

LABORATORY DECOMMISSIONING CHECKLIST

This checklist is to be completed by the Principal Investigator (PI)/Responsible Person of the lab that is being decommissioned or by their designee. Environmental Health and Safety (EHS) will use the completed checklist during the laboratory decommissioning inspection to verify that all hazards have been removed from the laboratory and/or that ownership of remaining hazards has been appropriately transferred to another party. This process should be started at least three months before vacating the chemical-use room/laboratory to allow ample time to dispose of all materials properly.

Upon completion of a successful decommissioning inspection, you will be issued a Laboratory

Decon	nmissioning Clearance Authorization.			,	
GENEI	RAL INFORMATION				
Principal Investigator (PI)/Responsible Person Department Email address Lab contact (if other than PI) Lab contact's email address		Campus			
		Building name and number			
		Room number(s)			
		Reason for decommissioning (checommissioning (ch	w lab		
		Renovation/construction/remed	liation	/abat	ement
No.	Description		Yes	No	N/A
1.	If radioactive material and/or x-ray produced Texas A&M's Radiation Safety was contactompleted.	•	0	0	0
2.	If a laser was present or used in the lab, Texas A&M's Radiation Safety was contacted and a Laser Permit Amendment form has been completed.		0	0	0
3.	If biological material was present or used contacted and a closeout survey complete	•	0	0	0

No.	Desc	ription	Yes	No	N/A
4.	Abar Enfo	ontrolled substances have been discarded or relocated appropriately. Indonment of a controlled substance is a violation of the Drug Incernent Agency's (DEA) requirements. (Note: Special procedures may be Iried by the DEA and by the Food and Drug Administration.)	0	0	0
5.	refrig	nemical compounds, reagents, and samples were removed from gerators, freezers, cold rooms, storage rooms, closets, etc., including mon areas. In shared laboratories, all PIs/Responsible Persons must agree what is disposed, transferred, and/or left behind.	0	0	0
	5.a	All chemicals targeted for hazardous waste disposal were removed by following EHS guidelines. <i>Under no circumstances may any hazardous chemical be disposed of down drains or into regular trash receptacles.</i>	0	0	0
	5.b	Usable chemicals were transferred to another party in your department who took charge of them. The receiving party must be a signatory to the transfer (see <i>Laboratory Material Transfer Form</i>) and will thereafter be responsible for proper storage, usage, and disposal of the materials.	0	0	0
	5.c	Chemicals and samples that will be transferred to a laboratory at another location on the Texas A&M University campus or to an off-campus location have been appropriately packaged for transfer. EHS and/or the department representative trained in hazmat shipping have been consulted and, when necessary, have authorized the transfer. Contact EHS to determine who your department representative is.	0	0	0
6.	All gl	assware was cleaned and packed according to Departmental instruction.	\circ	\circ	0
	6.a	All non-contaminated broken glassware was placed in a lined, sturdy box that was taped shut, labeled "BROKEN GLASS," and placed in the dumpster for regular trash disposal.	0	0	0
	6.b	Broken glassware that was contaminated has been decontaminated as appropriate for the hazard prior to disposal in the dumpster and/or has been disposed as per Office of Biosafety or EHS guidelines.	0	0	0
7.	Shar	ps have been removed and appropriately disposed.			
	7.a	Non-biohazardous sharps were collected in either a sturdy, puncture resistant container and encapsulated, or in a purchased sharps disposal container (defaced to remove the biohazard label) with a locking lid. The sealed container was placed in the dumpster for proper disposal.	0	0	0
	7.b	Sharps (needles, scalpel blades razor blades, broken glass, pipette tips, Pasteur pipettes, etc.) contaminated with biohazardous materials were disposed per Office of Biosafety guidelines.	0	0	0
8.		ompressed gas cylinders were returned to suppliers. If cylinders are non- nable, EHS was contacted for removal.	0	0	0

No.	Description		No	N/A				
9.	All laboratory equipment (fume hoods, biological safety cabinets, refrigerators, incubators, ovens, etc.) and areas where chemicals or biological agents were used or stored (e.g., cabinets, shelves, benchtops, etc.) were cleaned or decontaminated with soap and water, a 5% calcium or sodium bicarbonate wash, 10% bleach, or another approved disinfectant, as appropriate for the respective chemical and/or biological agent(s) used.	0	0	0				
	9.a If the Biological Safety Cabinet will be relocated, it was decontaminated per the Office of Biosafety's requirements.	0	\circ	0				
	9.b All trash and debris have been removed from floors, bench tops, cabinets, drawers, and fume hoods.	0	0	0				
10.	 Prior to discarding laboratory equipment, the following items were removed: capacitors or transformers (in high-voltage generating equipment) mercury from lab apparatus mercury switches and thermometers refrigerant fluids containing chlorofluorocarbons (in freezers and refrigerators) radioactive sources and chemicals 		0	0				
11.	 The only items remaining are those requested by the new tenant and they are tagged with his/her name. 		0	0				
12.	No items or equipment have been left in the hallway.		0	\bigcirc				
13.	All emergency contact information and signage for specific hazards were removed.		0	0				
Comments:								
Signature, Principal Investigator Printed Name, Principal Investigator								
Date Building and Room Number		·(s)						

Signed form must be submitted to Department Head and to EHS via campus mail at MS 4472 or by e-mail to labsafety@tamu.edu.