

**Laboratory Health and Safety  
Self-Audit Checklist**

Building \_\_\_\_\_ Room \_\_\_\_\_ Principal Investigator \_\_\_\_\_ Date \_\_\_\_\_

Audit Performed by \_\_\_\_\_

	Y	N	NA	COMMENTS
<b>A. General Work Environment</b>				
1. Work areas illuminated				
2. Storage of combustible materials minimized				
3. Trash removed promptly				
4. Aisles and passageways kept clear				
5. Wet surfaces covered with non-slip material				
6. Heavy items stored on lower shelves				
7. Means available to reach items stored above shoulder level				
8. Storage at least 18 inches below sprinkler head				
9. Storage at least 24 inches below ceiling				
10. Exits				
a. Illuminated signs working				
b. Paths free from obstruction				
c. Alternate exits available				
d. Fire doors not blocked or wedged open				
e. Doors not locked				
11. Security/controls where required for select materials				
12. Pits and floor openings covered or guarded				

## Key to Laboratory Safety Checklist

### A. General Work Environment

1. Depending upon the tasks involved, adequate lighting should be provided.
2. Minimize storage of materials that would add fuel to a burning fire. Examples would include paper goods, plastic containers, materials stored in boxes, empty containers.
3. A Building Services' responsibility, trash should be removed at least daily.
4. Self explanatory
5. Self explanatory
6. Self explanatory
7. A warehouse ladder, step stool, or some other appropriate means should be provide where items are stored above shoulder level.
8. Per NJ Uniform Fire Code, storage must be at least 18 inches below sprinkler heads.
9. Per NJ Uniform Fire Code, in any area with no sprinkler system, storage must be at least 24 inches below the ceiling.
10. Items (a) through (d) - Self explanatory.  
Item (e) - Exit doors, including those which open directly from lab spaces into stairwells, must not be locked during normal business hours. Security measures are allowed after hours, with the approval of the local fire official.
11. Certain materials, such as controlled substances, require special security systems or controls to limit access.
12. Any floor opening or pit deeper than 4 feet must be covered or guarded (i.e., barricades, railing, etc.) to prevent falls.

	Y	N	NA	COMMENTS
<b>B. Emergency Planning</b>				
<b>Facilities</b>				
1. Fire extinguishers mounted near doorway				
2. Fire extinguishers unobstructed				
3. Fire extinguisher fully charged				
4. Fire extinguisher tamper indicator in place				
5. Eyewash and safety showers available in close proximity and unobstructed				
6. Fire alarm pull stations unobstructed				
7. Emergency lights functional				
<b>Inspections</b>				
8. Fire extinguisher inspected				
9. Self-contained breathing apparatus (SCBA) inspected				
10. Eyewash and safety shower inspected				
<b>Procedures</b>				
11. Spill control plan completed				
12. Spill control materials available and adequate to cover anticipated spills				
<b>C. Required Information/Postings</b>				
<b>Information</b>				
1. Written Emergency Action Plan				
2. Material Safety Data Sheets Readily accessible				
3. Written Chemical Hygiene Plan available in lab				

## Key to Laboratory Safety Checklist

### B. Emergency Planning

1. Self explanatory
2. Self explanatory
3. Some types of fire extinguishers have pressure gauges. Check these to insure extinguisher is fully charged. Fire extinguishers without pressure gauges can only be checked by trained personnel in Building Services.
4. If fire extinguisher tamper indicator is not in place, contact Building Services.
5. Self explanatory
6. Self explanatory
7. Press the self-test button on unit's power supply.
8. Fire extinguishers should be inspected monthly by Building Services with the results recorded on an attached inspection card.
9. Self-contained breathing apparatus must be inspected at least monthly. These inspections are usually done by Special Facilities (Maintenance) personnel. Contact them if SCBA for your laboratory area has not been inspected. Inspection checklists are available through EHS.
10. Eyewash and safety showers should be inspected at least twice yearly and the result should be recorded on an attached inspection card. Inspections are conducted by Special Facilities (Maintenance) personnel.
11. Pre-planning is essential to handling a chemical spill. A written Spill Control Plan should be available for each laboratory, considering the amounts and types of chemicals used or stored in the lab. General procedures and a guide to developing Spill Control Plans are available in Section 9 of the departmental Chemical Hygiene Plan and through EHS.

