



## HAZARD EVALUATION QUESTIONNAIRE

To ensure the safety of our employees, QuickSlide® will not service or accept any equipment that has been in contact with ANY substance without a completed Hazard Evaluation Questionnaire. You must know all of the substances that have been in contact with the equipment before you complete this questionnaire. All samples must be removed from the instrument and all lines drained prior to shipment.

Attach this to the **outside** of the shipment and mark the RMA number clearly on the shipping container.

### Section 1: Equipment Information/Reason for Return

Equipment: \_\_\_\_\_ RMA#: \_\_\_\_\_

Serial Number: \_\_\_\_\_

Reason for Return: \_\_\_\_\_

### Section 2: Declaration of Materials

(To be completed by instrument user and approved by a Qualified Company Representative)

**Has this equipment been in contact with hazardous material?**       Y     N

Have any of the following substances been in contact with the equipment?

Radioactive	<input type="checkbox"/> Y	<input type="checkbox"/> N
Biohazardous (including blood or body fluids)	<input type="checkbox"/> Y	<input type="checkbox"/> N
Hazardous chemicals (attach SDS if applicable)	<input type="checkbox"/> Y	<input type="checkbox"/> N

Please fill in the information below for any substance (hazardous and non-hazardous) that has been in contact with this equipment. Use additional sheets as required.

Substance Name: \_\_\_\_\_

Was decontamination required?: \_\_\_\_\_

Describe the decontamination performed: \_\_\_\_\_

Is the equipment clear of contaminants?: \_\_\_\_\_

Describe hazards and list appropriate precautions to protect employees: \_\_\_\_\_

QuickSlide® reserves the right to refuse any machine that has been in contact with Radioactive or biohazardous materials for which technicians are not equipped.

### Section 3: Approval of Information

I have made reasonable inquiries and I have supplied accurate information on this questionnaire. I have not withheld any information.

\_\_\_\_\_  
Preparer's Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

Thank you for your cooperation.