

# United Lincolnshire Hospitals NHS Trust

## Declaration of Contamination Status

**Prior to the inspection Servicing, Repair or Return of Medical and Laboratory Equipment**

To: Viamed Ltd  
Repairs Team SRS69025  
15 Station Road  
Cross Hills  
Keighley  
West Yorkshire  
BD20 7DT

Make and Description of Equipment:  
Viamed - V1000 Foetal Heart Simulator  
Model/Serial/Batch No:  
SN: PR065A33

Trust's Ref or Order No:

Contact Name:  
Telephone No:

**Tick box A if applicable. Otherwise complete all parts of B, providing further information as requested or appropriate.**

A. ☒ This equipment/item has not been used in any invasive procedure or been in contact with blood, other body fluids, respired gases, or pathological samples. It has been cleaned in preparation for inspection, servicing, repair or transportation.

B. 1. Has this equipment/item been exposed internally or externally to hazardous materials as indicated below ?

YES/☒ Blood, body fluids, respired gases,  
Pathology samples:

YES/☒ Other biohazards:

YES/☒ Chemicals or substances hazardous  
To health:

YES/☒ Other hazards:

2. Has this equipment/item been cleaned and decontaminated ?

☒ YES/☐ NO Indicate the methods and  
materials used: Sani-Cloth 70%

If the equipment/item could not be  
Decontaminated please indicate why:

Such equipment must not be returned/presented without the prior agreement of the recipient whose  
reference or contact name must be given above.

3. Has the equipment/item been suitably prepared to ensure safe handling/transportation?  
☒ YES/☐ NO

**I declare that I have taken all reasonable steps to ensure the accuracy of the above information, in accordance with HSG(93)26.**

Authorised signature *P Cannon*

Site Pilgrim Hospital Boston

Name(printed) Paige Cannon

Dept Clinical Engineering

Position Trainee Medical Engineering Technician

Tel No. 01205 445205

Date 14.2.2025