12. Laboratory workers should have access to spill control materials appropriate to the type and amount of chemicals used or stored in the lab. Some departments have spill control materials available in a central location. Pails, bags, and vermiculite are available through EHS. Recommended spill control materials are listed on the EHS web page, under Emergency Procedures, Chemical Spills (<http://www.princeton.edu/~ehs>).

### C. Required Information/Postings

1. Every department must have an Emergency Action Plan which details emergency reporting procedures, escape routes, and employee assembly and accountability procedures. A model program is available through EHS.
2. Material Safety Data Sheets (MSDSs) received with chemical shipments must be retained by each laboratory. See Section 2 of the departmental Chemical Hygiene Plan for location and procedures for MSDSs. The EHS web page has pointers to several sources of MSDSs (<http://www.princeton.edu/~ehs>). MSDSs also may be available through EHS.
3. Each department must prepare and maintain a Chemical Hygiene Plan, which includes information about hazard communication, exposure determination, medical consultation and exams, training and information, safe work practices and procedures, provisions for working with particularly hazardous substances, exposure controls and personal protective equipment, fume hoods and ventilation, emergency procedures, waste disposal, and facility specific systems and response plans. A copy of the Chemical Hygiene Plan must be available to each laboratory at all times. A model plan is available through EHS.

	Y	N	NA	COMMENTS
4. Written Respiratory Protection Program				
5. Documentation of Personal Protective Equipment Hazard Assessment and training				
<b>Postings</b>				
7. Emergency Information Posters accurate and current				
8. OSHA poster				
9. Telephones posted with 911 sticker				
10. Building Evacuation Routes posted				
11. Ice making machines posted <i>Not for Human Consumption</i>				
12. Fire Code Permits posted (when required)				
<b>D. Personal Protective Equipment</b>				
1. Eye and face protection available where needed				
a. Goggles and face shields for corrosives				
b. Industrial safety glasses for flying particles				
2. Areas requiring the use of eye protection posted				
3. Open toe shoes prohibited in areas where corrosives are used				
4. Respirator use:				
a. Appropriate respirator/appropriate cartridge used				
b. User enrolled in respiratory protection program				
<b>E. Electrical Hazards</b>				
1. Flexible cords in good condition				
2. Cover plate in place for outlets and switches				

## Key to Laboratory Safety Checklist

### Required Information/Postings (continued)

4. Departments where chemicals are used in non-laboratory settings must have a written Hazard Communication Program, which includes an inventory of hazardous materials used or stored by the department, procedures for maintenance and procurement of MSDSs, labeling requirements, training requirements, contractor requirements, and non-routine tasks requirements. A model written program is available through EHS.
5. If respirators, including self-contained breathing apparatus, are used, the department must have a written Respiratory Protection Program, which details the procedure for respirator selection, medical assessment of respirator user health, training, proper fitting, respirator inspection and maintenance, and recordkeeping. A model written program is available through EHS.
6. Departments must complete a hazard assessment to determine which types of personal protective equipment (e.g. eye and face protection, gloves, etc.) should be used. Workers must receive adequate training on personal protective equipment selection and use. Documentation of the hazard assessment and training must be maintained. Sample forms are available through EHS.
7. Laboratory emergency contacts and specific laboratory hazards must be posted at the principal entrance to each laboratory, for use by emergency response personnel. Emergency Information Posters and instructions for their completion are available through EHS.
8. Commonly known as “the OSHA poster”, a poster entitled *Job Safety & Health Protection* must be conspicuously placed where notices to employees are customarily posted. Copies are available through EHS.
9. Self explanatory.
10. Posting of evacuation routes is recommended as part of the Emergency Action Plan.
11. Ice from machines intended to provide ice for experimental purposes are not to be used for consumption because of the potential of such ice to be chemically or biologically contaminated. Signs should be posted at the machine to indicate such special use.
12. A copy of the fire code permit must be posted per the local fire official's instructions received with the permit.

### D. Personal Protective Equipment

1. Refer to the department's Personal Protective Equipment Hazard Assessment to determine what type of eye protection should be used.
2. Where eye protection is necessary, *Eye Protection Required* signs should be posted at the entrance to the area.
3. Self explanatory.
4. There are several types of respirators and respirator cartridges and filters. The proper combination of respirator type and cartridge or filter is necessary for protection from the anticipated concentration of the hazardous material. University policy indicates that all respirator use on campus must be reviewed by an Industrial Hygienist from EHS and that all respirator users are enrolled in the Respiratory Protection Program (which includes annual training and fit-testing and medical surveillance).

### E. Electrical Hazards

1. Electrical cords that have frayed wires or broken insulation present significant electrical shock and fire hazards. Replace or repair any electrical cord found to be in poor condition.
2. Cover plates must be installed on all electrical outlets and switches to prevent accidental contact with electrical wires.

	Y	N	NA	COMMENTS
3. Circuit breaker panels unobstructed				
4. Machine/instrument access panels in place				
5. No exposed electrical conductors (50 volts or more)				
6. Multiplug adapters have overload protection				
7. No extension cords used				
8. Ground fault circuit interrupters (GFCI) used for wet/exterior use				
9. Guards/covers used for electrophoresis devices				
<b>F. Chemical Storage</b>				
<b>Facilities</b>				
1. Shelving adequate for loads imposed				
2. Refrigeration units for chemical storage labeled <i>No Food</i>				
3. Refrigeration units for food labeled <i>Food Only</i>				
4. Chemical storage cabinets properly labeled				
5. Ventilated gas cabinets used for highly toxic gases				
6. No volatile chemical storage in unventilated environmental chambers				
<b>Containers</b>				
7. Containers clearly labeled with chemical name(s)				
8. Containers kept closed except during transfers				
9. Storage strictly limited in actively used fume hoods				
10. Containers compatible with the chemical				

## Key to Laboratory Safety Checklist

### Electrical Hazards (continued)

3. The NJ Uniform Fire Code requires clearance of at least 30 inches for circuit breaker panels.
4. Self explanatory.
5. Self explanatory.
6. The NJ Uniform Fire Code prohibits the use of unfused multiplug adapters (such as cube adapters and unfused plug strips).
7. Extension cords may not be used in place of permanent wiring. Additional electrical outlets should be installed to service equipment needs.
8. Self explanatory
9. Guards or covers should be used for electrophoresis devices operating at 50 volts or more. Most new devices come equipped with covers. Older devices, which may lack covers, can be guarded with shields constructed of Plexiglas or some other suitable material.

### F. Chemical Storage

1. Generally, light-duty shelving should not be used. Shelving units should be securely anchored to the wall.
2. To avoid potential contamination, food should not be stored in refrigerators or freezers designated for chemical storage.
3. To avoid potential contamination, chemicals should not be stored in refrigerators designated for food storage.
4. Labeling of cabinets by chemical class (e.g. flammable liquids, acids, oxidizers) is essential if chemical storage is to be segregated to avoid

incompatibilities, and to identify storage areas for emergency response personnel.

