

HOOD CLEANING DOCUMENTATION FORM

Documentation of : Laminar Air Flow Hood Disinfection,*
 Chemotherapy Spill Kit Location,** Filter Change,*** and Decontamination of Hood****

Area _____ Month _____ 19__

Day	Day 7-3P	Evening 3P-11P	Night 11P-7A	Spill kit Located	Decontamination Date	Pre-Filter Change	
						date	initials
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* **Laminar Air Flow Hood Disinfection** = each shift

** **Chemotherapy Spill Kit Location** = daily by 7a-3p shift

*** **Filter Change** = disposable pre-filter to be changed **monthly** by 7a-3p shift.

**** **Decontamination of Hood** = **weekly** (by the 7a-3p shift or whenever a spill occurs. Decontaminate with high ph soap cleaner, scrubbing with gauze, rinsing with distilled water and then disinfecting with 70% alcohol. (Biological Safety Cabinet only)

INSTRUCTIONS:

- 1 Initial in block when documentation is completed (except decontamination columns, need date).
2. Blank documentation forms may be found in file labeled "Hood Documentation Forms-blank."
3. Place completed forms in coordinator's mailbox