REQUIREMENTS FOR LABORATORY EQUIPMENT DECONTAMINATION

EQUIPMENT USED TO PROCESS OR STORE RADIOISOTOPES

A thorough radiation survey of all accessible surfaces must be performed with an appropriate instrument. If radioactive contamination is detected, the equipment must be cleaned with small amounts of warm detergent water to avoid splash. Blot dry with paper towels. Commercial radiation decontamination solutions (Radiac Wash) containing chelating agents may be helpful. Resurvey to assure contamination has been removed to less than 100 counts per minute per 100 cm². If contamination persists or you have other questions, contact the Radiation and Chemical Hygiene Safety Officer, Starla Tudor at ext. 8885.

EQUIPMENT USED TO PROCESS OR STORE CHEMICALS

Safely remove, drain, or discharge chemicals from the equipment. Collect the material for reuse or for hazardous waste disposal. If applicable, use an inert gas or liquid to purge or rinse out chemical residues. In some cases, rinsate will need to be disposed of as hazardous waste as well. Call the Radiation Safety Officer, Starla Tudor at ext. 8885 with questions regarding hazardous waste disposal of chemical and/or rinsate.

Contaminated refrigerators, ovens and other equipment with non-permeable surfaces must be decontaminated by scrubbing with warm soapy water. Call the Environmental Health and Safety Office, at ext. 2226, for more specific information about decontamination.

Before maintenance personnel work inside a fume hood, the fume hood user must remove all containers from the fume hood and thoroughly wash interior surfaces with warm, soapy water.

EQUIPMENT USED TO PROCESS OR STORE BIOLOGICAL MATERIAL

Remove biological material from the equipment. Clean the equipment with warm, soapy water and scrub as necessary. Sanitize with a 1:10 bleach solution. After 10 minutes contact time, rinse metal surfaces as bleach is corrosive. For biological safety cabinets, call EH&S at 2226 to schedule decontamination procedures. If you have other questions, contact the Radiation Safety Officer, Starla Tudor at ext. 8885.

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<th>RESOURCES</th>
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<td>For more information contact the EH&amp;S offices.</td>
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Laboratoryequipmentdecon.oct2011
UNIVERSITY OF SAN DIEGO  
NOTICE OF LABORATORY EQUIPMENT DECONTAMINATION  
ENVIRONMENTAL HEALTH AND SAFETY OFFICE

Instructions: A laboratory employee knowledgeable of the hazardous materials used in the equipment/fume hood must complete this form and tape it to the equipment or to the face of the fume hood.

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<tr>
<th>Contact</th>
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<tr>
<td>Department</td>
<td>Building/Room</td>
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**EQUIPMENT**

The following equipment was decontaminated according to guidelines provided by Environmental Health and Safety:

- Type of equipment: ____________________________________________
- Location of Equipment: _________________________________________

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**FUME HOODS**

The following actions were taken to prepare the fume hood for maintenance or repair:

- All containers and apparatus removed from the interior and top of the fume hood. All residue cleaned from walls, floors, and sash of the fume hood. (Required for work on the interior of the fume hood, e.g., baffles, lights, or sash mechanism.)
- Stop all experiments in the hood. All containers in the hood must be capped or sealed. (Required for work on the duct work, fans, and exhaust stacks.)
- Obstructions have been removed from around the fume hood to allow access. (Required for work on the interior or outside of the fume hood.)

**NOTE:**

The fume hood must not be used after cleaning until Facilities Management has completed the maintenance/repair work. If necessary to prevent its use, contact Facilities Management at ext. 4250 to have the fume hood locked until maintenance or repair is complete.

**HAZARDS**

To the best of my knowledge, the following hazardous materials are/were used in the equipment/fume hood:

- □ Biohazards
- □ Hazardous Chemicals
- □ Radioactive Materials
- □ Perchloric Acid

**SIGNATURE**

I have prepared the equipment or fume hood according to guidelines provided by the Environmental Health and Safety Office.

Name ________________________________ Phone Number ________________________________

Signature ____________________________________________ Date ___________________________