

CLEARANCE CERTIFICATE FOR INSPECTION, SERVICING OR REPAIR OF MEDICAL AND LABORATORY EQUIPMENT

To:

Model/description of equipment V1000 Foetal Heart Simulator

Serial No PRO1576A11

Other Distinguishing Marks Equipment number: 343920
Reference **SRS68812**

- * ☒ This equipment/item has not been used in an invasive procedure or been in contact with blood, other bodily fluids or pathological samples.
- * ☐ This equipment/item has been used in an invasive procedure or been in contact with blood, other bodily fluids or pathological samples.
- = ☒ This equipment/item has been cleaned – specify cleaning/disinfecting agent and extent of cleaning.

CLEANED WITH: Wipe used for Medical Devices

State nature of any possible residual hazard
N/A

Signature _____
Position held Clinical Technologist Date 12.06.2024

Ward/Dept. & Hospital Clinical Engineering, Level 5
Full Official Address Addenbrooke's Hospital
Hills Road
Cambridge, CB2 0QQ

Telephone No. 01223 245151

- * Please tick appropriate box
- = If you require advice on appropriate method of cleaning, please contact your Control of Infection Officer.

THIS FORM MUST BE USED BY ALL DEPARTMENTS:

- 1) when sending equipment for inspection, servicing or repair internally to any other department e.g. Instrument Laboratories
- 2) when sending equipment for inspection, servicing or repair to an outside manufacturer, contractor or supplier
- 3) prior to inspection within the user department by outside contractor or another internal department.