



BioConcept Pipette Care Order and Decontamination Form

Company: _____	Contact: _____
Department: _____	Tel: _____
Address: _____	E-Mail: _____
_____	Service Contract No.: _____ (if applicable)

Pipette Model	Serial Number	Decontaminated?	Standard (2 x 5)	ISO 8655 (3 x 10)	GLP/ GMP (2 x 3 x 10)	Needs Repair?	Comments/Defects
			Please tick the desired service:				
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Comments:

THE SECTION BELOW MUST BE COMPLETED IN ALL CASES

Please state that the pipettes have been decontaminated if they have been exposed to potentially hazardous substances. This includes any blood, serums or other body fluids, pathological specimens, carcinogens, toxins, hazardous chemicals or radioactive substances. If non, then state no.

The pipettes have been decontaminated. Please state by which method the pipettes have been decontaminated:

No, the pipettes have not been exposed to the above listed substances

I declare that the above information is correct and that, to the best of my knowledge, the pipettes detailed are free from contamination. I further confirm that a suitable and sufficient risk assessment has been carried out to ascertain the necessary process of decontamination required to support this statement.

I also agree to the following: If necessary the pipette will be repaired and all affected parts will be replaced. If the cost of repair are up to 150.- CHF for a single-channel pipette and 300.- CHF for a multi-channel or an electronic pipette the repair will be carried out without notice, if they are higher the repair will be carried out by agreement.

Name: _____ Position: _____
Date: _____ Signed: _____



BioConcept Pipette Care Pipette Decontamination Advice

BioConcept Pipette Care Health and Safety policy dictates that all reasonable precautions have been taken to ensure that pipettes serviced by its staff have been decontaminated and that a valid decontamination report is available for each pipette that we work with.

It is therefore essential that a decontamination report be completed for all instruments that are being serviced. This report should be completed even if the instrument has not been used with toxic or hazardous substances, as this will be our confirmation that our health and safety requirements have been met. The decontamination report should clearly state which substances the pipettes have been used with.

BioConcept Pipette Care works on the basis that management and staff from the laboratory where the equipment originated have a full understanding of their duty of care to protect our technicians from exposure to hazardous substances. In addition to this we require confirmation that necessary decontamination of pipettes has taken place with regard to the *categorization of biological agents according to hazard and categories of containment regulations 1995*. It is therefore required that the box on the statement of decontamination is ticked to confirm this.

The method of decontamination and confidence in the suitability and success of this method in eradicating contaminants should be as a result of a suitable and sufficient risk assessment having been conducted.

It is imperative that the serial number of every instrument to be serviced is noted on the statement (use additional sheets if necessary and attach to main sheet)

Particular attention should be paid to decontaminating pipettes that have been used with:

Blood or serums, body fluids, pathological specimens, carcinogens, toxins, hazardous chemicals or radioactive substances.

Decontamination of pipettes should be carried out prior to BioConcept Pipette Care staff working on your pipettes. In the case of pipettes used with radioactive substances, it is essential that you answer the question on pre-despatch testing of your instrument.

To comply with our health and safety policy, BioConcept Pipette Care will not be able to service any instruments that we do not have a satisfactory statement of decontamination for. You may use the form supplied by us, or use your own providing all necessary details are supplied.

If you are returning instruments for service to our workshop then a copy of the decontamination report should be included in the package. If your instruments are being serviced at an on-site clinic, then a completed report detailing all instruments must be handed to the Pipette Doctor technician before any work is commenced.

Please ensure that each pipette is accompanied by a valid decontamination statement to ensure that your pipette can be efficiently processed and returned to you without undue delay.

BioConcept is able to supply Sartorius Biocontrol decontamination liquid should you require it. Please contact BioConcept for details and pricing.

For questions concerning decontamination of your pipettes please contact: