

**U of M Decommissioning Form for Laboratories or Rooms**

*Where Chemical, Biological or Radioactive Materials; or where X-ray or open beam laser equipment, have been present, used or stored.*

*(NOTE: There is a separate U of M Decommissioning Form for Laboratory Equipment)*

1. This form is **REQUIRED** to be completed and submitted to EHS before a major renovation, repurposing of room for non-lab use or to close-out a lab and have the WHIP or other EHS provided signage removed. Scan and email form to [DECOMM@umanitoba.ca](mailto:DECOMM@umanitoba.ca)
2. Once received, EHS will schedule a time to inspect and sign off (please allow up to 2 weeks, if not indicated as urgent)

After obtaining EHS signature, the Requestor is responsible to fax form to Physical Plant 204 474-7547 Fort Garry or Bannatyne 204 789-3933.

Section A: Requestor		Section B: Location	
Requestor Name (Please Print):		Room	Building
Department:		Reason for request:	
Tel:		Is this part of a project or renovation? <input type="checkbox"/> Y <input type="checkbox"/> N	
Responsible User Name:		Physical Plant Coordinator OR Contractor Contact:	
Date requested:		Name:	Tel:
Date Required:			
Contact EHS at <a href="mailto:DECOMM@umanitoba.ca">DECOMM@umanitoba.ca</a> or (204 474-6970) for consultation. A site visit may identify specific hazards that require special attention.			
Date contacted EHS:			
Section C: Declaration To Be Completed by Responsible User/ Lab Staff knowledgeable with room			
Name (print): _____		Phone#: _____	
Site history - How many years of history do you have with this room? _____ If none, have you contacted and consulted with someone that has knowledge of the past use? <b>No</b> <input type="checkbox"/> , or <b>Yes</b> <input type="checkbox"/> If yes, who? _____			
ACTIONS Taken:			√ when completed
Chemical	Inventory - review your WHMIS inventory (in EHSA database or elsewhere), then:		
C1	Locate all items in inventory. <input type="checkbox"/>		
C2	All chemicals must be removed from the room: NOTE: The chemicals belong to the University, and may ONLY be transferred to another University lab location. Dispose of remaining chemicals according to UM Waste Disposal Chart for Laboratories. Contact EHS and complete a Hazardous Waste Removal Form. For more information, forms and instructions: <a href="http://umanitoba.ca/admin/vp_admin/risk_management/ehso/emanagement/haz_waste_forms.html">http://umanitoba.ca/admin/vp_admin/risk_management/ehso/emanagement/haz_waste_forms.html</a> <input type="checkbox"/>		
C3	Update inventory records <input type="checkbox"/>		
Chemical Contamination Declaration			
C4	Have any of the surfaces or remaining equipment been used with hazardous chemicals? <b>No</b> <input type="checkbox"/> , or <b>Yes and the hazardous chemicals have been decontaminated</b> <input type="checkbox"/>		
C5	Was perchloric acid used in the Fume Hood? <b>No</b> <input type="checkbox"/> , or <b>Yes</b> <input type="checkbox"/> contact EHS <input type="checkbox"/>		
Biosafety	Is this location listed on a Biosafety Permit? <input type="checkbox"/> If <b>No</b> <input type="checkbox"/> go to Radiation Section		
B1	IF <b>YES</b> , relocate any biological agents to another permitted location and update inventory and rooms as appropriate on EHSA database <input type="checkbox"/>		
B2	Decontaminate all wastes (by autoclaving or chemically as appropriate) and dispose as per U of M Biological Waste Disposal Chart <input type="checkbox"/>		
B3	Decontaminate all work surfaces and storage areas -decontamination must be done by someone on a current Biosafety Permit. Indicate disinfectant used: <input type="checkbox"/> 1/5 bleach with 30 min soaking <input type="checkbox"/> 70% ethanol with 30 min soaking <input type="checkbox"/> Other – specify type and concentration: <input type="checkbox"/>		
B4	After decontamination – remove Biohazard labels <input type="checkbox"/>		

