Location (room # & Building): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Principal Investigator: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ e-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Space Description: □Laboratory □Shop □Chemical Storage Area □Mechanical Room □Other

Space Use (Check all that apply): □Hazardous Materials □Biological Waste □Lasers

□Hazardous Waste □Radioactive Materials □X-rays

**KEY: S=Satisfactory NI= Needs Improvement U=Unacceptable N/A = Not Applicable**

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| **LABORATORY WORK PRACTICES** | **S** | **NI** | **U** | **NA** | **COMMENTS** |
| 1.1 | There is access to the current UCCS Laboratory Safety ManualPlease post the sign provided with directions for accessing the online UCCS Lab Safety Manual |[ ] [ ] [ ] [ ]   |
| 1.2 | A copy of the laboratory specific safety plan (LSSP) is available and has been signed by everyone working in the lab |[ ] [ ] [ ] [ ]   |
| 1.3 | Standard Operating Procedures have been developed for specific processes unique to this laboratory |[ ] [ ] [ ] [ ]   |
| 1.4 | Workplace hazard assessment has been completed – This training was a part of the Fall 2015 refresher training – certain applications in the lab may lend themselves to this type of review |[ ] [ ] [ ] [ ]   |
| 1.5 | No smoking, food & beverages rules are posted and practiced.  |[ ] [ ] [ ] [ ]   |
| 1.6 | Food and beverages are not stored in the laboratory areas, refrigerators or in glassware that is also used for laboratory operations |[ ] [ ] [ ] [ ]   |
| 1.7 | Employees in this area ship materials (i.e. hazardous materials, biological materials, chemicals, dangerous goods, dry ice, research samples, or diagnostic specimens) off-site |[ ] [ ] [ ] [ ]   |
| 1.8 | Lab is secured when no one is present |[ ] [ ] [ ] [ ]   |

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| **GREEN LABS PRACTICES** | **S** | **NI** | **U** | **NA** | **COMMENTS** |
| 2.1 | Are refrigerator/freezer coils periodically defrosted and cleaned? |[ ] [ ] [ ] [ ]   |
| 2.2 | Does the labs hoods have sash height stickers |[ ] [ ] [ ] [ ]   |
| 2.3 | Do the occupancy sensors (for lighting –ventilation) work |[ ] [ ] [ ] [ ]   |
| 2.4 | Has the lab implemented any “green” procedures |[ ] [ ] [ ] [ ]   |

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| **HOUSEKEEPING** | **S** | **NI** | **U** | **NA** | **COMMENTS** |
| 3.1 | Laboratory and storage areas uncluttered and orderly (including bench top).  |[ ] [ ] [ ] [ ]   |
| 3.2 | Laboratory surfaces are cleaned; disinfected or decontaminated after work is performed.  |[ ] [ ] [ ] [ ]   |
| 3.3 | Glassware is free from cracks, chips, sharp edges and other defects.  |[ ] [ ] [ ] [ ]   |
| 3.4 | Heavy objects are confined to lower shelves.  |[ ] [ ] [ ] [ ]   |
| 3.5 | A hand-washing sink is present in the laboratory and stocked with hand soap and paper towels |[ ] [ ] [ ] [ ]   |
| 3.6 | All garbage is disposed of properly |[ ] [ ] [ ] [ ]   |
| 3.7 | Materials are compatible with shelving type |[ ] [ ] [ ] [ ]   |

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| **ELECTRICAL** | **S** | **NI** | **U** | **NA** | **COMMENTS** |
| 4.1 | Electrical cords are protected from damage and are in good repair (no loose plugs, broken insulation, etc.). IFC 605.5.3 |[ ] [ ] [ ] [ ]   |
| 4.2 | Extension cords are used only for temporary applications IFC 605.5. |[ ] [ ] [ ] [ ]   |
| 4.3 | Power strips are not daisy chained or connected to an extension cord |[ ] [ ] [ ] [ ]   |
| 4.4 | Electrical appliances are UL or FM approved and have not been altered in a manner that compromises the UL or FM approval. |[ ] [ ] [ ] [ ]   |
| 4.5 | Equipment and/or outlets are enclosed to protect against shock or electrocution. |[ ] [ ] [ ] [ ]   |
| 4.6 | All electrical outlets within 6’ of wet area have ground fault circuit interrupter NFPA 70.210.8(B)(5) |[ ] [ ] [ ] [ ]   |
| 4.7 | Three feet of clearance is maintained in front of electrical panels and breaker boxes; emergency shut-off controls to equipment are accessible. |[ ] [ ] [ ] [ ]   |
| 4.8 | Tools and equipment are in good repair and electrically grounded.  |[ ] [ ] [ ] [ ]   |
| 4.9 | Power strips in fume hood – Prudent Practices 2011, page 26 section 2.E.3 NFPA 45 |[ ] [ ] [ ] [ ]   |

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| **SAFETY EQUIPMENT – EMERGENCY PLANNING** | **S** | **NI** | **U** | **NA** | **COMMENTS** |
| 5.1 | First-aid supplies are readily available and clearly visible.  |[ ] [ ] [ ] [ ]   |
| 5.2 | Spill clean-up kit is stocked and readily available  |[ ] [ ] [ ] [ ]   |
| 5.3 | Safety showers and eye wash stations are located within 75' of all laboratories.  |[ ] [ ] [ ] [ ]   |
| 5.4 | Safety showers and eye wash stations are clearly labeled, and these areas are clear from obstruction.  |[ ] [ ] [ ] [ ]   |
| 5.5 | All showers and eye wash stations are clean, covers are replaced and they are in good working condition.  |[ ] [ ] [ ] [ ]   |
| 5.6 | Fire extinguishers are available and are the appropriate type for the hazard in the work area.  |[ ] [ ] [ ] [ ]   |
| 5.7 | Fire extinguisher(s) are accessible and have a current inspection tag |[ ] [ ] [ ] [ ]   |
| 5.8 | Fire doors are kept closed unless held open by alarm deactivating magnets |[ ] [ ] [ ] [ ]   |
| 5.9 | A clearance of 18 inches is present between stored items and fire sprinkler (a minimum 24 inches below ceiling in non-sprinkler areas) |[ ] [ ] [ ] [ ]   |
| 5.10 | All egress pathways are maintained and clear of obstructions |[ ] [ ] [ ] [ ]   |
| 5.11 | Floors are clean and dry. No slip, trip or fall hazards are present. |[ ] [ ] [ ] [ ]   |
| 5.12 | Suspended ceilings have all their ceiling tiles in place |[ ] [ ] [ ] [ ]   |
| 5.13 | If HF is present, then calcium gluconate is available and current |[ ] [ ] [ ] [ ]   |
| 5.14 | Telephones are labeled with emergency numbers.  |[ ] [ ] [ ] [ ]   |
| 5.15 | Campus emergency procedures are posted |[ ] [ ] [ ] [ ]   |
| 5.16 | Emergency assistance information is posted in lab |[ ] [ ] [ ] [ ]   |
| 5.17 | The lab has a designated assembly point for evacuationsEven though the lab has a small # of people assigned to it, it is a good idea to have an assembly location identified so that you can account for anyone who should have been in the lab at the time of the evacuation. |[ ] [ ] [ ] [ ]   |
| 5.18 | Do you have a protocol for securing experiments during an evacuation? (i.e. turning off burners, etc.) |[ ] [ ] [ ] [ ]   |

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| **ENGINEERING CONTROLS** | **S** | **NI** | **U** | **NA** | **COMMENTS** |
| 6.1 | Chemical fume hood is certified or inspected on a periodic basis |[ ] [ ] [ ] [ ]   |
| 6.2 | Sash on fume hood at recommended height |[ ] [ ] [ ] [ ]   |
| 6.3 | Audible/visual alarm functional |[ ] [ ] [ ] [ ]   |
| 6.4 | Area within and under hood tidy |[ ] [ ] [ ] [ ]   |
| 6.5 | Equipment blocks airflow in fume hood – Prudent Practices 2011, page 223 Section 9.C.2.5, page 110 Section 6.C.2.4.1 |[ ] [ ] [ ] [ ]   |
| 6.6 | Chemicals stored in the fume hood |[ ] [ ] [ ] [ ]   |
| 6.7 | Loose paper in the fume hood |[ ] [ ] [ ] [ ]   |
| 6.8 | Glove box is certified or inspected on a periodic basis |[ ] [ ] [ ] [ ]   |
| 6.9 | Laminar flow hood is certified or inspected on a periodic basis |[ ] [ ] [ ] [ ]   |

