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| **USM Laboratory Safety Inspection Form** |
| Location: |  | Today’s Date: |  |
| PI Name: |  | Inspector Name: | Martha Sparrow/Kevin Davis |
| Department: |  | Department: |  |

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| **Section 1. General Laboratory Safety**  ***S=Satisfactory U=Unsatisfactory NA=Not Applicable*** |
|  | **Emergency**  | **S** | **U** | **NA** | **Comments** |
|  | Emergency contact information is posted |[ ] [ ] [ ]   |
|  | Appropriate hazard signs are posted |[ ] [ ] [ ]   |
|  | Emergency evacuation map is posted  |[ ] [ ] [ ]   |
|  | Stocked first aid kit is available. |[ ] [ ] [ ]   |
|  | Stocked spill clean-up kit is available. |[ ] [ ] [ ]   |
|  | Safety shower/eyewash - labeled, unobstructed and tested monthly |[ ] [ ] [ ]   |
|  | Fire extinguisher available and not obstructed |[ ] [ ] [ ]   |
|  | **House keeping**  | **S** | **U** | **NA** | **Comments** |
|  | Aisles and exits are unobstructed. |[ ] [ ] [ ]   |
|  | Work areas are uncluttered. |[ ] [ ] [ ]   |
|  | Storage areas are uncluttered. |[ ] [ ] [ ]   |
|  | Ceiling tiles are in place. |[ ] [ ] [ ]   |
|  | Evidence of eating in the lab |[ ] [ ] [ ]   |
|  | Electrical panels are not obstructed |[ ] [ ] [ ]   |
|  | No chemicals/samples in student cubicle/desk areas |[ ] [ ] [ ]   |
|  | Chemical free zones clearly marked |[ ] [ ] [ ]   |
|  | Sharps container are used |[ ] [ ] [ ]   |
|  | **Personal Protective Equipment** | **S** | **U** | **NA** | **Comments** |
|  | Eye/face protection is worn while in the lab. |[ ] [ ] [ ]   |
|  | Labcoats or aprons are worn. |[ ] [ ] [ ]   |
|  | Appropriate gloves are worn. |[ ] [ ] [ ]   |
|  | Appropriate shoes and other clothing worn in the lab |[ ] [ ] [ ]   |
|  | Respirator wearers have received approval, training and fit-testing. |[ ] [ ] [ ]   |
|  | **Laboratory Management Plan (LMP)** | **S** | **U** | **NA** | **Comments** |
|  | Current LMP is available. |[ ] [ ] [ ]   |
|  | Lab-specific safety information is included. |[ ] [ ] [ ]   |
|  | Lab personnel are trained on the LMP. |[ ] [ ] [ ]   |
|  | ChemTracker Log in  |[ ] [ ] [ ]   |
|  | **Gas Cylinders/Vacuum/Pressure vessels** | **S** | **U** | **NA** | **Comments** |
|  | Gas cylinders are securely fastened to prevent tipping. |[ ] [ ] [ ]   |
|  | Pressure/vacuum apparatus in good condition and shielding present |[ ] [ ] [ ]   |

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| **Section 2. Chemicals** : [ ]  YES [ ]  NO *If no please go to next section* |
|  | **Chemical Storage/Containment** | **S** | **U** | **NA** | **Comments** |
|  | Chemicals are stored per compatibility. |[ ] [ ] [ ]   |
|  | Containers are properly labeled. |[ ] [ ] [ ]   |
|  | Containers are closed when not in use |[ ] [ ] [ ]   |
|  | Stable shelving/proper storage is used  |[ ] [ ] [ ]   |
|  | Flammable cabinets are used- NFPA volumes not exceeded |[ ] [ ] [ ]   |
|  | Waste is properly labeled, in secondary containment and closed (but not tightly) when not in use |[ ] [ ] [ ]   |
|  | **Peroxidizable Chemicals** | **S** | **U** | **NA** | **Comments** |
|  | Peroxidizables are dated when received, opened and tested. |[ ] [ ] [ ]   |
|  | Peroxidizables are tested for peroxides every six months. |[ ] [ ] [ ]   |
|  | **Chemical Fume Hoods** | **S** | **U** | **NA** | **Comments** |
|  | Chemical fume hoods have been inspected within the last year |[ ] [ ] [ ]   |
|  | Hood interior is uncluttered |[ ] [ ] [ ]   |
|  | Airfoils in place |[ ] [ ] [ ]   |
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| **Section 3. Biological Safety** : [ ]  YES [ ]  NO *If no please go to next section* |
|  | **Chemical Storage/Containment** | **S** | **U** | **NA** | **Comments** |
|  | Functional sink is in laboratory space. |[ ] [ ] [ ]   |
|  | Bio-safety cabinet(s) have been certified within the last year. |[ ] [ ] [ ]   |
|  | Lab space and furniture can be easily decontaminated. |[ ] [ ] [ ]   |
|  | Appropriate biohazard container with symbols used for waste |[ ] [ ] [ ]   |

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| **Section 4. Radiation Safety** : [ ]  YES [ ]  NO *If no please go to next section* |
|  | **General radiation**  | **S** | **U** | **NA** | **Comments** |
|  | All areas/containers with radioactive materials are identified with signs/labels. |[ ] [ ] [ ]   |
|  | Equipment for detecting radiation hazards is readily available and calibrated  |[ ] [ ] [ ]   |
|  | Material is secured when unattended. |[ ] [ ] [ ]   |
|  | Inventory of the lab's radioisotopes is available. |[ ] [ ] [ ]   |
|  | Radiation wastes are segregated from other wastes |[ ] [ ] [ ]   |
|  | Waste containers are properly labeled. |[ ] [ ] [ ]   |
|  | **General radiation (cont.)** | **S** | **U** | **NA** | **Comments** |
|  | Workspace is lined with absorbent paper. |[ ] [ ] [ ]   |
|  | Shielding is used for radioactive materials. |[ ] [ ] [ ]   |

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| **Section 5. Laser Safety** : [ ]  YES [ ]  NO *If no please go to next section* |
|  | **Laser safety**  | **S** | **U** | **NA** | **Comments** |
|  | Class IIIB or IV lasers are registered. |[ ] [ ] [ ]   |
|  | Appropriate laser signage is used |[ ] [ ] [ ]   |
|  | Laser specific PPE used and entry requirements are followed |[ ] [ ] [ ]   |
|  | Laser SOP’s are available in the LMP  |[ ] [ ] [ ]   |