Washington State University

LABORATORY SAFETY SELF-ASSESSMENT

All WSU workspaces are required to perform and document safety self-assessments annually as part compliance with the Department of Occupational Safety and Health (DOSH) and Federal Environmental Protection Agency (EPA) requirements. The attached Laboratory Safety Self-Assessment Form helps document laboratory safety assessments and assists laboratory researchers in identifying and correcting many unsafe practices and conditions. The unsafe practices and conditions identified on this form are prohibited by state laws or campus policies, or are not generally accepted as safe laboratory practices.

The procedures for completing this form are as follows:

- 1. Designate a qualified individual to assess each laboratory using this assessment form.
- 2. Send a photocopy of the completed form to your Safety Committee and Department Office.
- 3. Have the Principal Investigator or designee read and sign the self-assessment and then share the completed form with the other laboratory users. Discuss the findings and corrective actions in a laboratory meeting and encourage others to voice their safety concerns.
- 4. Correct each identified deficiency within 30 days and document the correction on the original form.
- 5. Keep the original form on file in the laboratory for at least one year, and make it available to DOSH, your department, your safety committee, and EH&S (or any other regulating office), if requested.
- **6.** If you need assistance correcting hazardous conditions identified or have any questions or concerns about laboratory safety, contact your Safety Committee, Department Chair, or Environmental Health & Safety (3055-3041).

This form is designed to help ensure compliance with DOSH, EPA, and other regulations. But it is more of an opportunity for your lab to communicate the safety culture of WSU and learn about the common hazards or communication hazards that you may not notice in your everyday activities.

EH&S can schedule with you, upon request, a spot check for many of the items on this form, comparing notations with actual conditions in the laboratory. Additionally, you should verify that completed self-assessment forms are being kept on file in the laboratory or department. These actions are done to ensure that questions are not misinterpreted and this program remains effective.

Please note:

This form may not address all specific activities involving research animals, biohazardous agents, lasers, radioactive materials or radiation-producing machines, which have separate and unique assessment requirements that are part of their approval process.

Washington State University LABORATORY SAFETY SELF-ASSESSMENT

	Laboratory I	nform	ation		
Department					
Building					
Room(s)					
Principal Investigator (PI)					
PI Phone number					
PI email address					
Lab Safety Contact					
Lab safety Phone number					
Lab Safety email					
Lab Phone number					
Radiation	BSL 2 or above	La	isers		Animals
	•		•		
	Chemical Typ	oes Pro	esent		
Particularly Hazardous	Substances		Flammables		
(carcinogens, acute to	kins, reproductive toxins)			
Regulated Carcinogens	3		Explosives		
Pyrophorics			Corrosives		
Peroxide formers			Water reactiv	/es	
<u> </u>			<u>.</u>		
	Inspection II	nforma	ation		
Date					
Inspector					
Поресто					
Inspector email					
•					

Please check the boxes in the "Initial Finding" column indicating Yes (satisfactory), No (needs correction), or N/A (not applicable). For all "No" answers, take the appropriate corrective action and indicate the "Completion Date" for that question. There is space at the end of the form to write comments.

HAZARD COMMUNICATION	Initial Finding
Has the Laboratory Signage information been updated within the last 12 months? Corrective Action: Select and assign a Chemical Hygiene Officer for the laboratory and have him/her register the laboratory for WSU's Laboratory Signage Program at MyFacilities. Corrective Action Completion Date:	□ Yes □ No □ N/A
2. Has the Chemical Hygiene Plan (CHP – Also known as the "Laboratory Standard") in the laboratory been completed or updated within the last 12 months? Corrective Action: Contact your Department Safety Committee or EH&S if you need a CHP or review SPPM 4.12 "Chemical Hygiene Plan for Laboratories". Have the Chemical Hygiene Officer for the laboratory read, fill out, and follow the guidance in the CHP. EH&S recommends posting the CHP on a computer in the laboratory along with a bookmarked link to the WSU lab safety manual. Alternatively you can print a hard copy and place it in the front of your designated lab safety manual. WAC 296-828. Corrective Action Completion Date:	□ Yes □ No □ N/A
 3. Have all laboratory employees reviewed the Laboratory Safety Manual (LSM) and CHP, documented their understanding by signing the last page of the CHP, and have access to the LSM and CHP? Corrective Action: Have all employees demonstrate their knowledge of the location of the LSM and the location and content of the CHP by signing the last page of the CHP, as required by WAC 296-828 and SPPM 4.12. Corrective Action Completion Date: 	□ Yes □ No □ N/A
4. Has the laboratory's chemical inventory been completed or updated within the last 12 months and is it accessible? Corrective Action: Update and bookmark the chemical inventory. Contact EH&S (335-3041) with any questions or assistance regarding the Chemical Inventory Program or affiliated hazardous materials programs. Corrective Action Completion Date:	□ Yes □ No □ N/A
5. Are written standard operating procedures (SOPs) available for activities involving hazardous chemicals or physical hazards and has training on them been documented? Corrective Action: All lab employees, including SOP authors, who work with hazardous chemicals or physical hazards, need to document that they have read and understand all SOPs relevant to their research (WAC 296-828). Keep your SOPs and training documentation in a safe place, such as an SOP binder, nearby, or on the computer with the CHP and accessible to all employees. If you need to develop new SOPs, first contact EH&S (335-3041) to determine if there is a general SOP that will satisfy your needs. If not, you may find instructions for writing SOPs in the LSM or at: http://ehs.wsu.edu/labsafety/manual/s4csop.html . Select the link "Standard Operating Procedures for Hazardous Chemicals and Particularly Hazardous Substances" for the template. Corrective Action Completion Date:	□ Yes □ No □ N/A