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| **EQUIPMENT** | **S** | **NI** | **U** | **NA** | **COMMENTS** |
| 7.1 | All belt driven vacuum pumps are protected with belt guards |[ ] [ ] [ ] [ ]   |
| 7.2 | All fans are guarded |[ ] [ ] [ ] [ ]   |
| 7.3 | Glassware used at pressures other than ambient are taped or shielded. |[ ] [ ] [ ] [ ]   |
| 7.4 | Lab microwave ovens, ice machines, and refrigerators/freezers have 'Not for Food/Drink' or 'For Lab Use Only' label attached |[ ] [ ] [ ] [ ]   |
| 7.5 | All machinery or equipment have all guards and shields in place and secured |[ ] [ ] [ ] [ ]   |
| 7.6 | Safeguards prevent hands, arms, and other body parts from making contact with dangerous moving parts |[ ] [ ] [ ] [ ]   |
| 7.7 | Safe work practices (long hair tied back, no loose clothing, etc.) are being adhered to by all equipment users |[ ] [ ] [ ] [ ]   |
| 7.8 | Employees allowed to use the machinery have proper training |[ ] [ ] [ ] [ ]   |
| 7.9 | Equipment is in good repair with evidence of proper maintenance |[ ] [ ] [ ] [ ]   |
| 7.10 | A tagging system is in place to prevent use of damaged equipment |[ ] [ ] [ ] [ ]   |

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| **LABELING AND POSTING** | **S** | **NI** | **U** | **NA** | **COMMENTS** |
| 8.1 | Laboratory door placard is present, legible and accurate |[ ] [ ] [ ] [ ]   |
| 8.2 | Biohazard Symbols are posted on access doors to biohazard laboratories and animal rooms and on potentially contaminated equipment.  |[ ] [ ] [ ] [ ]   |
| 8.3 | Signs on storage areas (e.g. Refrigerators) and laboratories are consistent with hazards within.  |[ ] [ ] [ ] [ ]   |
| 8.4 | Warning signs and labels are present whenever required (e.g. carcinogen, mutagen) where chemicals are stored.  |[ ] [ ] [ ] [ ]   |

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| **ATTIRE & PPE****Laboratory attire requirements:** | **Required at all times** | **Required sometimes** | **Available** | **No requirement** | **COMMENTS** |
| 9.1 | Laboratory coats and/or aprons are worn: |[ ] [ ] [ ] [ ]   |
| 9.2 | Gloves are: |[ ] [ ] [ ] [ ]   |
| 9.3 | Type(s) of gloves available: |  |  |
| 9.4 | Eye glasses and/or goggle requirements: |[ ] [ ] [ ] [ ]   |
| 9.5 | Face shield requirements: |[ ] [ ] [ ] [ ]   |
| 9.6 | Respiratory protection in use: |[ ] [ ] [ ] [ ]   |

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| **PERSONNEL PROTECTIVE EQUIPMENT PRACTICES** | **S** | **NI** | **U** | **NA** | **COMMENTS** |
| 10.1 | Closed-toe shoes and appropriate leg covering worn by laboratory personnel. |[ ] [ ] [ ] [ ]   |
| 10.2 | Long hair , jewelry, lanyards and other loose articles are confined or removed |[ ] [ ] [ ] [ ]   |
| 10.3 | Lab coats are only worn in the laboratory and are removed before entering offices, lunchrooms, rest rooms, conference rooms and other non-laboratory general use areas.  (This includes disposable protective clothing).  |[ ] [ ] [ ] [ ]   |
| 10.4 | Appropriate protective clothing is available and in use when working with radioactive materials.  |[ ] [ ] [ ] [ ]   |

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| **HAZARD COMMUNICATION** | **S** | **NI** | **U** | **NA** | **COMMENTS** |
| 11.1 | SDS binders or online link are available for chemicals used and stored in area. Demonstrated ability to locate SDS |[ ] [ ] [ ] [ ]   |
| 11.2 | Chemical Inventory current (within last year) |[ ] [ ] [ ] [ ]   |
| 11.3 | All persons working in the laboratory have completed lab safety training within the past year |[ ] [ ] [ ] [ ]   |
| 11.4 | All lab employees have received laboratory specific safety training and there is documentation to support this training (See list below for staff/dates) |[ ] [ ] [ ] [ ]   |
| 11.5 | Employees are familiar with the physical and health hazards of the chemicals in the labIt is recommended that a training sheet be maintained for each person working in the lab. A sample is provided. This allows for documentation of training on specific tasks such as inspection of waste, operation of the cooling system, etc. |[ ] [ ] [ ] [ ]   |

