

UH MANOA LAB SAFETY INSPECTION CHECKLIST

Room #: _____ Date of Visit: ____/____/____

Principal Investigator: _____ Chair _____ Department: _____

Escorted by: _____ Inspector(s): _____

SECTION 1: OPERATION/GENERAL SAFETY

1. Is laboratory locked when not in use? Yes___ No___ N/A___
2. Are disposable containers for broken glass provided and specifically labeled for glass disposal ("Broken Glass")? Yes___ No___ N/A___
3. Are emergency eye washes and showers available, unobstructed and inspected quarterly (contact EHSO at labsafe@hawaii.edu if due for inspection)? Yes___ No___ N/A___
4. Have all chemical fume hoods passed inspection within the past 12 months (contact EHSO at labsafe@hawaii.edu if due for inspection)? Yes___ No___ N/A___
5. Are chemical fume hoods free from excessive storage which reduces efficiency? Yes___ No___ N/A___
6. Is a fire extinguisher readily accessible? Yes___ No___ N/A___
7. Is a first aid kit readily accessible? Yes___ No___ N/A___
8. Is laboratory housekeeping in good order (are bench tops, shelves, and floors neat, and well-organized with no visible debris)? Yes___ No___ N/A___
9. Are food and beverages prepared and consumed in areas separate from chemicals (in use or in storage)? Yes___ No___ N/A___

Notes:

SECTION 2: CHEMICAL SAFETY

1. Are only approved refrigerators used for cold storage of flammable liquids? Yes___ No___ N/A___
2. Are flammable chemicals stored in a safe manner (more than 10 gallons stored in approved cabinets)? Yes___ No___ N/A___

3. Are incompatible chemicals (i.e. flammables and oxidizers; nitric acid/acids; acids and bases) segregated in storage? Yes___ No___ N/A___
4. Are all chemicals properly stored and kept in closed, labeled containers that are in good condition? Yes___ No___ N/A___
5. Is the lab free from excess chemicals in storage? Yes___ No___ N/A___
6. Are air and water reactive chemicals properly stored? Yes___ No___ N/A___
7. Does the laboratory test peroxide-forming chemicals? Yes___ No___ N/A___
8. Are all highly flammable and toxic procedures performed in a fume hood? Yes___ No___ N/A___
9. Are chemical storage areas identified with signs (flammables, corrosives, carcinogens, poisons, etc.) Yes___ No___ N/A___
10. Is a chemical spill kit available (with posted procedures)? Yes___ No___ N/A___
11. Is protective clothing, goggles, face shields, aprons, gloves, and other PPE available and used when the nature of the work requires it? Yes___ No___ N/A___
12. Is any chemical waste generated in this lab (if so, go to pg. 4) Yes___ No___

Notes:

SECTION 3: COMPRESSED GAS CYLINDERS

1. Are all compressed gas cylinders (whether full or empty) secured to prevent falling? (i.e. strapped in a bracket or holder). Yes___ No___ N/A___
2. Are protective caps in place on compressed gas cylinders when not in use? Yes___ No___ N/A___
3. Are incompatible gases properly segregated when not in use? Yes___ No___ N/A___

SECTION 4: ELECTRICAL

1. Are the cords of all electrical equipment in good condition? Yes___ No___ N/A___
2. Are cords used properly (surge protectors not piggy-backed, clear of burners, sinks, aisles, etc.)? Yes___ No___ N/A___

Notes:

SECTION 5: AISLES, EXITS, CORRIDORS, STAIRS, FLOORS

1. Are all areas maintained to provide free and unobstructed access to the exits? Yes___ No___ N/A___

2. Are all floors kept clean and dry and in good repair? Yes___ No___ N/A___

Notes:

SECTION 6: DOCUMENTATION

1. Does the lab have access to a current Chemical Hygiene Plan? Yes___ No___

2. Are Standard Operating Procedures written for experiments posing an increased hazard? Yes___ No___ N/A___

3. Does the lab maintain a written (annually updated) chemical inventory? Yes___ No___ N/A___

4. Are MSDS's available for all chemicals in the lab? Yes___ No___ N/A___

5. Have personnel attended initial Lab Safety Training? Yes___ No___ N/A___

6. Is refresher lab safety training conducted annually with all staff? Yes___ No___ N/A___

7. Are emergency notification procedures, contacts with current phone numbers, and hazard warning signs posted at the entry to the lab? Yes___ No___ N/A___

Notes:

HAZARDOUS WASTE AUDIT CHECKLIST (Manoa Campus Facilities)

Date: _____ Bldg./Room: _____ PI: _____

ATTRIBUTE	YES	NO	COMMENTS
1. Is any hazardous waste generated in the laboratory? If yes, how is it disposed of?			
2. Is any non-hazardous chemical waste generated in the laboratory? If yes, how is it disposed of?			
3. Does the satellite accumulation area store less than 55 gallons of all hazardous waste and less than one quart of P waste?			
4. Is the satellite accumulation area in the same laboratory where the waste is generated?			
5. Is there at least one person in the laboratory who has received training in the Environmental Requirements for Hazardous Waste Generators? Are the other persons who generate waste in the laboratory familiar with the waste disposal requirements?			
6. Is the satellite accumulation area kept in good housekeeping condition?			
7. Are all waste containers in good condition (e.g., not corroded or leaking, and properly sealed or closed)?			
8. Are all waste containers properly labeled as to their contents (correct chemical names, readable labels, and percentages of individual components for mixtures)?			
9. Are secondary containments used where required?			
10. Are waste containers separated by hazard class so as to avoid incompatible storage?			
11. Is mercury containing equipment being used in the laboratory? If yes, is a Hg spill kit available? Does someone know how to use it?			