

LABORATORY CLOSEOUT CHECKLIST

Workspace to be vacated: Building _____ Rooms/Spaces: _____

Date area will be vacated: _____

Principal Investigator Name: _____ Department: _____

	OK	N/A	Initials
CHEMICALS			
Identify all chemicals for disposal	___	___	___
Label all containers with full chemical name(s)	___	___	___
Submit surplus chemicals to Re-Use Facility	___	___	___
Clean all laboratory surfaces, including hoods, refrigerators, and freezers	___	___	___
Confirm that all hazardous waste and surplus chemicals have been removed	___	___	___
If chemicals are in the inventory system, update records to include disposal information or reflect transfer to another laboratory	___	___	___
Transferred responsibility to: _____	___	___	___
CONTROLLED SUBSTANCES			
Contact Animal Welfare Services for proper disposal	___	___	___
GAS CYLINDERS			
Return to supplier or Science Stores, if appropriate	___	___	___
Identify contents of cylinder(s) even if "empty"	___	___	___
Submit surplus canisters to Re-Use Facility if appropriate	___	___	___
Transferred responsibility to: _____	___	___	___
ANIMAL and HUMAN TISSUE			
Dispose of tissue via incineration; contact EHS for waste pickup	___	___	___
Dispose of any chemical preservatives through EHS	___	___	___
Clean all refrigerators/freezers	___	___	___
Clean all equipment with appropriate disinfectant	___	___	___
Transferred responsibility to: _____	___	___	___
MICROORGANISMS and CULTURES			
Place waste in biohazard box for incineration; contact EHS for waste pickup	___	___	___
Clean all equipment, including biosafety cabinet, with freshly diluted 10% bleach	___	___	___
Transferred responsibility to: _____	___	___	___
RADIOACTIVE MATERIALS			
Package all surplus and waste radionuclides in approved and labeled waste containers	___	___	___
Complete radioactive waste cards and attach to containers	___	___	___
Identify any mixed hazards; call EHS if necessary	___	___	___
Contact EHS to arrange for pickup	___	___	___
Perform contamination survey, decontaminate and re-survey if necessary	___	___	___
Schedule closeout survey with EHS; arrange for a responsible person to be present	___	___	___
Remove all rad signs, stickers, postings, etc.	___	___	___

SAFETY AND RISK SERVICES

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With EHS approval, transfer inventory to: _____	—	—	—
Prepare rad materials for shipment to new location. Notify EHS two weeks prior to desired shipment date.	—	—	—
Return dosimeters and holders (if the authorization is being terminated)	—	—	—
Reassign radiation workers, if necessary	—	—	—
Return keys, if issued	—	—	—
EQUIPMENT and LAB FURNITURE			
Clean or decontaminate any equipment or furniture to be left in lab	—	—	—
Contact Biosafety Officer for scheduling biosafety cabinet fumigation, if applicable	—	—	—
Call EHS for disposal information regarding contaminated equipment or furniture	—	—	—
Identify any equipment containing PCBs to EHS	—	—	—
SHARED STORAGE AREAS			
Check all shared areas for hazardous materials	—	—	—
Label all materials in shared storage	—	—	—
Arrange for disposal to EHS or reassignment, as appropriate	—	—	—
Transferred responsibility to: _____	—	—	—
LAB INSPECTION			
Request an exit inspection by EHS	—	—	—

Department Clearance

Principal Investigator's or Responsible Party's Agreement

I certify that my staff and I have adequately cleaned out and decontaminated the laboratory area(s) I am responsible for.

Signature and Date: _____

Department Head/Designee

I am aware of the status of the lab(s) being vacated and I understand that I am responsible for the laboratory space and contents of the vacated lab space(s).

Signature and Date: _____

Environmental Health and Safety

An exit inspection was conducted, and was found satisfactory.

Signature and Date: _____

All parties should maintain a copy with signatures.