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|  | Training Date – lab | BBP | Recom DNA | Biosafety | Bio Cabinets |
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| **HAZARDOUS MATERIALS MANAGEMENT** | **S** | **NI** | **U** | **NA** | **COMMENTS** |
| 12.1 | Hazardous materials used/stored in the laboratory are limited to small quantities.  |[ ] [ ] [ ] [ ]   |
| 12.2 | Primary containers are labeled with contents (full name, hazard warning – no conflicting labels) |[ ] [ ] [ ] [ ]   |
| 12.3 | Secondary chemical containers are labeled with identity, appropriate hazard warnings, and expiration dates.  |[ ] [ ] [ ] [ ]   |
| 12.4 | All containers are securely closed when not in use |[ ] [ ] [ ] [ ]   |
| 12.5 | All glass bottles stored on the floor are placed into secondary containment Prudent Practices 2011, page 95 Section 5.E.1, page 113, Section 6.C.3 |[ ] [ ] [ ] [ ]   |
| 12.6 | Flammable liquids are stored/ used away from ignition sources.  |[ ] [ ] [ ] [ ]   |
| 12.7 | Flammables stored on open shelves in glass or plastic containers are within permissible quantities  |[ ] [ ] [ ] [ ]   |
| 12.8 | Bulk quantities of flammable liquids are stored in approved storage cabinets.  |[ ] [ ] [ ] [ ]   |
| 12.9 | Flammable and explosion-proof refrigerators/freezers are approved for such storage and labeled  |[ ] [ ] [ ] [ ]   |
| 12.10 | Corrosives and flammables liquids are stored below eye level. Prudent Practices 2011, page 95 Section 5.E.1, page 114 Section 6.C.5 |[ ] [ ] [ ] [ ]   |
| 12.11 | Corrosive chemicals are stored in a corrosive cabinet or within secondary containment (particularly acids) |[ ] [ ] [ ] [ ]   |
| 12.12 | Water reactive chemicals are segregated, in secondary containment, and are labeled |[ ] [ ] [ ] [ ]   |
| 12.13 | Carcinogens, pyrophorics, and highly toxic chemicals are segregated, contained and labeled. |[ ] [ ] [ ] [ ]   |
| 12.14 | Unnecessary, unused, or outdated materials are removed from laboratories and chemical storage areas. |[ ] [ ] [ ] [ ]   |
| 12.15 | Peroxide formers are labeled with the date they were opened and expiration dates. No peroxide forming compounds have exceeded their expiration date. |[ ] [ ] [ ] [ ]   |
| 12.16 | Chemical storage cabinets are properly labeled.  |[ ] [ ] [ ] [ ]   |
| 12.17 | Chemical storage cabinets close properly.  |[ ] [ ] [ ] [ ]   |
| 12.18 | Chemicals are stored based on their compatibility and in appropriate locations |[ ] [ ] [ ] [ ]   |
| 12.19 | Nothing is stored on top of stand alone flammable cabinets.  |[ ] [ ] [ ] [ ]   |
| 12.20 | Safety carriers or carts are available and in use while transporting chemicals.  |[ ] [ ] [ ] [ ]   |
| 12.21 | Pipetting is performed by mechanical means.  |[ ] [ ] [ ] [ ]   |
| 12.22 | Stench chemicals are used or generated in this laboratory |[ ] [ ] [ ] [ ]   |