ACTIONS Taken:		√ when completed
<b>Radiation</b>	<b>Radioisotopes</b> - Is this location listed on a Radioisotope Permit? If <b>No</b> <input type="checkbox"/> go to X-ray Equipment	
R1	If YES, relocate any radioactive materials to another permitted location and update inventory (gold sheets for open source) as appropriate OR arrange to transfer unwanted stock vials and sources to EHS.  Complete and attach a U of M Radioisotope Permit Decommissioning Form to remove room or cancel the permit entirely.  <b>Door signs and Radioisotope Permits may only be removed by Radiation Safety staff.</b>	<input type="checkbox"/>
R2	<b>X-ray Equipment</b> - Is there X-ray Equipment in this room? If <b>No</b> <input type="checkbox"/> go to Laser – Open Beam	
R3	If YES, relocate X-ray Equipment to another room (or decommission – use Decommissioning Lab Equipment Form) –  Before X-ray Equipment may be used in a new location, EHS must be informed to determine if leakage tests, permit amendments and/or notification of the province is required.  Email <a href="mailto:radsafe@umanitoba.ca">radsafe@umanitoba.ca</a> to indicate your actions and request an update to your permit if applicable  <b>Door signs and X-ray Permits may only be removed by Radiation Safety staff.</b>	<input type="checkbox"/>
R4	<b>Laser – Open Beam</b> - Is this room signed "Danger Laser? If <b>No</b> <input type="checkbox"/> go to Supplies and Lab Equipment	
R5	If YES, relocate laser to another room (or decommission – use Decommissioning Lab Equipment Form) – IMMEDIATELY email <a href="mailto:radsafe@umanitoba.ca">radsafe@umanitoba.ca</a> to inform EHS of the change of status related to the lasers.  All open beam laser must be registered in the EHS database. <b>Door signs may only be removed by Radiation Safety staff.</b>	<input type="checkbox"/>
<b>Supplies and Lab Equipment</b>		
S1	<i>Remove all lab supplies and equipment for room including items in drawers and cupboards and on shelves. Look under all fume hoods and sinks too!</i> Prior to moving or disposing of lab equipment - Complete U of M Decommissioning/Decontamination Form for <u>Laboratory Equipment</u> and submit to EHS. Prior to disposing of lab equipment, EHS will provide a 'green stickers'. Be sure to update capital assets as appropriate.	<input type="checkbox"/>
S2	<b>Inspect all areas for needles, razor blades, scalpel blades and broken glass.</b> Sharps must be disposed in a puncture proof container. Unwanted glassware and brittle plastic may be disposed in plastic bag lined cardboard boxes or commercial 'Broken Glass' boxes.	<input type="checkbox"/>
<b>Cleaning</b>		
Cn 1	<i>Remove all visible residues, standing liquids, loose particulate material from bench tops, shelves, cabinets (inside and outside), inside drawers and floors.</i>  At a minimum, wipe all accessible surfaces with mild detergent such as soap and water.	<input type="checkbox"/>
Cn 2	For fume hood refer to the Fume Hood Repair and Servicing Form <a href="http://umanitoba.ca/admin/vp_admin/risk_management/ehso/media/Fume_Hood_Repair_and_Servicing.pdf">http://umanitoba.ca/admin/vp_admin/risk_management/ehso/media/Fume_Hood_Repair_and_Servicing.pdf</a> <input type="checkbox"/> check if there is/are no fume hood(s) in the room	<input type="checkbox"/>
Cn 3	Place all general garbage in garbage or recycle as appropriate	<input type="checkbox"/>
Cn 4	Is it possible hazardous products (radiological, biological or chemical materials) may be present in the building systems? <input type="checkbox"/> Not applicable <input type="checkbox"/> fume hood ducts <input type="checkbox"/> drains/traps <input type="checkbox"/> other – specify:	<input type="checkbox"/>
<b>DECLARATION OF COMPLIANCE:</b> <span style="float: right;"><b>Signature confirms information in Section C is accurate:</b></span>		
_____ <b>Date</b>	_____ <b>Signature (name and phone number at the beginning of Section C)</b>	
<b>Section D: Reviewed by EHS</b>	<b>Hazard Decommissioning</b>	<b>EHSA records</b>
Name _____ Signature _____ Date _____	Chemical verified:  Biological verified:  Radiation verified:	EHSA registered equipment updated?  List Permit(s) to be updated:  WHIP to be updated?