In accordance with Scottish Government guidance - CEL 43 (2009) *Safety of Health, Social Care, Estates and Facilities Equipment: NHS Board and Local Authority Responsibilities*

|  |  |
| --- | --- |
| **This certificate relates to:** | |
| Description of item: |  |
| Manufacturer: |  |
| Model name or catalogue code: |  |
| Serial, batch or Lot number: |  |
| Unique Device Identifier (UDI): |  |

|  |  |  |
| --- | --- | --- |
| **Contamination status:** | | |
|  | This item has **not** been used in an invasive procedure or been in contact with blood or other body fluids, or pathological samples. | |
|  | This item has been decontaminated. The method of decontamination was: | |
|  | |  |
|  | This item has **not** been decontaminated and is therefore a source for cross-contamination with associated risk of infection. | |

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| **Additional comments (optional):** |
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| **Note 1** | Defective equipment and devices should not be cleaned or dismantled before examination and testing has taken place. | | | |  |
| **Note 2** | Contaminated items should only be transported in accordance with *NHSScotland Guide to the Carriage of Dangerous Goods Regulations with respect to Used Medical Devices*: <https://www.nss.nhs.scot/publications/guide-to-the-carriage-of-dangerous-goods-guid-5006/> | | | |
| **Note 3** | This certificate should accompany the item and it should be accessible without opening the inner packaging. | | | |  |
| **This form was completed by:** | | | | | | | |
| Name: | | |  | Job title: |  | | |
| Organisation: | | |  | Telephone: |  | | |
| Signed: | | |  | Date: |  | | |