipment	Yes	No	Describe Decontamination Method
Hazardous Chemicals			
Biohazard/Infectious Materials			
Equipment in direct contact with Unsealed Radioactive Materials (RAM)*			
Other equipment inside a lab where Unsealed RAM* was used			
Radioactive Sealed or Unsealed Source*			Contact Radiation Safety (803) 777-7530
X-Ray Machine *			Contact Radiation Safety (803) 777-7530
Class 3B and 4 Laser*			Contact Radiation Safety (803) 777-7530

\*If **Yes**, signature of USC’s Radiation Safety Officer is required.

“I certify that all RAM contamination and/or sources have been removed or locked out from the equipment described in Section 2.0”

\_\_\_\_\_  
(Bryan Bagg, RSO)

\_\_\_\_\_  
Date

**5.0 – Authorization**

“I certify that I have indicated all sources of potential contamination and that all equipment has been cleaned and/or decontaminated following the procedures indicated above to remove this contamination.”

This section must be completed by the individual completing the equipment decontamination:

Name (Print):	Title:
Signature:	Date:
Office/Lab Phone:	Email:

“I certify that I am the Principal Investigator (PI) or equipment owner and, to the best of my knowledge, the information recorded on this form is complete and accurate. I further certify that the person completing the decontamination as indicated above has been adequately trained and was provided with the appropriate personal protective equipment to perform the decontamination. This equipment is now safe for removal from my laboratory and does not pose a risk to the receiver.

This section must be completed by the Principal Investigator or Equipment Owner:

Name (Print):	Title:
Signature:	Date:

FOR PROPERTY TRANSFERS OR SURPLUS PICK-UP:

SUBMIT A SIGNED COPY OF THIS FORM TO THE RECEIVING ENTITY.

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Environmental Health & Safety (EH&S) is not responsible for ensuring the decontamination of any equipment or furniture. If you have questions about this policy or need guidance on proper decontamination methods or requirements, please contact the [EH&S Office of Research Safety](#). It is the equipment owner’s responsibility to ensure the proper procedures are followed according to USC policies prior to the release of laboratory equipment to any receiving entity.