

Fax to 327-6648  
For information, contact Dremund Powell  
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## MEHARRY MEDICAL COLLEGE

### Laboratory Closeout Notification

Department:

Lab Location: Bldg

Room(s)

Contact Person for Lab

Phone

Principal Investigator

Phone

Date estimated for moving out of lab

Reason for closeout (choose from drop-down list)

Date Ready for Final Survey

1. What biosafety level applies to the lab?

Biosafety Level 1

Biosafety level 2

Biosafety level 3

Don't know

2. Were radioactive materials used in the lab?

Yes

No

**If yes:**

- All radioactive materials and waste must be removed by the Radiation Safety Office. Call 6642.
- Large equipment that will be moved by the movers that are labeled with "Caution Radioactive Material" stickers must be emptied by lab personnel and surveyed for contamination by the Radiation Safety Office. Call 6642 to arrange the surveys.

3. Will freezers and/or refrigerators containing biological materials be moved by movers?

Yes

No

**If yes:**

- Potentially infectious materials (including all human or non-human primate material, including cell lines) must be removed from these items and moved appropriately by laboratory staff.

4. Will biological safety cabinets be moved? Yes No

**If yes:**

- The Research Safety Office must be contacted to determine whether the risk of release of potentially harmful materials exists before they are moved. Research Safety will determine whether or not the BSC must be decontaminated by an accredited field certifier PRIOR to the move. Call Dremund Powell at 6642.
- Biological safety cabinets must be recertified AFTER the move and PRIOR to any use in their new setting.

5. Were chemicals used in the lab? Yes No

**If yes:**

- All chemicals and chemical wastes must be moved or disposed of by the Research Safety Office. Call 6642.
- The movers will not move your chemicals. Make sure that you have the necessary equipment (including packing materials and carts) to safely transport your chemicals. Contact Dremund Powell at 6642 for assistance.

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I understand that the lab(s) listed above must be emptied of **ALL** hazardous materials, including chemicals, chemical wastes, radioactive materials, radioactive wastes, biological materials, biological wastes, sharps, and sharps containers through the appropriate procedures prior to vacating the lab(s).

**Signatures**

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Principal Investigator Date

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Department Chair or Designee Date