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| **COMPRESSED AND LIQUID GAS** | **S** | **NI** | **U** | **NA** | **COMMENTS** |
| 13.1 | Gas cylinders are properly chained/secured to a bench or wall |[ ] [ ] [ ] [ ]   |
| 13.2 | Full and empty cylinders are stored separately.  |[ ] [ ] [ ] [ ]   |
| 13.3 | Gas cylinders are transported on a cart with chains.  |[ ] [ ] [ ] [ ]   |
| 13.4 | Gas cylinders are stored away from excessive heat.  |[ ] [ ] [ ] [ ]   |
| 13.5 | Fuel gas cylinders are at least 20 feet away from oxygen cylinders.  |[ ] [ ] [ ] [ ]   |
| 13.6 | Gas cylinders are properly marked as to their contents.  |[ ] [ ] [ ] [ ]   |
| 13.7 | All cylinders have a status tag to indicate if the cylinder is “full”, “in-service”, or “empty” |[ ] [ ] [ ] [ ]   |
| 13.8 | Cylinder caps are in place when cylinders are not in use or being moved.  |[ ] [ ] [ ] [ ]   |
| 13.9 | Regulators are always used. |[ ] [ ] [ ] [ ]   |
| 13.10 | Proper regulator used for type of gas – pressure bled when not in use |[ ] [ ] [ ] [ ]   |
| 13.11 | Gas lines, piping, manifold, etc. are labeled with the identity of their contents.  |[ ] [ ] [ ] [ ]   |
| 13.12 | Hoses, tubing and regulators are in good working condition.  |[ ] [ ] [ ] [ ]   |
| 13.13 | The Cryogenic cylinder is within its service date |[ ] [ ] [ ] [ ]   |
| 13.14 | Proper PPE and equipment are available for use with cryogenic materials |[ ] [ ] [ ] [ ]   |
| 13.15 | Pressure relief valve and blow-out discs on cryogenic cylinder are both present and operational |[ ] [ ] [ ] [ ]   |
| 13.16 | Oxygen monitor available in areas with increased likelihood of oxygen deficient atmosphere |[ ] [ ] [ ] [ ]   |

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| **WASTE HANDLING: HAZARDOUS, NON-HAZARDOUS & BIOLOGICAL** | **S** | **NI** | **U** | **NA** | **COMMENTS** |
| 14.1 | No liquid waste is disposed of in the sinks or the sewer.  |[ ] [ ] [ ] [ ]   |
| 14.2 | As part of the process, waste is neutralized in an appropriate manner for disposal |[ ] [ ] [ ] [ ]   |
| 14.3 | As part of the process, waste is distilled back into a usable form |[ ] [ ] [ ] [ ]   |
| 14.4 | If hazardous waste is accumulated in the lab, there is a designated Satellite Accumulation Area (SAA) |[ ] [ ] [ ] [ ]   |
| 14.5 | SAA inspections are occurring on a weekly basis |[ ] [ ] [ ] [ ]   |
| 14.6 | Chemical waste containers are compatible with their contents, in good condition and are kept closed |[ ] [ ] [ ] [ ]   |
| 14.7 | Adequate secondary containment for waste containers and secondary containment is in good condition |[ ] [ ] [ ] [ ]   |
| 14.8 | Containers of hazardous waste are labeled properly with the contents  |[ ] [ ] [ ] [ ]   |
| 14.9 | Waste streams are separated as necessary: ex. Solid vs. liquid, hazardous vs. non-hazardous, halogenated vs. non-halogenated, etc.  |[ ] [ ] [ ] [ ]   |
| 14.10 | Waste material is not allowed to accumulate on the floors, in corners or under shelves/tables in laboratories.  |[ ] [ ] [ ] [ ]   |
| 14.11 | Radioactive waste is properly marked with radiation symbol.  |[ ] [ ] [ ] [ ]   |
| 14.12 | “Broken Glass” container present and clearly marked |[ ] [ ] [ ] [ ]   |
| 14.13 | Spent/unwanted non-alkaline batteries are labeled as “Universal Waste Batteries,” |[ ] [ ] [ ] [ ]   |
| 14.14 | Rags used with solvents are collected for disposal by EHS. |[ ] [ ] [ ] [ ]   |
| 14.15 | Used oil and oil filters are properly stored and marked |[ ] [ ] [ ] [ ]   |
| 14.16 | Used oil is disposed of through EHS |[ ] [ ] [ ] [ ]   |
| 14.17 | Bead/sand blaster waste is collected for disposal by EHS. |[ ] [ ] [ ] [ ]   |
| 14.18 | Non-empty aerosol cans are not discarded. They are placed in the designated drum or container for collection/disposalEmpty aerosol cans can be recycled. However, if the can is damaged or you are unable to empty the can, these need to be disposed of through EHS |[ ] [ ] [ ] [ ]   |

