LABORATORY INSPECTION CHECK LIST

Department __________________________ Date _________________

Building _________ Room No. _________ Lab Director(s) ___________

Inspection Team ______________________________________________

YES NO N/A

A. Housekeeping

1. Walking aisles are clear                                     ______ ______ ______
2. Broken glass disposal containers provided ______ ______ ______
3. All items stored appropriately ______ ______ ______

Comments: _______________________________________________________

_______________________________________________________

B. Chemical Storage

1. Food and chemicals kept separate                         ______ ______ ______
2. Chemicals stored in the open are kept to a minimum ______ ______ ______
3. Glass containers are limited to one gallon size or smaller ______ ______ ______
4. Flammable liquids in excess of 10 gal are stored in flammable liquid cabinet ______ ______ ______
5. Acids and bases separated from flammable chemicals and each other ______ ______ ______
6. Highly toxic chemicals and carcinogens secured             ______ ______ ______
7. Refrigerators used for storage of flammables are properly rated ______ ______ ______
8. Highly reactive chemicals disposed of prior to expiration date or when no longer needed ______ ______ ______
9. Chemicals stored in the proper environments/compatible containers ______ ______ ______
10. Condition of containers is good -- no rust, crud, or ooze ______ ______ ______
11. Labels clearly indicate contents and associated hazard ______ ______ ______

Comments: _______________________________________________________

_______________________________________________________

C. Personal Protective Equipment

1. Safety glasses are worn ______ ______ ______
2. Additional protective equipment is available ______ ______ ______
3. If noise interferes with normal speech, ear protectors used ______ ______ ______

Comments: _______________________________________________________

_______________________________________________________
### D. Ventilation

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<th></th>
<th>YES</th>
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<tbody>
<tr>
<td>1. Laboratory hoods or other local ventilation present</td>
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<td>2. Sash is in working order</td>
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<td>3. Equipment is positioned at least eight inches from hood face</td>
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<td>4. Gas and electrical shut-offs are outside the hood</td>
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<td>5. Hood interior is clean, uncluttered, and free of storage</td>
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<td>6. Hazard warning information posted on the sash</td>
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Comments: _______________________________________________________

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### E. Waste Management

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<tbody>
<tr>
<td>1. All waste is contained within tightly closed containers</td>
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<td>2. Chemical waste labels are present and marked correctly</td>
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<td>3. Waste containers monitored for compatibility of chemicals</td>
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<td>4. Hallways, maintenance corridors, etc., are free of waste</td>
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<td>5. Amount of flammable liquid waste less than five gallons</td>
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<td>6. Corrosive liquids stored in non-metal containers</td>
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<td>7. Lab occupants are knowledgeable of waste disposal procedures</td>
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Comments: _______________________________________________________

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### F. Emergency

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<th>YES</th>
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<th>N/A</th>
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<tbody>
<tr>
<td>1. “In Case of Emergency” notices current and posted outside door</td>
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<td>2. “Let Run Notices” current and posted appropriately</td>
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<td>3. All exits are clearly marked and unobstructed</td>
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<td>4. “Laboratory Safety Guide” is present</td>
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<td>5. Safety shower and eyewash fountain locations clearly marked and Unobstructed</td>
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Comments: _______________________________________________________

_________________________________________________________________

### G. Compressed Gas

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<tr>
<td>1. Manual shut-off valves provided at all points of supply and use</td>
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<td>2. Permanent piping systems properly identified</td>
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<td>3. Gases with health hazard of two kept in vented enclosures</td>
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<td>4. Oxygen and flammable gases stored separately</td>
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<td>5. All cylinders are secured</td>
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<td>6. “In Use” labels present</td>
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<td>7. Gas cylinder, not in use, are capped</td>
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Comments: _______________________________________________________

_________________________________________________________________
### H. Mechanical

1. Machine guarding, emergency stop, and lock-out controls in place
2. Cutting instruments (razor blades, knives, etc.) sheathed
3. Syringes properly secured and disposed

Comments: _______________________________________________________

### I. Electrical

1. Electrical equipment double insulated or grounded
2. Cords and plugs in good condition (not pinched/broken/covered)
3. Outlets grounded
4. Wiring appropriate for usage
5. Electrical cords and equipment positioned away from water & heat

Comments: _______________________________________________________

### J. Radiation Safety

1. All users checked by Radiation Safety Officer
2. “Radioactive Material” signs appropriately posted
3. Pipetting performed correctly
4. Protective clothing used (lab coats, gloves, etc.)
5. Appropriate radioactive waste receptacles used (Liquid/Solid)
6. Personnel wearing “Film Badge”
7. Radionuclide inventory current and available to workers for update

Comments: _______________________________________________________

### K. Exit Interview

1. All staff and students are aware of procedures in case of:
   a. fire
   b. chemical spill
   c. injury
   d. power outage
   e. other emergencies
2. All staff and students are aware of locations of MSDS
3. Are special safety procedures/equipment/devices needed in this lab
4. Are explosive materials used in laboratory
5. Are there any utilities in this laboratory that are not working
6. Is there any way the safety personnel can better serve your needs

** If any answer to 4-8 is yes, please explain in comment section **

Comments: ____________________________________________________________________