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**IRR'99 (19) - TESTING OF RADIATION PROTECTION INSTRUMENTS - CLEARANCE CERTIFICATE**

## DECLARATION OF CONTAMINATION STATUS

For use during the Testing or Repair of Radiation Protection Instruments.

*This document must accompany the instrument while in transit to and from Velindre Hospital.*

**Part 1. Delivery to Velindre Hospital.**

Customer

Contact

**Instrument Details**

*To be completed by the Customers authorised representative.  
 Tick box A if Applicable. Otherwise complete all parts of B, providing further information as required.*

**A.**  This instrument has not been used in any invasive procedure or been in contact with blood, or other body fluids, respired gases, pathological samples or unsealed radioactive sources. It has been cleaned in preparation for test or repair.

**B.** 1. Has this instrument been exposed internally or externally to hazardous materials as indicated below?

- YES/NO Blood, body fluids, respired gases, pathological samples.
- YES/NO Other Biohazards.
- YES/NO Unsealed radioactive sources.
- YES/NO Chemical or substances hazardous to health.
- YES/NO Other hazards.

2. Has the instrument been cleaned and decontaminated?  
 YES/NO Indicate method and materials used.

If the instrument could not be decontaminated please indicate why.  
  
Such instruments must not be returned/presented without the prior written agreement of the Radiation Protection Service.

3. Has the equipment/item been suitably prepared to ensure safe handling / transportation? YES/NO

I declare that I have taken all reasonable steps to ensure the accuracy of the above information, in accordance with HSG(93)26.

Authorised signature.

Address if different from that shown above.

Name (printed).

Position.

Telephone Number.

Date.

**Part 2. Return to Customer from Velindre Hospital.**

*To be completed by the Radiation Protection Service.*

The instrument has been tested in accordance with HSE guidelines and has not been in contact with any of the above contaminants whilst at Velindre Hospital. The instrument is being returned to the customer in a similar condition (3 above) and manner as used, by the customer, when transporting it to the Laboratory.

Name

Position

Signature

Date