6. Have hazard assessments/PPE assessments been performed for minimizing risk of exposure to particularly hazardous substances, employees trained for hazard	☐ Yes ☐ No
certification, and hazard certification documented?	□ N / A
Corrective Action: All employees working with particularly hazardous substances must understand the risks of exposure to these substances. For more information, contact EH&S at 335-3041 or review the "Workplace Hazard Assessment: PPE" factsheet at http://ehs.wsu.edu/ohs/Factsheets/FAQWorkplaceHazAssessment.html . These hazard/PPE assessments should be attached to the SOPs and accessible to all employees. Corrective Action Completion Date:	
7. Are material safety data sheets/safety data sheets (MSDS or SDS) accessible for all	☐ Yes
employees in the laboratory where the hazardous chemical is used and has a copy of a newly acquired chemical been communicated to your department for filing with the Hazard Communication Standard?	□ No □ N/A
Corrective Action: All employees working with particularly hazardous substances must read and understand the information provided by the MSDS or SDS before working with the specific hazardous chemical (WAC 296-828-20015). For more information, contact EH&S at 335-3041 or review the "Chemical Safety Labels and MSDSs" at http://ehs.wsu.edu/ohs/factsheets/FAQMSDS.html . Copies of new MSDS or SDS sheets should also be made available to your department to be filed with the department's Hazard Communication Standard.	
Corrective Action Completion Date:	
8. Has other initial safety training, been performed and documented, as required by your department (safety orientation checklist)?	☐ Yes ☐ No ☐ N/A
Corrective Action: Click the link for the <u>safety orientation checklist</u> or obtain one from your department. All employees must have signed these forms before they begin any work. Make a copy for your records and turn in the form to your department. Introduce all new employees to the floor captain of your floor. <u>SPPM 2.16.1</u> . A list of applicable training topics can be found on <u>SPPM 2.18</u> . Note the list may not be all-inclusive. Contact EH&S at 335.3041 if you have any training questions.	
Corrective Action Completion Date:	
9. Have all lab employees that generate hazardous waste completed Hazardous Waste Handler training?	☐ Yes ☐ No ☐ N/A
Corrective Action: EH&S strongly recommends that all lab employees that work with hazardous materials take Hazardous Materials Spill Response training. This training is available through John Reed at EH&S (335-9565). You may also print the "Managing Hazardous Wastes" factsheet from the following link: http://ehs.wsu.edu/training/pdfs/FAQChemWaste.pdf .	
Corrective Action Completion Date:	
10. Have all employees working with substances requiring the use of a respirator been entered into the WSU Respirator Program?	☐ Yes ☐ No ☐ N/A
Corrective Action: Review the "Respiratory Protection: Breathe Easy" factsheet at: http://ehs.wsu.edu/ohs/factsheets/FAQRespiratoryProtection.html for more information and contact EH&S at 335-3041 for a fit test. SPPM 3.24.1	
Corrective Action Completion Date:	

11. Have all employees working with laboratory animals received documented Institutiona Animal Care and Use Committee (IACUC) training?	I
Corrective Action : Visit the <u>IACUC</u> website and select "IACUC Training" on the left side panel or contact them at 335-7951 for information about the training.	1771
Corrective Action Completion Date:	
12. Are all chemical storage cabinets properly labeled for the type of chemical to be stored (i.e. corrosive, flammable, etc)?	□ Yes □ No □ N/A
Corrective Action: Contact EH&S (335-3041) for assistance, if needed.	LIVA
Corrective Action Completion Date:	
13. Are all chemical containers (including squirt bottles and secondary containers) clearly labeled with contents and primary hazard(s)?	□ Yes □ No □ N/A
Corrective Action: Label all chemical containers. Contact EH&S (335-3041) for assistance	
Corrective Action Completion Date:	
14. Are specialty hoods labeled appropriately for their use (perchloric, biosafety, etc)?	☐ Yes ☐ No
Corrective Action: Contact the appropriate safety office (EH&S 355-3041, IBC 335-7195, RSO 335-8916, etc.) for appropriate labels to affix to these hoods.	□ N/A
Corrective Action Completion Date:	
15. Is each refrigerator and freezer in the laboratory labeled as either "safe" or "unsafe" for storage of flammables?	□ Yes □ No □ N/A
Corrective Action: Contact EH&S (335-3041) for assistance in determining if refrigerators are suitable for storage of flammables. The EH&S Fact Sheet "Laboratory Refrigerators and Freezers" is available at http://ehs.wsu.edu/labsafety/manual/s3frefrigeratorandfreezer.html . Contact EH&S for labels, or use an indelible marker.	
Corrective Action Completion Date:	
16. Are additional signs, as applicable by law, posted at the entrance and all areas where applicable work is carried out (i.e. radiation, BSL, Laser)?	□ Yes □ No □ N/A
Corrective Action: Contact the appropriate safety office (EH&S 355-3041, IBC 335-7195, RSO 335-8916, etc.) for appropriate labels to affix to these areas.	11/11
Corrective Action Completion Date:	
ENGINEERING CONTROLS	
17. Are fume hoods free of clutter and not used for long-term storage of equipment, chemicals or supplies not regularly used?	☐ Yes ☐ No ☐ N/A
Corrective Action: Clean-up fume hood space. Storage of large equipment can adversely affect proper airflow and containment of fume hood (always work more than 6" in from the front of the hood). Review the EH&S factsheet "Chemical Fume Hoods: Vital Ventilation" for more information on proper usage and maintenance of the fume hoods. Additional information can be found at: http://ehs.wsu.edu/labsafety/manual/s3cventilation.html .	
Corrective Action Completion Date:	

18. If your fume hood has an audible alarm, does it function properly and do users know how to visually monitor airflow through the fume hood?	☐ Yes☐ No☐ N/A
Corrective Action: Remove any cluttering in the fume hood and retest the airflow to determine if this corrects the problem. If no clutter, or the problem does not resolve, contact Facilities and Operations at 335-9000 to test the fume hood's function.	
Corrective Action Completion Date:	
19. Has the fume hood been certified within the last 12 months? (note the fume hood number and date in the comments section)	☐ Yes ☐ No ☐ N/A
Corrective Action: Facilities and Operations annually tests the fume hoods for functional performance. If you notice that the date is later than that on the expiration sticker, contact Facilities and Operations at 335-9000.	
Corrective Action Completion Date:	
20. If use of radioactive materials includes iodination, has a visual smoke test for the fume hood been performed?	☐ Yes ☐ No ☐ N/A
Corrective Action: According to SPPM 9.35, in addition to annual inspections, smoke tests should be annually performed on all fume hoods used for iodination. Contact the RSO for more information (335-8916).	
Corrective Action Completion Date:	
21. Is the sash marking presently at 18" and is the fume hood closed or lowered (depending upon manufacturer's specifications) when not in use?	☐ Yes ☐ No ☐ N/A
Corrective Action Completion Date:	
22. Have biosafety cabinets been certified within the last year?	☐ Yes ☐ No
Corrective Action: Contact the biosafety office (IBC) at 335-7195 for direction.	□ N/A
Corrective Action Completion Date:	
23. If you are working with machines with fast, moveable equipment parts, are these parts appropriately guarded? (mixer mills, box fans, centrifuges, etc)	☐ Yes ☐ No
Corrective Action: You must complete a hazard assessment for any machine you are working with that presents a hazard for creating projectiles or that you can stick your hand into and lose part of, if not all! Contact EH&S (335-3041) for the appropriate forms and guidance. If the hazard assessment determines that the current guard is not sufficient, or the guard is damaged, stop working with the machine immediately , label the machine defective or barricade the area if necessary, and contact the manufacturer for a new guard. If the machine is designed to run with the guard removed, and you are running it, you are defeating the purpose of the guard and must stop the machine immediately. Move the guard back into position to continue before restarting the machine.	□ N / A
Corrective Action Completion Date:	
HAZARDOUS MATERIALS The target "the residual production of the larget and the second control of the larget and	
The term "hazardous material" refers to hazardous chemicals, biological, or radiological materials; or research materials that have not been thoroughly evaluated for toxicity or environmental effects.	

