

Decontamination declaration
regarding hygienic safety of medical devices

MIKRONA+



For **return deliveries** or **repair work** on potentially contaminated parts with a risk of infection, a completed and signed decontamination declaration is required. This also applies to devices and components where areas and surfaces may be contaminated with bodily fluids or secretions.



The measures serve the personal protection of the employee.

Address:	_____	Responsible contact Person:	_____
	_____		_____
	_____	Reason for return:	_____
	_____		_____
Tel.:	_____		_____
E-Mail:	_____		_____
Description:	_____	Itemnumber:	_____
Serialnumber:	_____	Deliverynumber:	_____

We herewith confirm that:

- Attached medical device/s does **not** containing blood, or other contaminated body substances or liquids.
- Attached medical device/s is during use contaminated with blood or other body substances / liquids and according of applicable medical devices hygienic requirements of the manufacturers instructions it is disinfected, cleaned and sterilized.

Information on disinfection, cleaning and sterilization:

- Disinfection and cleaning was done manually
- Disinfection and cleaning was done by machine
- Steam sterilization (3 Min. at 134 °C / 15 Min. at 121 °C)
- Other procedure (please specify): _____

Information cleaning and disinfection on treatment unit:

- Treatment unit: - Suction system disinfected
 - Hygiene filter in rack and spittoon removed
 - Suction and drain hoses removed
 - Surfaces cleaned with wipe disinfection
 - Accessories cleaned and disinfected or sterilized

- Attached medical device /s could not be decontaminated!
Reason: _____

Date/Place

Mark

Signature

Attention: Printed documents are not covered by updating service !