5. Highly toxic gases, such as fluorine, phosgene, and many semiconductor gases, should be stored in ventilated cabinets made for this purpose. In the event of a leak or fire, the gas cabinet would contain and exhaust the gas, protecting the laboratory worker from exposure.
6. Toxic or flammable substances that are capable of becoming airborne (e.g. gases, vapors, dusts, fumes or mists) should not be used in unventilated areas. In the absence of adequate ventilation, air contaminants can build up to levels that pose health or flammability hazards.
7. Chemical containers should be clearly labeled with at least a chemical name. The manufacturer's label is best, as it usually contains a great deal of information about health and physical hazards. When a chemical is transferred from the original container, the new container should be labeled, as possible. Small containers may use other means of identification, such as a code or number system referenced to the user's lab notebook.
8. In order to avoid spillage or release of vapors, containers should be closed except when transferring.
9. For optimum performance and containment, a fume hood should have the minimum amount of chemicals or apparatus in it when in use. It is particularly important that the slots or baffles at the back of the hood are unobstructed.
10. Some chemicals may degrade certain container materials. For example, hydrofluoric is incompatible with glass. Inorganic hydroxides are best stored in polyethylene containers. Some organic solvents will soften plastic.



	Y	N	NA	COMMENTS
<b>Procedures</b>				
11. Chemicals segregated to avoid incompatibilities				
12. Large/heavy containers stored on lower shelves				
13. Corrosives not stored above eye level				
14. Storage quantities minimized				
15. Secondary containers used during transport of more than one pint of chemicals				
16. Materials with shelf lives dated and disposed of per supplier's recommendations				
17. Lab check-out procedures for departing lab workers in place				
18. Fire code permits obtained				
<b>G. Flammable Liquids</b>				
1. Used in fume hood or well-ventilated area				
2. Stored in flammable liquid storage cabinet for more than 10 gallons per room				
3. Refrigeration units approved for flammables storage				
4. Flammables separated from strong oxidizers				
5. Class ABC or BC fire extinguisher available				
6. Flammable liquids not stored near hot plates or other ignition sources				
<b>H. Compressed Gases</b>				
1. Used in well ventilated area				
2. Toxic, flammable, corrosive gases used in fume hood				

## Key to Laboratory Safety Checklist

### Chemical Storage (continued)

11. Chemicals which may react violently or emit hazardous fumes when mixed should not be stored near each other. Examples include oxidizers and flammables, acids and bases.
12. Self explanatory.
13. Corrosive materials can cause severe tissue damage and are particularly injurious to the eye. Storage of corrosive below eye level helps to minimize this risk.
14. Quantities of chemicals in storage should be consistent with the short-term needs of the lab. Excessive storage should be avoided.
15. When transporting chemicals between rooms or buildings, secondary containers, such as bottle carriers, should be used. In the event the container is dropped, bumped or otherwise breaks, the contents would be contained in the bottle carrier, avoiding a spill. Bottle carriers are available in many stockrooms.
16. Some chemicals, such as ethers or other peroxide-formers, have recommended storage time limits. Chemicals stored beyond their limit date may form explosive peroxides, which may detonate when removing a cap, agitating, dropping, scraping, etc. Upon arrival, these containers should be marked with the date placed in storage and an expiration date based on manufacturer's recommendations. Many manufacturers include an expiration date on the product label.
17. To avoid difficult and potentially costly waste disposal problems, a procedure should be in place to assure all materials are labeled and unneeded chemicals disposed of properly.

18. Storage and use of certain quantities of several classes of chemicals trigger the need to obtain fire code permits from the local fire official. Information on fire code permits is available from EHS.

### G. Flammable Liquids

1. Self explanatory.
2. If the total quantity of all flammable liquids stored in the room exceeds 10 gallons, a flammables storage cabinet must be used. No more than three flammables storage cabinets may be used in one room.
3. Normal household refrigerators must not be used for flammable liquid storage. A *flammable materials refrigerator* should be used instead. *Explosion-proof* refrigerators are not required.
4. Chemical storage should be segregated to avoid incompatibilities. The storage of flammable liquids with strong oxidizers creates a fire hazard and should be avoided.
5. Designation that includes "B" class is appropriate for flammable liquids.
6. While true for all container types, this can be especially hazardous when plastic squeeze bottles of flammable liquids are used in hoods where hot plates are also in use.