	with or around hazardous substances? Corrective Action: Eye protection, lab coats, and gloves should be worn in the laboratory, unless otherwise indicated by the laboratory signage program sign by the entrance. Eye protection, lab coats, and gloves must be worn when working with hazardous materials. Corrective Action Completion Date:	□ No □ N/A
25.	Are flame resistant lab coats worn when working with pyrophoric chemicals?	□ Yes □ No
	Corrective Action: Flame resistant lab coats must be worn when working with pyrophoric materials. Stop working with the pyrophoric chemical until this requirement has been met. Contact EH&S (335-3041) for more information.	□ N/A
	Corrective Action Completion Date:	
	Are chemical containers, supplies and equipment stored away from the edges of benches and shelves unless shelf lips or other restraints are in place?	□ Yes □ No □ N/A
	Corrective Action: Store hazardous liquid chemicals away from sinks. Precariously stored hazardous items are to be relocated.	
	Corrective Action Completion Date:	
	Are all chemical containers (including squirt bottles and secondary containers) in good condition (not corroded or leaking)?	☐ Yes ☐ No ☐ N/A
	Corrective Action: Replace those containers that are corroded or leaking. Chemical containers must be kept closed when not in use.	
	Composition Astion Commission Detail	
	Corrective Action Completion Date:	
28.	Are minimal acid amounts stored outside of a corrosive cabinet and are all corrosive chemicals stored below eye level?	□ Yes □ No □ N/A
28.	Are minimal acid amounts stored outside of a corrosive cabinet and are all corrosive	□ No
28.	Are minimal acid amounts stored outside of a corrosive cabinet and are all corrosive chemicals stored below eye level? Corrective Action: Store all corrosive chemicals in a cabinet not made of metal and designed to accommodate these chemicals. Contact EH&S (35-3041) for assistance if you are unsure	□ No
28.	Are minimal acid amounts stored outside of a corrosive cabinet and are all corrosive chemicals stored below eye level? Corrective Action: Store all corrosive chemicals in a cabinet not made of metal and designed to accommodate these chemicals. Contact EH&S (35-3041) for assistance if you are unsure how to properly store these chemicals.	□ No
28.	Are minimal acid amounts stored outside of a corrosive cabinet and are all corrosive chemicals stored below eye level? Corrective Action: Store all corrosive chemicals in a cabinet not made of metal and designed to accommodate these chemicals. Contact EH&S (35-3041) for assistance if you are unsure how to properly store these chemicals. Corrective Action Completion Date:	□ No □ N/A
28.	Are minimal acid amounts stored outside of a corrosive cabinet and are all corrosive chemicals stored below eye level? Corrective Action: Store all corrosive chemicals in a cabinet not made of metal and designed to accommodate these chemicals. Contact EH&S (35-3041) for assistance if you are unsure how to properly store these chemicals. Corrective Action Completion Date: Are appropriate amounts of flammable liquids stored in approved flammable storage cabinets (maximum of 60 gallons for Class II or III liquids) and are there no more than 3 flammable cabinets per lab/fire area? (See SPPM 8.12 table for quantities of other	□ No □ N/A □ Yes □ No
28.	Are minimal acid amounts stored outside of a corrosive cabinet and are all corrosive chemicals stored below eye level? Corrective Action: Store all corrosive chemicals in a cabinet not made of metal and designed to accommodate these chemicals. Contact EH&S (35-3041) for assistance if you are unsure how to properly store these chemicals. Corrective Action Completion Date: Are appropriate amounts of flammable liquids stored in approved flammable storage cabinets (maximum of 60 gallons for Class II or III liquids) and are there no more than 3 flammable cabinets per lab/fire area? (See SPPM 8.12 table for quantities of other classes) Corrective Action: Remove excess chemicals from the laboratory. For more information,	□ No □ N/A □ Yes □ No
29.	Are minimal acid amounts stored outside of a corrosive cabinet and are all corrosive chemicals stored below eye level? Corrective Action: Store all corrosive chemicals in a cabinet not made of metal and designed to accommodate these chemicals. Contact EH&S (35-3041) for assistance if you are unsure how to properly store these chemicals. Corrective Action Completion Date: Are appropriate amounts of flammable liquids stored in approved flammable storage cabinets (maximum of 60 gallons for Class II or III liquids) and are there no more than 3 flammable cabinets per lab/fire area? (See SPPM 8.12 table for quantities of other classes) Corrective Action: Remove excess chemicals from the laboratory. For more information, review SPPM 8.12, WAC 296-24-33009 or contact EH&S (335-3041).	□ No □ N/A □ Yes □ No
29.	Are minimal acid amounts stored outside of a corrosive cabinet and are all corrosive chemicals stored below eye level? Corrective Action: Store all corrosive chemicals in a cabinet not made of metal and designed to accommodate these chemicals. Contact EH&S (35-3041) for assistance if you are unsure how to properly store these chemicals. Corrective Action Completion Date: Are appropriate amounts of flammable liquids stored in approved flammable storage cabinets (maximum of 60 gallons for Class II or III liquids) and are there no more than 3 flammable cabinets per lab/fire area? (See SPPM 8.12 table for quantities of other classes) Corrective Action: Remove excess chemicals from the laboratory. For more information, review SPPM 8.12, WAC 296-24-33009 or contact EH&S (335-3041). Corrective Action Completion Date: Are less than 10 gallons of flammable liquids stored in the lab outside of flammable	□ No □ N/A □ Yes □ No □ N/A □ Yes □ No □ N/A

31.	Are containers of hazardous materials stored in secondary containment to contain a spill?	☐ Yes☐ No☐ N/A
	Corrective Action: Provide secondary containment such as chemically resistant tubs or coated bottles. The container should be equal or greater in size than the primary container and must be labeled with the same information as the primary container.	
	Corrective Action Completion Date:	
32.	Are containers of hazardous materials not stored on the floor?	☐ Yes ☐ No
	Corrective Action: Do not store hazardous materials on the floor, especially in glass containers! When unavoidable, all containers are to be stored in plastic tubs or other secondary containment.	□ N / A
	Corrective Action Completion Date:	
33.	Are incompatible chemicals stored appropriately (e.g. acids separate from bases, oxidizers separate from flammables)?	☐ Yes ☐ No ☐ N/A
	Corrective Action: Segregate chemicals by hazard class. Contact EH&S (335-3041) for assistance with chemical segregation.	
	Corrective Action Completion Date:	
34.	Are strong acids and bases stored in secondary containment to prevent contact of the chemical with the storage cabinet?	☐ Yes☐ No☐ N/A
	Corrective Action: Provide secondary containment such as chemically resistant tubs in the storage cabinet for these acids or bases to sit in. (Remember to not store incompatible chemicals together!)	
	Corrective Action Completion Date:	
35.	Are ethers and other peroxide formers (such as isopropyl ether, tetrahydrofuran and diethyl ether) stored away from light and heat and labeled with the date they were opened and with the expiration date?	☐ Yes ☐ No ☐ N/A
	Corrective Action: Label all peroxide formers with opening date and expiration date. (Labels are available from EH&S – (335-3041). These chemicals may become explosive after prolonged storage. If any of these chemicals are present and have not been used for a long time, do not handle; contact EH&S (335-3041) and ask for potentially-explosive-chemical assistance. You may view a list of common peroxides at http://ehs.wsu.edu/training/pdfs/FAQPeroxChem.pdf . Visit the EH&S Factsheets "Peroxide Chemicals: Safe Use and Handling", for more information.	
	Corrective Action Completion Date:	
36.	Are combustible materials not stored with flammable materials or equipment that produces heat?	☐ Yes ☐ No ☐ N/A
	Corrective Action: Remove any combustible materials from a heat source. This includes any air containers used to clean hard-to-reach areas of machines that heat metals.	
	Corrective Action Completion Date:	

