

**LABORATORY SELF-INSPECTION FORM**

**INSTRUCTIONS:**

- Use this form to complete a self-inspection of your lab to ensure compliance with lab safety requirements. Lab self-inspection is recommended on a monthly basis, required at a minimum on a semi-annual basis.
- Print the form and complete the inspection by walking through the lab and observing lab activities. For all items marked “No”, develop and implement a corrective action plan. Save the inspection with other lab records.
- Notes:
  - This form is electronically fillable.
  - CTI stands for corrected at time of inspection
  - N/A stands for not applicable.

**Date of Inspection:** \_\_\_\_\_

**Conducted By:** \_\_\_\_\_

**Building:** \_\_\_\_\_

**Room Number(s):** \_\_\_\_\_

**Principal Investigator:** \_\_\_\_\_

**Department:** \_\_\_\_\_

#	Item	Yes	No	CTI	N/A	For all items marked “No”, write corrective action plan:		
						Corrective Action	Person Responsible	Due Date
<b>ADMINISTRATIVE CONTROLS</b>								
<b>Documentation/Training</b>								
1	Lab has knowledge of the EHS web page to access all necessary lab safety-related documents (policies, forms, templates, etc.) <b>NOTE:</b> it is recommended that the page be bookmarked by lab members. <a href="http://www.ehs.gatech.edu">www.ehs.gatech.edu</a>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
2	Training documentation is present in the lab or other accessible location: <ul style="list-style-type: none"> <li>• <u>Required:</u> Lab Safety 101 (every 3 years), Right-to-Know (annual)</li> <li>• <u>Process-specific:</u> General Biosafety (every 3 years), Bloodborne Pathogens (annual), Recombinant DNA (every 3 years), Shipment</li> </ul>							

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	<p>of Dangerous Goods (every 2 years), Using Chemical Inventory System-EHSA (one time), and Fire Safety (one time), Receipt of Hazardous Materials (one time) or others as appropriate.</p> <p><b>NOTE:</b> Use the <a href="#">EHS Training Tool</a> to determine what trainings are applicable and find links to access or registering for specific classes.</p>							
3	<p>Lab has an up-to-date biosafety approval(s):</p> <ul style="list-style-type: none"> <li>• Biological Materials Safeguards Committee for work with biological/infectious agents or biological toxins and/or;</li> <li>• Institutional Biosafety Committee for research involving recombinant or synthetic nucleic acid molecules).</li> </ul>							
4	<p>Lab maintains an inventory log for <a href="#">Select Agent Toxins</a> in Exempt Quantities and/or <a href="#">DEA Controlled Substances</a>.</p>							
5	<p>Lab uses EHS personnel to ship dangerous goods for them. Dangerous goods include but are not limited to hazardous chemicals, radioactive material, infectious/potentially infectious materials, dry ice, and genetically modified organisms/microorganisms.</p>							
<b>Signage/Lab Postings</b>								
6	<p>Doors leading into the lab are labeled with appropriate hazard symbols (biohazard, radiation, NFPA diamond, etc.).</p>							
7	<p>The following are posted near the lab entrance:</p> <ul style="list-style-type: none"> <li>• <a href="#">Pink Emergency Contact Card</a> with current contact info</li> <li>• Chemical Inventory</li> <li>• <a href="#">GT Emergency Procedures Sign</a></li> <li>• <a href="#">SDS Access Information Sign</a></li> </ul>							
8	<p>Lab equipment used to manipulate biological materials is labeled with the biohazard symbol.</p>							

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9	Lab freezers and refrigerators are labeled with "No Food or Drink Allowed", "No Flammables" (if appropriate) and the biohazard symbol (if used to store biological/infectious material).							
<b>Occupational Health</b>								
10	All lab members that work with animals and/or biological/infectious material are enrolled in the <a href="#">Biosafety Occupational Health Program</a> .							
11	All lab members that are required to wear respiratory protection enroll annually into the respiratory protection program.							
<b>ENGINEERING CONTROLS</b>								
<b>Cabinet/ Hood Certification</b>								
12	Chemical Fume Hoods (CFH) have been certified in the past 6 months by the Georgia Tech approved vendor and are functioning properly. The certification label is attached to the CFH.							
13	CFHs that have failed certification, have not been certified within the past 6 months or are not functioning correctly (i.e., flow is not between 80-120 LFM) are tagged out of service and are not in use.							
14	Biosafety Cabinets (BSC) have been certified in the past year by the Georgia Tech approved vendor and are functioning properly. The certification label is attached to the BSC.							
15	BSCs that have failed certification or have not been certified within the past year are tagged out of service and are not in use.							
16	All active laminar flow hoods/clean benches have been certified within the past year by the Georgia Tech approved vendor and are functioning properly. The certification label is attached and initialed by the vendor.							
<b>Cabinet/Hood Use</b>								

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17	CFH and BSC sashes are functioning properly, set to appropriate heights, not cracked, and alarms are not muted.							
18	Items are not stored on top of the BSC.							
19	Bunsen burners and/or open flames are not used in the BSC. Flammable gas is not used or connected to BSC gas lines (i.e., natural gas).							
20	Items stored in CFHs and BSCs do not disrupt normal use and/or airflow. Specifically, BSC grills are free from obstructions.	<input type="checkbox"/>						
21	Laminar flow hoods/clean benches are not used to work with hazardous material.							
<b>Centrifuges</b>								
22	Centrifuges have door interlocks (mechanism to keep lid closed during operation).							
23	Secondary containment (i.e., centrifuge safety caps, buckets, sealed rotors) is available and used when centrifuging infectious samples.							
<b>Emergency Equipment</b>								
24	A double ocular eyewash is available within 10 second access.							
25	A safety shower is available within 10 second access.							
26	Eyewashes and safety showers are free of obstruction for easy access during an emergency.							
27	Eyewashes are tested weekly by lab members and the test is documented. <b>NOTE:</b> Eyewashes equipped with safety caps have them in place.							
28	Safety showers are tested annually by GT Facilities and the test is documented.							
29	Fire extinguishers are appropriate for the hazards in the lab, visible and accessible in the lab.							
30	Fire extinguishers are visually inspected monthly by lab members. This is documented on the tag affixed to the equipment.							
<b>PERSONAL PROTECTIVE EQUIPMENT &amp; LAB ATTIRE</b>								
31	Lab coats are worn while working in the lab.							

