CHEMICAL HYGIENE SURVEY CHECKLIST

| Department: | Room Number: | | | |
|---|--------------|---|---|-----|
| PI/Supervisor: | Date: | | | |
| ITEM DESCRIPTION | | Υ | N | N/A |
| A. GENERAL LABORATORY SAFETY: | | | | |
| Is the University Chemical Hygiene Plan available to lab personnel? | | | | |
| Are exits clearly marked and unobstructed? | | | | |
| Are warning signs posted near the lab entrance, are MSDS's available? | | | | |
| Are emergency procedures and phone numbers clearly posted? | | | | |
| 5. Are aisles unobstructed? | | | | |
| 6. Are lab benches and work areas free of clutter? | | | | |
| 7. Do shelves have restraints, e.g., lips or wires? | | | | |
| 8. Are shelves and cabinets secured to walls? | | | | |
| 9. Is storage above eye level minimized? | | | | |
| 10. Are any chemicals stored next to or above sinks, or in the floor? | | | | |
| 11. Are safety showers/eyewashes unobstructed and functional? | | | | |
| 12. Is smoking, eating, drinking, gum chewing, and use of cosmetics prohibited in the lab? | | | | |
| 13. Are refrigerators and freezers clearly labeled "Not for Storage of Food for Human Consumption"? | | | | |
| 14. Are refrigerators with flammables stored in them of the explosion proof type? | | | | |
| 15. Is glassware/equipment in good condition? | | | | |

| ITEM DESCRIPTION | Y | N | N/A |
|---|---|---|-----|
| B. PERSONAL PROTECTION: | | | |
| Have workplace hazard assessments been completed? | | | |
| Are hoods free of clutter and not used for storage? | | | |
| 3. Has the hood been tested within the last 12 months and appropriately labeled by EH&S? | | | |
| 4. Is the sash kept at the lowest practical height? | | | |
| 5. Is the hood labeled "For Perchloric Acid Only", if designated as a perchloric acid hood? | | | |
| 6. Are goggles or face shields of the appropriate type available and being used? | | | |
| 7. Are lab coats of appropriate material available and being used? | | | |
| 8. Do personnel wear liquid repellant shoes that fully cover their feet? | | | |
| 9. Do personnel wear full length pants to their protect legs?. | | | |
| 10. Is long hair confined and exposed jewelry removed? | | | |
| 11. Are syringes/sharps properly stored and disposed? | | | |
| C. Respirators Used or Required? | | | |
| Is appropriate respiratory protection available? | | | |
| Are respirators cleaned/stored/inspected properly? | | | |
| 3. Is respirator training documented? | | | |

| ITEM DESCRIPTION | Υ | N | N/A |
|--|---|---|-----|
| D. Compressed Gases/DI Bottles | | | |
| Are cylinders upright and secured? | | | |
| 2. Are the cylinders in good condition? | | | |
| E. CHEMICALS: | | | |
| Are chemicals segregated by hazard class? Are chemicals color-coded? | | | |
| 2. Are acids stored properly? Are proper procedures observed for HF, HClO ₄ , & HNO ₃ ? | | | |
| Are organic and inorganic compounds segregated? | | | |
| 4. Are reactives stored properly? | | | |
| Are flammable liquids stored in NFPA approved cabinets if more than 10 gallons are present outside approved safety containers? | | | |
| Does the total volume of flammable liquids exceed: | | | |
| Non-instructional labs 5 gallon/100 ft ² with a 150 gallon maximum lnstructional labs 2.5 gallon/100 ft ² with a 75 gallon maximum | | | |
| 7. Are chemicals stored away from light and heat sources? | | | |
| 8. Are chemical containers in good condition, with labels intact, and metal cans free of rust, etc.? | | | |
| Are peroxide formers properly labeled and inventory tracked? | | | |
| 10. Is picric acid kept sufficiently wet, if on hand? Is a picric acid usage log kept? | | | |
| 11. Are large containers stored near the floor? | | | |

| ITEM DESCRIPTION | Υ | N | N/A |
|---|---|---|-----|
| 12. Are bottle carriers utilized when transporting hazardous chemicals between work areas? | | | |
| F. Carcinogens/Mutagens/Teratogens | | | |
| Do signs delineate designated areas where carcinogens, teratogens, and mutagens are used? | | | |
| Are designated areas properly cleaned and decontaminated periodically? | | | |
| 3. Are written procedures for carcinogen, teratogen, and mutagen use available? | | | |
| G. WASTE MANAGEMENT: | | | |
| Are EH&S provided labels affixed to all waste containers? | | | |
| 2. Are any full waste containers present? | | | |
| 3. Are containers closed unless actively adding/removing waste? | | | |
| 4. Are chemicals being disposed of down the sanitary sewer or by evaporation? | | | |
| Comments: | | | |

| PI/I aboratory Supervisor | Date |
|---------------------------|------|