are they contained and labeled?	□ Yes
Corrective Action: Relocate these chemicals away from water and label them. Contact EH&S (335-3041) if you need assistance.	□ N/A
Corrective Action Completion Date:	
38. Have pyrophoric chemicals been segregated, contained, and labeled?	□ Yes
Corrective Action: Storage of these chemicals depends on the temperature at which they should be stored. Contact EH&S (335-3041) for assistance.	□ No □ N/A
Corrective Action Completion Date:	
39. Are carcinogens segregated and stored in designated areas (with signage)? Corrective Action: Carcinogens should not leave the laboratory. If you are working with a suspected carcinogen, make sure that your chemical hygiene plan addresses them. Assign a designated area of the laboratory to work with suspected carcinogens and make sure that	□ Yes □ No □ N/A
appropriate signage is located in these areas or that the laboratory signage program at the entrance of the lab informs people of the suspected carcinogen and general procedures. PPE should be donned upon entry to these designated areas and removed upon leaving. Do not walk around the halls with laboratory coats having come in contact with a suspected carcinogen. For more information visit: http://ehs.wsu.edu/labsafety/manual/s2ncarcinogens.html or contact EH&S at 335-3041.	
Corrective Action Completion Date:	
40. Is food not stored in refrigerators that contain hazardous materials?	☐ Yes ☐ No
Corrective Action: No food should be found in the laboratory. Likewise no laboratory chemicals should be found in a designated food refrigerator. Label all refrigerators and microwave ovens as "Food Only" or "No Food." Contact EH&S (335-3041) for labels, or use an indelible marker.	□ N/A
Corrective Action Completion Date:	
41. Are food and drinks consumed or stored away from hazardous chemicals, and is the laboratory free of application of any cosmetics?	☐ Yes ☐ No ☐ N/A
Corrective Action: Food and drink are to be consumed either in separate lunch room or - in designated areas (demarcated with "clean area" sign). Contact EH&S for suggestions to designate clean areas where food / drinks can be consumed. There must be no eating / drinking of food in areas where hazardous chemicals are used. Go to http://ehs.wsu.edu/labsafety/manual/s2abasicrules.html for the complete policy. Label all refrigerators and microwave ovens as	
"Food Only" or "No Food." Contact EH&S (335-3041) for labels, or use an indelible marker. You should also refrain from applying any cosmetics when working with potentially hazardous material.	
Corrective Action Completion Date:	
LABORATORY EQUIPMENT	

42.	Are approved Emergency Wash Facilities (Eyewash/Safety Showers) available and accessible within ten (10) seconds for use?	☐ Yes☐ No☐ N/A
	Corrective Action: WAC 296-800-15030 requires that these facilities be available to any employee working with a hazardous chemical that presents a hazard to their person or eyes, as outlined in the first aid protocols of that chemical, and that they be accessible within 10 seconds in the event of exposure. If you are working with a chemical that requires the availability of these wash facilities and your cannot access the facilities within ten seconds or are unsure if you are able to access the facilities within ten seconds, contact Environmental Health & Safety at 335-3041 for assistance. Corrective Action Completion Date:	⊔NA
43.	Is access to Emergency Eyewash/Safety Shower free of obstructions and tripping	□ Yes
	hazards?	□ No □ N/A
	Corrective Action: <u>WAC 296-800-15030</u> requires that these facilities be free of obstruction of any temporary or permanently stored materials.	
	Corrective Action Completion Date:	
44.	Are emergency eyewashes tested (flushed) weekly?	☐ Yes ☐ No
	Corrective Action: Verify that eyewashes that would be used in an emergency are being flushed weekly, including eyewashes that you rely on but that may be outside of the laboratory (such as in the shared areas). It is recommended that you document each test on an attached tag or electronic document. Contact Facilities and Operations for plumbing repairs by submitting a request through the myFacilities website (https://myfacilities.wsu.edu/). You may have to submit the request through your department administrator. Contact EH&S (335-3041) or Facilities and Operations (335-9000) if you have questions on testing of emergency eyewashes or showers, or review <a "="" href="https://speech.com/spe</td><td>□ N/A</td></tr><tr><th></th><th>Corrective Action Completion Date:</th><th></th></tr><tr><td>45.</td><td>Has the emergency shower been tested within the last year? Corrective Action: Contact Facilities and Operations for plumbing repairs by submitting a request through the myFacilities website (https://myfacilities.wsu.edu/). You may have to submit this request through your department administrator. Contact your department to have the area cleared before the scheduled test. Review	