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32	Reusable coats are laundered on a regular basis by an approved method.							
33	Safety glasses/goggles or another type of face protection are worn at all times in the lab.							
34	Gloves are worn while working in the lab and appropriate for the experiment (examples: thermal protection for -80°C freezers/liquid nitrogen, nitrile gloves for chemicals, etc.) Disposable gloves are not reused.							
35	Lab members remove gloves before leaving the lab and opening doors.							
36	Closed toed shoes and long pants/skirts are worn at all times in the lab. Examples of inappropriate attire include: sandals, torn jeans, and ballet flats.							
<b>HAZARDOUS MATERIAL STORAGE</b>								
37	NFPA/Right-To-Know compliant labels are affixed to in house made containers of solutions.							
<b>Chemicals</b>								
38	EHSA barcode labels are present on all primary chemical containers (including gas cylinders).							
39	Chemicals are segregated by hazard (i.e., acids and bases separated; acids are segregated by type: inorganic and organic).							
40	Hazardous liquids are stored no higher than shoulder height.							
41	Chemical containers are in good condition (i.e., no bulging, leaking, cracked caps or crystal formation).							
42	Secondary containment is present for all hazardous liquids. <b>Note:</b> squirt bottles and working solutions (i.e., flasks beakers, etc.) are exempt from this requirement.							
43	Lab members extract chemicals from one stock container until the container is empty.							
<b>Flammables</b>								
44	Flammables are stored in flammable safety cabinets when not in use.							

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45	Flammable materials are limited to 10 gallons/100 ft <sup>2</sup> of lab space.							
46	Flammables are stored in flammable safe or explosion proof refrigerators/freezers as necessary.							
<b>Compressed Gases</b>								
47	Gas cylinders are secured between the middle and shoulder of cylinder. <b>NOTE:</b> No more than two gas cylinders are secured with on restraint.							
48	Gas cylinders without a regulator attached have safety caps in place.							
49	Toxic or flammable gases present in the lab are compliant with the <a href="#">GT Dangerous Gas Safety Program</a> .							
<b>WASTE MANAGEMENT</b>								
<b>Sharps</b>								
50	Unprotected sharps are not left unattended, lying out on bench tops.							
51	Disposable sharps are properly disposed of in hard walled sharps container labeled with the principal investigator's name and containers are no greater than ¾ full.							
52	Needles are not bent, broken, recapped, removed from disposable syringes, or otherwise manipulated by hand before disposal.							
<b>Broken Glass</b>								
53	Broken glass containers with plastic liners are available and no greater than ¾ full. Lab does not use broken glass containers for the disposal of sharps, biohazard-contaminated glass, gloves, used bulbs, etc.							
<b>Chemical Waste</b>								
54	Chemical Waste is stored in an easily accessible location.							

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55	Chemical waste is properly labeled with a description of the contents, fill start date and owner's name. <b>NOTE:</b> EHS waste cards are filled out and fixed to containers ready for pick up by EHS.							
56	Chemical waste is stored in compatible containers (i.e., no acid in metal, no HF in glass, etc.).							
57	Chemical disposal containers are closed when not in use.							
58	Liquid chemical waste is in secondary containment.							
<b>Biological Waste</b>								
59	Animal carcasses are double bagged in biohazard bags and refrigerated/frozen until pick-up by EHS.							
60	Solid, non-sharp, biological waste is disposed of in biomedical waste boxes lined with biohazard bags (provided by EHS). These are packed for EHS pick up.							
61	Liquid biological waste is labeled appropriately and disinfected prior to disposal down the drain using the chemical disinfectant and contact time indicated on the lab's Biological Hygiene Plan.							
<b>ELECTRICAL SAFETY</b>								
62	Electrical panels are unobstructed (i.e., 3 ft of clearance in front of panels).							
63	Ignition sources are segregated from flammables/combustibles.							
64	Permanent equipment is plugged directly into an outlet (no extension cords).							
65	Electrical cords are not frayed or damaged.							
<b>EMERGENCY PREPAREDNESS</b>								
66	Lab is equipped with a spill kit.							
67	Lab members have been trained on how to clean up a minor spill.							
68	Lab members know how to report incidents and injuries.							
<b>HOUSEKEEPING</b>								

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69	Lab sinks are equipped with soap and paper towels for handwashing.							
70	Lab floor, bench tops and furniture are easily cleanable (i.e., can be wiped down) and can handle the anticipated loads.							
71	Lab is under restricted access (i.e., doors are lockable, doors are kept closed).							
72	Food/drinks/cosmetics/lotions are not present in the lab.	<input type="checkbox"/>						
73	Work surfaces are disinfected with or an appropriate disinfectant after each use and are visibly clean. Bench papers are changed on a regular basis.	<input type="checkbox"/>						
74	Work surfaces and aisle ways are uncluttered to allow space for safe work practices.							
75	Items are not stored within 18" of the ceiling to allow for safe function of building sprinkler systems.							