LABORATORY CLEARANCE CHECKLIST

Laboratory/Shared Space Location(s): ______________________________________________

Prin. Investigator: __________________________________________ Date: ________________

Dept: _______________________________ Dept. Chair/Director________________________

Reason for Vacating Lab(s): ______________________________________________________

Location of New Lab (if applicable):______________________________________________

Hazardous Material Used in Laboratory or Shared Spaces (Check all that are applicable):

Chemicals
- DEA Controlled Substances
- Radioactive Material

Biological and Infectious Material:
- Select Agents
- Infectious Material
- Animal or Human Tissue
- Biological Toxins

Chemicals
Are any chemicals still in the lab or shared storage space?............
  If yes, are they properly labeled and secure?............
Were any chemicals transferred to another lab?................
  If yes, list PI and location(s): -

If yes, was the CHO notified?...........................

Were any chemicals transported off campus?........................
  If yes, indicate to whom and where in the comments.
Did persons involved in transport have DOT training?........

Have all DEA Controlled Substances been turned into the Director of LAR?................

Radioactive Materials
Has the Radiation Safety Office closed out the lab?................
Has the PI turned in the RSM, dosimeters, survey meters, protection equipment and shielding to the RSO?................

Biological and Infectious Material
Are there any biological/infectious materials or select agents still in the lab or shared storage space?................
  If yes, are they properly labeled and secure?............
Were any biological/infectious materials or select agents transferred to another lab?................
  If yes, list PI and location(s):

If yes, was the Biological Safety Officer notified?........

Were any biological, infectious, or select agents transported off campus?................

If yes, indicate to whom and where in the comments.
If yes, was the Biological Safety Officer notified?........
Did persons involved in transport have DOT training?........
Was infectious waste generated from the operation of the lab or shared space? .................................................................
  If yes, were biological/infectious wastes managed per the requirements of the Infectious Waste Management Guide?
Were human or animal tissues removed from preservatives? ........
  If infectious waste, was tissue disposed as such? ..............
  If not, was it sent to LAR? ........................................................

Laboratory Equipment and Surfaces
Have contaminated equipment and surfaces been decontaminated?
Has any lab equipment been turned over to ESPM? .................
  Were all hazardous materials removed from the equipment? ...................
  Was ESPM notified of the hazardous material removed? ....

Comments
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

Laboratory Exit Clearance Certification

I, as the principal investigator, certify that I, and my staff if applicable, have followed the WSU Exit Policy for the Closeout/Decommissioning of University Laboratories, such that all hazardous material and waste for which I am responsible have been removed from my laboratory and other associated use areas or is properly labeled and secured. All contaminated laboratory equipment and surfaces have been properly decontaminated.

Principal Investigator (signature/date): ____________________________________________

Dept. Chair or Director, if present (signature/date): ________________________________

Based on the certification above, this lab space assigned to the aforementioned principal investigator has been cleared of all biological, chemical, and radioactive material and is released for future use.

EHS Representative (signature/date): ____________________________________________