47.	Are all compressed gas cylinders adequately secured with non-combustible restraints to keep the cylinders from falling?	☐ Yes☐ No☐ N/A
	Corrective Action: Use metal straps or chains. There should be one chain for the upper half and another for the lower half of large cylinders. Contact your Facilities and Operations at 335-9000 or put in a work request at myFacilities for assistance in installing gas cylinder restraints. In addition, laboratory users should remove the regulator and cap compressed gas cylinders when not in use and return them to the supplier if no longer needed. Compressed Gas storage and use information is available on the EH&S Factsheets "Compressed Gas Cylinders: Safety Under Pressure" (for a pamphlet, click here). EH&S also has a training video viewable upon request.	□ IVA
	Corrective Action Completion Date:	
48.	Do all compressed cylinders have safety caps in place when not in use and are they appropriately labeled with an "empty" or "MT" when empty?	☐ Yes ☐ No ☐ N/A
	Corrective Action: Train all employees to appropriately label empty cylinders. Contact EH&S (335-3041) to obtain the appropriate labels and label the cylinders.	
	Corrective Action Completion Date:	
49.	Does your lab have a fire extinguisher, is its location clearly marked with signage, and has been inspected within the last year?	☐ Yes ☐ No ☐ N/A
	Corrective Action: Report lost, damaged, or stolen fire extinguishers to WSU Facilities and Operations or the campus maintenance department immediately . Contact Life Safety at WSU Facilities and Operations (335-9000) to request that they inspect the fire extinguisher for proper charge. WSU encourages employees to obtain fire extinguisher training. Review SPPM 8.22 for more information about the use of and training for use of fire extinguishers.	
	Corrective Action Completion Date:	
50.	Is fire extinguisher access free of obstructions?	☐ Yes ☐ No
	Corrective Action Completion Date:	□ N /A
51.	Are sharp objects stored safely (to prevent accidental cuts or punctures)? SPPM 4.25 defines sharps as including "hypodermic syringes and needles, cannulas, scalpels, razor blades, and lancets. Dispose of broken plastic, glass pipettes, and glass capillary tubes separately".	□ Yes □ No □ N/A
	Corrective Action Completion Date:	
\mathbf{H}	AZARDOUS WASTE	
52.	Are approved sharps waste containers available for disposal of needles, blades and other sharps, are needles disposed of <i>without</i> recapping, and are the containers no more than $3/4^{\rm ths}$ full?	☐ Yes ☐ No ☐ N/A
	Corrective Action: Review <u>SPPM 4.25</u> for the definition of sharps or contact EH&S (335-3041) for more information. Purchase a sharps container, if needed. Train all laboratory employees to avoid bending, cutting, or re-capping syringe needles.	
	Corrective Action Completion Date:	

53. Are glass waste containers available, if needed, for the proper disposal of glass waste?	□ Yes
Corrective Action: Do not put broken glass in the general laboratory trash; put it in a separate and properly labeled container that can be disposed of safely. Review SPPM 4.26 for more information about proper disposal of glass waste.	□ No □ N/A
Corrective Action Completion Date:	
54. Is laboratory waste container(s) access clear? Are waste containers properly labeled with the waste accumulation start date, chemical common name(s) and concentrations, and primary hazard <i>before</i> accumulation begins?	□ Yes □ No □ N/A
Corrective Action: Remove any obstructions from the container. Label containers with appropriate chemical waste contents, hazards, and concentrations immediately upon the start of collection. EH&S strongly recommends all employees working with hazardous chemicals to receive training in hazardous waste management and disposal. Visit http://ehs.wsu.edu/es/ChemWasteDisposal.html to find more information or review SPPM 5.66 and SPPM 5.68 for policies regarding storage and disposal of hazardous waste managed by EH&S and EPA. Contact John Reed at EH&S (335-9565) for more information.	
Corrective Action Completion Date:	
55. Is laboratory waste container(s) kept in good condition, closed when not in use?	□ Yes □ No
Corrective Action: Contact EH&S for new containers if yours does not have a lid to close it. Remove waste when 3/4 full.	
Corrective Action Completion Date:	
56. Are containers of unwanted waste emptied on a regular basis and not overflowing?	□ Yes
Corrective Action: Remove regular waste to the trash bin on the loading dock. Contact EH&S or appropriate departmental contact if your hazardous waste is not being picked up in a timely fashion. Do not fill hazardous waste containers more than ³ / ₄ full.	
Corrective Action Completion Date:	
57. Is regular trash container(s) free of hazardous waste?	□ Yes
Corrective Action: Do not place hazardous waste in the regular trash. Train all employees to identify hazardous waste and the appropriate disposal of it. Label your trash containers "NO hazardous waste", "hazardous waste", if employees are confused.	□ No □ N/A
Corrective Action Completion Date:	
58. Are safety cans available and labeled for the disposal of solvents?	□ Yes
Corrective Action: Contact EH&S at 335-3041 if you are unsure what to do or do not know where to locate an appropriate safety can.	□ No □ N/A
Corrective Action Completion Date:	
59. Are funnels not left in hazardous waste containers inside or outside the fume hood?	□ Yes
Corrective Action: Remove the funnel from the hazardous waste container when not adding waste and store appropriately. Cap the hazardous waste container. Contact EH&S (335-3041) if you have any questions.	□ No □ N/A
Corrective Action Completion Date:	
MECHANICAL ELECTRICAL SAFETY	

