

SAFETY INSPECTION FORM

Building:	Room:	Inspection Date:
Lab Captain:		Inspected By:
Supervising Faculty:		Please indicate below the type of inspection:
		Quarterly:
		Annual:

S = Satisfactory

N = Needs Improvement*

N/A = Not Applicable

Personal Protective Equipment						
Available				Used		
S	N	N/A		S	N	N/A
			Eye Protection			
			Gloves			
			Respirators			
			Aprons			
			Lab Coats			
			Hearing Protection			
			Safety Shoe Guards			
			Other:			

Facility (Continued)			
S	N	N/A	
			SHARPS container available?
			Random Question: Do you feel you had appropriate training for your job?
			All lab personnel have fulfilled all training requirements on the OEHS "Safety Training Checklist"
			Is HAZCOM "Employee Notification Form" posted (one per floor)?

Facility			
S	N	N/A	
			Exit doors unobstructed
			Minimal "storage" of items
			Uncluttered laboratory
			Emergency Information Sheets at entrance
			Eyewash unobstructed
			Eyewash tested
			Shower unobstructed
			Shower tested
			Fire Extinguisher(s):
			in proper place
			unobstructed
			pin intact and seal not broken
			fully charged (if not, call OEHS (1-3511) for recharge)
			Random question: Where is nearest fire extinguisher?
			First Aid Kit(s):
			In proper place?
			Properly stocked?
			Nearest first aid kit?
			Add 1 quart water to each drain monthly
			Working flashlight available?

Additional Comments

*Lab Captains are responsible for seeing that all concerns in the "Needs Improvement" category are addressed. **Monthly lab inspections** will be required until all items are "Satisfactory."

Chemical			
S	N	N/A	
			Fume hoods not obstructed or cluttered
			Check flow rate of fume hood
			No food in refrigerators containing chemicals
			Material Safety Data Sheets readily accessible Random Question: Can you find the MSDS for this chemical?
			No flammable chemicals in non-explosion-proof refrigerators
			All containers labeled with contents
			Chemical containers adequate and spill protected
			Incompatible chemicals separated
			Gas cylinders properly secured
			Caps or regulators on cylinders
			Chemical waste containers properly labeled
			No excess (over 55 gallons) chemical waste
			All liquid-containing tubing inspected
			All gas-containing tubing inspected

Additional Comments

Radiation			
S	N	N/A	
			"LASER IN USE" signal available
			LASER radiation warning sign posted

Electrical			
S	N	N/A	
			No frayed cords or exposed electrical contacts
			Electrical equipment properly grounded
			No overloaded circuits

Mechanical			
S	N	N/A	
			Machinery has guards over moving parts

*Lab Captains are responsible for seeing that all concerns in the “Needs Improvement” category are addressed. **Monthly lab inspections** will be required until all items are “Satisfactory.”