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| **BIOLOGICAL SAFETY** | **S** | **NI** | **U** | **NA** | **COMMENTS** |
| 15.1 | Lab has an approved IBC protocol |[ ] [ ] [ ] [ ]   |
| 15.2 | Biological waste is appropriately marked with biohazard symbol.  |[ ] [ ] [ ] [ ]   |
| 15.3 | Used needles, syringes and other sharp waste are disposed of into a sharps container  |[ ] [ ] [ ] [ ]   |
| 15.4 | Equipment for use and storage of infectious materials have biohazard labels affixed |[ ] [ ] [ ] [ ]   |
| 15.5 | Aerosolizing equipment (homogenizer, nebulizer, probe sonicator, blender) is enclosed or contained in a biosafety cabinet or other suitable primary containment device? |[ ] [ ] [ ] [ ]   |
| 15.6 | Biosafety cabinets have a valid certification sticker dated within last year |[ ] [ ] [ ] [ ]   |
| 15.7 | Biosafety cabinets have operable sash? |[ ] [ ] [ ] [ ]   |
| 15.8 | Biosafety cabinets do not contain Bunsen burners |[ ] [ ] [ ] [ ]   |
| 15.9 | Air vents are unobstructed in biosafety cabinets |[ ] [ ] [ ] [ ]   |
| 15.10 | Chairs used with potentially infectious materials have non-porous surfaces that can be decontaminated |[ ] [ ] [ ] [ ]   |
| 15.11 | Appropriate disinfection solution available within the lab |[ ] [ ] [ ] [ ]   |
| 15.12 | Benchtops and equipment are routinely disinfected; and spills are immediately disinfected |[ ] [ ] [ ] [ ]   |
| 15.13 | Biowaste boxes/bins are lined with red bag(s) |[ ] [ ] [ ] [ ]   |

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| **IONIZING AND NON-IONIZING RADIATION** | **S** | **NI** | **U** | **NA** | **COMMENTS** |
| 16.1 | Radioactive materials are used in the lab (list them) |[ ] [ ] [ ] [ ]   |
| 16.2 | Radioactive sealed sources are used in this lab |[ ] [ ] [ ] [ ]   |
| 16.3 | Radioactive materials are securely stored |[ ] [ ] [ ] [ ]   |
| 16.4 | X-ray generating equipment (electron microscope, x-ray diffraction , diagnostic x-ray, computed tomography) is present |[ ] [ ] [ ] [ ]   |
| 16.5 | Proper shielding is available for the type of radioisotopes or x-ray generating equipment being used |[ ] [ ] [ ] [ ]   |
| 16.6 | Radiation workers are provided personal monitoring when required |[ ] [ ] [ ] [ ]   |
| 16.7 | Appropriate meters are available and calibrated |[ ] [ ] [ ] [ ]   |
| 16.8 | Appropriate signs (radiation labels, notice to employees, emergency procedures) are posted |[ ] [ ] [ ] [ ]   |
| 16.9 | All spaces and items which store, handle or use radioactive materials are properly labeled |[ ] [ ] [ ] [ ]   |
| 16.10 | Non-ionizing radiation is used in this lab (lasers) |[ ] [ ] [ ] [ ]   |
| 16.11 | If class IIIb or IV lasers, then appropriate signs are posted |[ ] [ ] [ ] [ ]   |
| 16.12 | Lasers are registered with EHS |[ ] [ ] [ ] [ ]   |
| 16.13 | Appropriate eyewear for lasers is available |[ ] [ ] [ ] [ ]   |
| 16.14 | The laser beam path entirely enclosed (i.e. absolutely no portion is exposed) |[ ] [ ] [ ] [ ]   |
| 16.15 | Staff has completed appropriate laser training |[ ] [ ] [ ] [ ]   |

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| **MISCELLANEOUS NOTES** |
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Inspected by: \_\_\_\_\_\_Cynthia Norton \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Accompanied on the inspection by : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is a follow-up visit from EH&S required? □Yes □ No Scheduled date of follow-up: \_\_\_\_\_\_\_\_\_\_\_\_

Is a follow-up report/e-mail from the PI required? □Yes □ No Scheduled due date : \_\_\_\_\_\_\_\_\_\_\_\_

The PI will complete an e-mail addressing any compliance and/or safety concerns found at the time of the inspection