### H. Compressed Gases

1. Self explanatory
2. This does not refer to the cylinder themselves. Rather, the delivery point of the gas should be inside a fume hood.

	Y	N	NA	COMMENTS
3. Storage quantities minimized				
4. Secured from tipping in use				
5. Regulators compatible with gas cylinder				
6. Cylinder carts used for transport				
7. Protective valve caps in place				
8. Empty or unused gas cylinders promptly returned to supplier				
<b>I. Cryogenics</b>				
1. Personal protective equipment used to avoid skin contact				
2. Used/dispensed with good ventilation				
3. Containers vented or pressure relief devices provided				
4. Low temperature embrittlement considered				
5. Glass dewars shielded				
<b>J. Waste Disposal</b>				
1. Containers kept sealed except during transfer				
2. Containers labeled with the words <i>Hazardous Waste</i>				
3. Constituents of the waste described on the container label				
4. Storage limited to < 1 quart of acutely hazardous waste				
5. Glass chemical containers recycled per established procedures				
6. Separate disposal containers available for broken glass				
7. Containers compatible with waste				

## Key to Laboratory Safety Checklist

### Compressed Gases (continued)

3. As with the storage of all chemicals, quantities of compressed gas cylinders on-hand should be consistent with the short-term needs of the lab.
4. Compressed gas cylinders must be safely secured in an upright position while in storage or use. Information on the various ways to secure cylinders is available from EHS.
5. Regulators are designed for use with specific gases, within prescribed pressure ranges. Cylinder valve outlets and inlet connectors on regulators are designed to minimize the chances of using the wrong regulator. If the connections do not readily fit together, the wrong regulator is being used.
6. Large compressed gas cylinders are heavy and difficult to move. A cylinder cart makes the job of transporting cylinders easier and more secure.
7. Cylinders without attached regulators should have valve caps in place.
8. Disposal of abandoned cylinders is difficult and costly.

### I. Cryogenics

1. Loose-fitting, dry gloves, eye and face protection, lab coats and, in some cases, lab aprons may be necessary when using or dispensing cryogenic liquids.
2. Cryogenic liquids produce large volumes of gas when vaporized, which can easily displace breathable air in an enclosed or confined space.
3. Because of the large volumes of gas produced during vaporization, containers for cryogenic liquids should be vented or closed containers should be protected by pressure-relief devices to avoid over-pressurization. Pressure-relief devices must incorporate both a pressure-relief valve and a frangible disc.
4. Objects that are soft and pliable at room temperature can become hard and brittle at low temperatures and will break easily. Consideration

should be given to this whenever materials are used with cryogenic liquids.

5. Shielding protects workers from implosion hazard.

### J. Waste Disposal

1. Except during transfers, N.J. Dept. of Environmental Protection regulations require that all waste containers be sealed.
2. Self-explanatory - per NJ Department of Environmental Protection standards.
3. Containers must list contents and approximate percentage composition. Standard chemical nomenclature (common or IUPAC) should be used. Symbols or structural formulas should be avoided.
4. No more than one quart of "acutely hazardous waste" (as listed by the N.J. Department of Environmental Protection) can be stored within a lab work area. A list of acutely hazardous chemicals may be found on the EHS Web Page (<http://www.princeton.edu/~ehs>) under *Chemical Waste Procedures*.
5. To promote recycling and to reduce waste disposal costs, a procedure for disposing of empty glass chemical containers has been established. Details are available from Building Services or on the EHS Web Page (<http://www.princeton.edu/~ehs>), under *Hazardous Waste*.
6. Broken laboratory glassware should be disposed of as *Medical Waste* or placed in a cardboard *Glass Waste* receptacle. It should not be recycled or disposed of as lab trash.
7. Chemical containers should be constructed of materials that will not be affected by the substances that are stored in them. Hydrofluoric acid will etch glass. Acids corrode many metals and some organics will soften plastics.