60. Is electrical panel access clear (at least 36 inches in front)?	□ Yes
Corrective Action: Keep at least 36 inches (3 feet) of clear working space in front of a branch circuit panel (SPPM 2.72.1). Do not store materials in this working space. Do not cover an electrical panel with a poster!	□ No □ N/A
Corrective Action Completion Date:	
61. Are electrical panels properly labeled to identify electrical equipment that the panel controls and have employees been trained on their location and use? Corrective Action: Inform all employees of the location of branch circuit breaker panels. If the panel is not labeled, notify Facilities and Operations (335-9000) and follow up with them to ensure that the panels are properly labeled.	□ Yes □ No □ N/A
Corrective Action Completion Date:	
62. Are plugs, cords, and outlets free of visible damage and in good working condition? Corrective Action: Cords must be in good condition with no breaks in insulation or exposed wiring. Damaged cords must be replaced or repaired by qualified employees only! Review SPPM 2.72.2 for a list of prohibited uses or repairs of extension cords and power outlets. Corrective Action Completion Date:	□ Yes □ No □ N/A
63. Are extension cords available for immediate use and, if located in the vicinity of walkways, appropriately taped down and covered to reduce risk of trip hazards?	☐ Yes ☐ No ☐ N/A
Corrective Action: Contact Facilities and Operations (335-9000) or submit a work request through the MyFacilities website for installation of additional outlets where needed. Remove or relocate if they are a trip hazard.	
Corrective Action Completion Date:	
•	
64. Are extension cords connected appropriately to a power source and not overloading the power source because they are connected in series (daisy chained) with other extension cords or power strips?	☐ Yes ☐ No ☐ N/A
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 64. Are extension cords connected appropriately to a power source and not overloading the power source because they are connected in series (daisy chained) with other extension cords or power strips? Corrective Action: Remove daisy chained power cords. Contact Facilities and Operations (335-9000) or submit a work request through the MyFacilities website for installation of additional outlets where needed. Corrective Action Completion Date: 65. Are extension cords NOT present beneath or through doors, beneath carpets, or through ceilings? 	□ No
 64. Are extension cords connected appropriately to a power source and not overloading the power source because they are connected in series (daisy chained) with other extension cords or power strips? Corrective Action: Remove daisy chained power cords. Contact Facilities and Operations (335-9000) or submit a work request through the MyFacilities website for installation of additional outlets where needed. Corrective Action Completion Date: 65. Are extension cords NOT present beneath or through doors, beneath carpets, or through ceilings? Corrective Action: Review SPPM 2.72.2 for a list of prohibited uses or repairs of extension cords and power outlets and train employees to be aware of prohibited use of extension cords. Remove or relocate extension cords violating safety policy. 	□ No □ N/A □ Yes □ No
 64. Are extension cords connected appropriately to a power source and not overloading the power source because they are connected in series (daisy chained) with other extension cords or power strips? Corrective Action: Remove daisy chained power cords. Contact Facilities and Operations (335-9000) or submit a work request through the MyFacilities website for installation of additional outlets where needed. Corrective Action Completion Date: 65. Are extension cords NOT present beneath or through doors, beneath carpets, or through ceilings? Corrective Action: Review SPPM 2.72.2 for a list of prohibited uses or repairs of extension cords and power outlets and train employees to be aware of prohibited use of extension cords. 	□ No □ N/A □ Yes □ No
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GENERAL SAFETY	
67. Are aisles, exits and hallways clear of obstructions and slipping or tripping hazards?	☐ Yes ☐ No
Corrective Action : There should be at least 24 inches of clearance for the aisles.	□ N /A
Corrective Action Completion Date:	
68. Are laboratory doors closed when employees leave the laboratory?	☐ Yes ☐ No
Corrective Action : As per fire safety procedures (<u>SPPM 8.20</u>), laboratory doors should be closed on the way out of the lab. The procedure also states that the doors should be left unlocked in case fire precludes an exit and you must return (only when you are present, of course). The doors are built to slow the spread of a building fire.	
Corrective Action Completion Date:	
69. Are first aid kits available, properly stocked and accessible to all employees? Corrective Action: Review the table on SPPM 2.42 to determine the size of kit that you need for the number of employees you have and search online for the appropriate kit. You	☐ Yes ☐ No ☐ N/A
may contact EH&S at 335-3041 if you have any questions. Remember that the kit must contain "appropriate" first aid supplies and must be stocked. Not all kits provide everything. Ask your supervisor what is appropriate for the type of work you are performing. SPPM 2.42 also provides general information about use of first aid kits and responsibilities.	
Corrective Action Completion Date:	
70. Are there 18 inches of clearance from the top of stored materials to the ceiling in laboratories with fire sprinklers? (SPPM 8.23)	☐ Yes ☐ No
	□ N/A
Corrective Action Completion Date:	□ N/A
71. Are chemical spill kits available, have employees been trained to use them, and is there a written procedure that shows the laboratory's employees how to manage a hazardous chemical spill?	□ N/A □ Yes □ No □ N/A
71. Are chemical spill kits available, have employees been trained to use them, and is there a written procedure that shows the laboratory's employees how to manage a hazardous	□ Yes □ No
