



Appendix 1

DECLARATION OF CONTAMINATION STATUS

Prior to the Inspection, Servicing, Repair or Return of Medical and Laboratory Equipment.

Customer

Address

Tel No

Fax No

Instrument Type

Serial Number

Complete section A / C and if applicable complete all of section B, providing further information as requested or appropriate.

A. Has this instrument and its accessories been used in any invasive procedure or been in contact with blood, other body fluids, respired gases or pathological samples?

YES/NO If **YES** please complete section B / If **NO** please proceed to section C

B. This instrument and its accessories have been exposed internally or externally to hazardous material as indicated below.

YES/NO Blood, body fluids, respired gases, pathological samples, other biohazards.

YES/NO Radiation, chemicals or substances hazardous to health.

YES/NO Other hazards - if YES please specify.

C. Has the instrument and its accessories been cleaned / decontaminated and suitably prepared for safe handling/transportation?

YES/NO If YES please indicate the methods and materials used for decontamination.

If the instrument and its accessories could not be decontaminated please state the reasons why.

I declare that I have taken all reasonable steps to ensure the accuracy of the above information, in accordance with MHRA DB 2006(05)

Authorised signature

Name (printed)

Position

Date

Please note that instrumentation will not be accepted for servicing or return until this form is completed fully. Instrumentation that has not been cleaned sufficiently or decontaminated may be subject to additional charges.