	Y	N	NA	COMMENTS
<b>K. Ventilation</b>				
1. Each chemical fume hood has been surveyed				
2. Fume hood vents (baffles) unobstructed				
3. Fume hoods used with sash in appropriate position				
4. Chemical storage strictly limited in actively used hoods				
5. Other local exhaust devices (e.g. gas cabinets, elephant trunks) surveyed				
6. Laminar Flow Cabinets posted				
<b>L. Pressure/Vacuum Systems</b>				
1. System components properly designed				
2. Pressure relief devices provided and inspected				
3. Corrosion prevention considered				
4. Written operating procedures available				
5. Inspection/Maintenance procedure in place				
6. Failure analysis and hazard control documented				
7. Glass vessels shielded/enclosed				
8. Operators trained/authorized				
<b>M. Security</b>				
1. Doors to the lab operate, close and lock properly.				
2. Windows operate, close and lock properly.				
3. Alarm systems are operating properly.				
4. Keys and access cards are kept in a secure area, out of sight.				

**K. Ventilation**

## Key to Laboratory Safety Checklist

1. EHS surveys and grades each chemical fume hood every six months. Results of the most recent survey are posted on the hood face.
2. Exhaust slots at the rear of the working surface blocked by containers and equipment can adversely affect airflow and compromise containment.
3. When not in active use, hood sashes should be lowered. During chemical manipulations, sashes should be set at or below the position indicated on the Standard Operating Configuration sticker posted on the hood face. See Section 9 of the Chemical Hygiene Plan for more information.
4. Materials should not be stored in a hood that is in active use. The hood is perhaps the most likely site in a lab for a chemical incident to occur. Stored materials can increase the potential for a more serious incident.
5. Gas cabinets, elephant trunks or other local exhaust ventilation used to control airborne contaminants should be checked for proper operation.
6. Volatile organics or hazardous gases should not be used in laminar flow cabinets that are not connected to the building exhaust ventilation system.
2. Self-explanatory. Consider consequences of pressure-relief discharge points.
3. Internal corrosion is a common cause of failure.
4. Self-explanatory.
5. Self-explanatory.
6. Documentation of all failure modes with corresponding controls should be prepared and available.
7. Self-explanatory.
8. Self-explanatory.

### **M. Security**

1. Self-explanatory. Report problems to the Maintenance Supervisor.
2. Self-explanatory. Report problems to the Maintenance Supervisor.
3. If possible, conduct a test of any alarm systems.
4. Keys and access cards should be kept out of sight to help prevent theft. Report lost keys or access cards to the Department Manager immediately.

### **L. Vacuum Pressure Systems**

1. Documentation of system design should be readily available.

	Y	N	NA	COMMENTS
<b>N. Training/Awareness</b>				
<b>Training</b>				
1. Workers have attended Laboratory Safety Training				
2. Workers have attended Emergency Action Plan Training				
3. Workers have attended Laboratory Security Training				
4. Workers have attended a laboratory orientation				
5. Workers have had training beyond EHS training				
6. Training (EHS and departmental) is documented				
<b>Awareness: Do laboratory workers know</b>				
1. what to do in the event of an emergency, such as fire, injury, including evacuation routes				
2. how to clean up chemical spills				
3. the location/contents of the Chemical Hygiene Plan				
4. the Chemical Hygiene Officer and Safety Manager for the department				
5. what an MSDS is and where to find them and other safety information				
6. what type of personal protective equipment to use and when to use it				
7. what to do with chemical waste				
8. what are the most hazardous materials you use and what precautions to take				