71. Are chemical spill kits available, have employees been trained to use them, and is there a written procedure that shows the laboratory's employees how to manage a hazardous chemical spill? Corrective Action: Show each new employee the "Chemical Spill Clean-Up and Reporting" section of the laboratory safety manual or SPPM 5.62, make sure they understand the criteria for minor spills, and document this training. If any of the minor spill criteria cannot be met, immediately evacuate the laboratory and call 911. Each laboratory must also have a written procedure for how its employees will manage hazardous chemical spills (i.e. when to clean,	□ Yes □ No
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74. Is the correct tubing used for Bunsen burners?	□ Yes
Corrective Action: Contact EH&S (335-3041) for the proper tubing needed for the Bunsen	□ No □ N/A
burner.	LIVA
Corrective Action Completion Date:	
75. Is your lab implementing the Washington State University – Control of Hazardous	
Energy (Lock out Tag out) program when work is being performed on energized	
systems?	□ N /A
Compating Astions If we let build a service and life and the service we let	
Corrective Action: If your lab builds, repairs, modifies or otherwise works with or on equipment that is 'hard wired' or 'hard plumbed' to a facility, utility or other energy source	
you are required to follow the EI-LOTO Program. Review the requirements of the LOTO	
Program and contact EH&S for assistance (335-3041).	
Corrective Action Completion Date:	
76. Does your laboratory have a land line phone or reliable cell phone service that can be	□ Yes
used in case of an emergency and is the land line or designated wall of the lab labeled	□ No
with emergency contact information?	□ N/A
Corrective Action: Obtain phone service either through IT or enhanced cell phone coverage.	
Contact EH&S for guidance (335-3041).	
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Indicate space with no phone service:	
Corrective Action Completion Date:	
<u>ERGONOMICS</u>	
77. Is overhead storage limited to lightweight, non-hazardous items, minimizing risk of	□ Yes
falling materials when removing them?	□ No □ N/A
Corrective Action: Nothing overhead should weigh more than 20 lbs. Relocated these items,	
if possible. Ensure that a step-stool is available for all employees trying to access items	
stored above their heads.	
Corrective Action Completion Date:	
Contestive riction Completion Bale.	
78. Are chemicals, equipment, glassware and supplies not in regular use stored in areas	□ Yes
other than workstations?	□ No □ N/A
Corrective Action: Remove unwanted chemicals through EH&S, using the chemical	□ IV/A
collection request forms (http://forms.ehs.wsu.edu/Main.aspx) and unwanted materials	
through Surplus Stores (http://facops.wsu.edu/Surplus/sur_default.asp).	
Corrective Action Completion Date	
Corrective Action Completion Date:	
79. Are ergonomic evaluations done for laboratory employees who use a computer four or	□ Yes
	□ No
79. Are ergonomic evaluations done for laboratory employees who use a computer four or more hours per day and for those who have requested an ergonomic evaluation?	
79. Are ergonomic evaluations done for laboratory employees who use a computer four or more hours per day and for those who have requested an ergonomic evaluation? Corrective Action: Contact your supervisor or department to have a trained ergonomic	□ No
79. Are ergonomic evaluations done for laboratory employees who use a computer four or more hours per day and for those who have requested an ergonomic evaluation? Corrective Action: Contact your supervisor or department to have a trained ergonomic evaluator assess the computer workstations and document the evaluations. If your department does not have an ergonomic evaluator, contact EH&S (335-3041). Also, laboratory	□ No
79. Are ergonomic evaluations done for laboratory employees who use a computer four or more hours per day and for those who have requested an ergonomic evaluation? Corrective Action: Contact your supervisor or department to have a trained ergonomic evaluator assess the computer workstations and document the evaluations. If your department does not have an ergonomic evaluator, contact EH&S (335-3041). Also, laboratory ergonomic information (such as microscope use and pipetting) is available at	□ No
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80.	Is leg space beneath benches and desks not used for storage in a way that prevents proper ergonomic posture? Corrective Action: For more information on proper laboratory ergonomics visit EH&S's Laboratory Ergonomics website at http://ehs.wsu.edu/ohs/laboratoryergonomics.html . Corrective Action Completion Date:	□ Yes □ No □ N/A
81.	Are laboratory tasks such as repetitive pipetting, prolonged awkward postures at a microscope, or frequent manipulation of knobs or small hand-held tools reviewed to reduce ergonomic risk factors? Corrective Action: For simple solutions to ergonomic risks in laboratories, visit WSU's EH&S website at http://ehs.wsu.edu/ohs/laboratoryergonomics.html . There is a presentation on laboratory ergonomics and a pipetting factsheet for review. Contact your Principal Investigator, Department Safety Representative, or EH&S (335-3041) if a more in-depth evaluation is needed. Corrective Action Completion Date:	□ Yes □ No □ N/A
82.	Are excess materials stored in neat, secure manner that provides easy access and reduces the potential for falling, collapsing, rolling or spreading of the material? Corrective Action: Organize materials in a way to reduce these risks. Keep heavy items near the floor and stored below lighter weight items. EH&S recommends their training video on ergonomic safety in the laboratory. Access the link to their video at http://ehs.wsu.edu/ohs/laboratoryergonomics.html . Corrective Action Completion Date:	☐ Yes ☐ No ☐ N/A

OTHER HAZARDS

List any other hazardous conditions in need of correction or investigation that are not covered on this general laboratory safety self-assessment form. Assign and document correction of each hazardous condition or concern.

1			
2.			
3.			
4.			
5.			

OTHER COMMENTS

The space provid	ed below can be used to comment on any conditions described in the above questions.
Date:	Signature of Principal Investigator or Designee: