

## CHEMICAL HYGIENE SURVEY CHECKLIST

Department:	Room Number:			
PI/Supervisor:	Date:			
ITEM DESCRIPTION	Y	N	N/A	
<b>A. GENERAL LABORATORY SAFETY:</b>				
1. Is the University Chemical Hygiene Plan available to lab personnel?				
2. Are exits clearly marked and unobstructed?				
3. Are warning signs posted near the lab entrance, are MSDS's available?				
4. 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>B. PERSONAL PROTECTION:</b>			
1. Have workplace hazard assessments been completed?			
2. 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 " <b>For Perchloric Acid Only</b> ", 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 repellent 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?			
<b>C. Respirators Used or Required?</b>			
1. Is appropriate respiratory protection available?			
2. Are respirators cleaned/stored/inspected properly?			
3. Is respirator training documented?			

ITEM DESCRIPTION	Y	N	N/A
<b>D. Compressed Gases/DI Bottles</b>			
1. Are cylinders upright and secured?			
2. Are the cylinders in good condition?			
<b>E. CHEMICALS:</b>			
1. Are chemicals segregated by hazard class? Are chemicals color-coded?			
2. Are acids stored properly? Are proper procedures observed for HF, HClO <sub>4</sub> , & HNO <sub>3</sub> ?			
3. Are organic and inorganic compounds segregated?			
4. Are reactives stored properly?			
5. Are flammable liquids stored in NFPA approved cabinets if more than 10 gallons are present outside approved safety containers?			
6. Does the total volume of flammable liquids exceed:  Non-instructional labs            5 gallon/100 ft <sup>2</sup> with a 150 gallon maximum Instructional labs                 2.5 gallon/100 ft <sup>2</sup> 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.?			
9. 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	Y	N	N/A
12. Are bottle carriers utilized when transporting hazardous chemicals between work areas?			
<b>F. Carcinogens/Mutagens/Teratogens</b>			
1. Do signs delineate designated areas where carcinogens, teratogens, and mutagens are used?			
2. Are designated areas properly cleaned and decontaminated periodically?			
3. Are written procedures for carcinogen, teratogen, and mutagen use available?			
<b>G. WASTE MANAGEMENT:</b>			
1. 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:

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PI/Laboratory Supervisor

\_\_\_\_\_  
Date