## Key to Laboratory Safety Checklist

### N. Training/Awareness

1. All laboratory workers (including faculty, staff, graduate students, and undergraduates who work independently) must attend Laboratory Standard Training offered by EHS.
2. All employees within a department or building must receive training by the department on the Emergency Action Plan. This includes contacting Public Safety at 911 for emergencies such as fire or injury and what to do in the event of a fire alarm (evacuation routes, where your group is to congregate, accounting for all building occupants, etc.) See the written departmental Emergency Action Plan for information.
3. All laboratory workers must either attend Laboratory Security training offered by Public Safety or complete the on-line training offered on the Public Safety website.
4. All laboratory workers should receive an orientation to the laboratory, which includes, at least, where the Chemical Hygiene Plan is kept, how to use laboratory equipment, how and when to use personal protective equipment, where emergency equipment, such as eye washes and safety showers are, who to contact in an emergency, where MSDSs are kept, spill control procedures, emergency procedures and incident reporting.
5. The Laboratory Standard Training conducted by EHS is general in nature and does not cover specific chemicals or experimental procedures. Additional training must be provided by departmental personnel. A summary of this additional training may be found in Section 5 of the Chemical Hygiene Plan. **Training/Awareness (continued)**
6. All training, including departmental training and that given by EHS, must be documented. Such records must be kept at least until the laboratory worker leaves Princeton University.

### Awareness Questions

These questions may be asked of a representative number of laboratory workers to help assess their level of understanding of health and safety

issues. Based on their answers to these questions, additional training may be warranted. EHS may assist the department in developing such training.

1. Emergency response information should be covered in the departmental Emergency Action Plan training, including evacuation routes, calling 911, and assembly points.
2. Lab workers should know where spill control materials are stored and how to use them. Basic information about cleaning up chemical spills is covered in Laboratory Standard training. EHS offers a more extensive training program for departments or groups upon request.
3. A cursory overview of the contents of the model Chemical Hygiene Plan is offered during Laboratory Standard training. More specific information must be given by the department.
4. A list of Chemical Hygiene Officers for the various departments is reviewed during Laboratory Standard training, and should be confirmed by the department. In most departments, the Department Manager is also the Departmental Safety Manager.
5. An overview of the type of information available in MSDSs is given during Laboratory Standard training. Departments must explain where to find MSDSs and the protocol for obtaining and maintaining MSDSs within the department.
6. General information about the use of personal protective equipment is discussed in Laboratory Standard Training. Specific information about what particular personal protective equipment must be used for specific chemicals or processes must be given by the department.
7. Chemical waste procedures are reviewed in Laboratory Standard training. Specific departmental or laboratory procedures must be explained by the department.
8. Many particularly hazardous materials require special handling, decontamination, disposal, or other precautions. Laboratory workers should have a thorough understanding of the hazards and should follow standard operating procedures which incorporate these safety measures.



	Y	N	NA	COMMENTS
9. if any of the materials used in the lab are carcinogens, highly toxic agents or reproductive toxins. If so, have you completed a prior approval form?				
10. where and how to use emergency equipment, such as safety showers and eyewash stations				
11. to question unfamiliar visitors in the lab				
12. the contents of the Laboratory Security Policy				
13. if anyone in the laboratory is conducting unauthorized research activities				
14. to report unusual or suspicious conditions and security incidents to Public Safety				

3/03

## Key to Laboratory Safety Checklist

9. Carcinogens, highly toxic agents, and reproductive toxins are considered particularly hazardous substances. A prior approval process should be in place within the department. This process may include completing a form and receiving special permission from the Principal Investigator and/or Chemical Hygiene Officer. See the Chemical Hygiene Plan for more information.
10. Lab workers should know where to find emergency equipment before it is needed.
11. The Laboratory Security Policy asks that individuals question unfamiliar visitors to ensure that they are in the lab for legitimate purposes. Any concerns should be reported to Public Safety.
12. Self-explanatory.
13. Research or other activities involving the use of lab space, materials or equipment without the knowledge and approval of the responsible Principal Investigator is strictly prohibited. Violation of this prohibition may result in disciplinary action up to and including termination.
14. Self-explanatory.