

APHIS SAFETY INSPECTION CHECKLIST (Laboratories)

USDA-APHIS

INSTRUCTIONS: Questions regarding specific standards may be directed to the Collateral Duty Safety and Health Officer, or to SHES, MSD, Unit 115, 4700 River Road, Riverdale, MD 20737-1228. Refer to the APHIS Safety and Health Manual, Chapter 2 and 10 for additional information.

| | | |
|-------------------|--------------------------------|--------------------|
| NAME OF INSPECTOR | LOCATION OF FACILITY INSPECTED | DATE OF INSPECTION |
|-------------------|--------------------------------|--------------------|

Complete all items ("X" one column). A "Not Applicable" (N/A) column is provided because all items and conditions may not apply to each area. Explain all "NO" responses in "Section F - Corrective Action."

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| | YES | NO | N/A | | YES | NO | N/A |
|--|-----|----|-----|---|-----|----|-----|
| A. Refrigerator & Environmental Chambers: | | | | D. Emergency Showers and Eye Wash Stations: | | | |
| 1. Are the proper types of refrigerators being used, where necessary? | | | | 21. Are emergency showers and eye wash stations within 10 seconds or 100 feet of hazards? | | | |
| 2. Are refrigerators properly labeled? | | | | 22. Are they within 10 feet of corrosives? | | | |
| 3. Is food prohibited in the laboratory refrigerators? | | | | 23. Is the shower water flow rate 30 gpm? | | | |
| 4. Can walk-in refrigerators be opened from inside, even when locked? | | | | 24. Is the eye wash flow rate 0.4 gpm? | | | |
| 5. Are fire alarms or warning devices installed inside walk-in environmental chambers and refrigerators? | | | | 25. Are they tested quarterly? | | | |
| B. Autoclaves and Sterilizers: | | | | E. Laboratory Hoods: | | | |
| 6. Are all safety valves and safety interlocks checked regularly? | | | | 26. Are containers and equipment at least 6 inches back from the face of the hood? | | | |
| 7. Is the floor gasket in good condition and sealing properly? | | | | 27. Is the airflow not obstructed by the arrangement of equipment? | | | |
| 8. Are temperature and pressure gauges legible and in good condition? | | | | 28. Is the storage of chemicals or non-essential apparatus in the hood prohibited? | | | |
| 9. Are drains clean and free flowing? | | | | 29. Is the hood performance checked annually and anytime a malfunction is suspected? | | | |
| 10. Are protective gloves available for handling hot items? | | | | 30. Is the hood smoke tested semi-annually? | | | |
| 11. Are procedures for autoclaving liquids clearly posted? | | | | 31. If the hood sash is required to be partially closed for proper operation, is the hood labeled and the appropriate sash closure point clearly indicated? | | | |
| 12. Are only authorized personnel allowed to use autoclaves and sterilizers? | | | | 32. Are hood performance records maintained and accessible to employees? | | | |
| C. Compressed Gases: | | | | F. Hazardous Chemical Storage: | | | |
| 13. Are cylinders fastened securely? | | | | 33. Are flammable chemicals stored in specialized storage rooms or cabinets? | | | |
| 14. Are cylinders stored upright? | | | | 34. Is chemical compatibility considered? | | | |
| 15. Are cylinders capped except when in use? | | | | 35. Is spark-proof electrical equipment provided in flammable storage rooms? | | | |
| 16. Are flammables stored away from ignition sources? | | | | 36. Are chemical storage rooms ventilated? | | | |
| 17. Are cylinders legibly marked? | | | | 37. Are provisions made to prevent excessive heat or freezing of stored chemicals? | | | |
| 18. Are empty cylinders marked? | | | | 38. Does an inventory system exist for receiving chemicals? | | | |
| 19. Are gauges for oxygen regulators marked "use no oil?" | | | | 39. Are records kept on the shelf life of chemicals? | | | |
| 20. Have compressed gas cylinders received a pressure test in the past 5 years? | | | | 40. Are chemical containers labeled properly and clearly? | | | |

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| F. Hazardous Chemical Storage: (continued) | YES | NO | N/A | I. Biological Safety Program: | YES | NO | N/A |
|---|-----|----|-----|--|-----|----|-----|
| 41. Do emergency cleanup procedures and equipment exist for chemicals? | | | | 62. Brucella, Chlamydia, Leptospira Laboratories, Biosafety Level 2 | | | |
| 42. Are adequate adsorptive materials and neutralizing agents available? | | | | a. Is access limited or restricted? | | | |
| 43. Has the fire department been notified of any hazardous chemicals or pesticides stored at the location, if necessary? | | | | b. Are work surfaces decontaminated daily? | | | |
| 44. Are aisles and emergency exit routes clear? | | | | c. Are work surfaces decontaminated after any spill of viable material? | | | |
| G. Hazardous Waste: | | | | d. Are bench tops impervious to water? | | | |
| 45. Are hazardous waste containers in good condition and free from leaks, spills, or damage? | | | | e. Are all areas readily accessible for cleaning? | | | |
| 46. Are the containers properly closed? | | | | f. Is a sink available for hand washing? | | | |
| 47. Are hazardous wastes compatible with containers being used for storage? | | | | g. Is an autoclave available? | | | |
| 48. Are incompatible hazardous wastes separated? | | | | h. Are infectious wastes decontaminated? | | | |
| 49. Are spill containment supplies available? | | | | i. Is eating, drinking, and applying cosmetics prohibited in the work area? | | | |
| 50. Are employees trained in spill cleanup procedures? | | | | j. Are wastes stored in leak proof durable containers? | | | |
| 51. Are "Hazardous Waste Storage" signs posted ("Flammable, No Smoking," etc., if necessary)? | | | | k. Are warning signs posted? | | | |
| 52. Are containers properly labeled? | | | | l. Is there an insect and rodent control program? | | | |
| 53. Are procedures written for disposal of waste materials, including hazardous chemicals, biological waste, and radioactive waste? | | | | m. Are laboratory coats, gowns, smocks, uniforms, or safety glasses worn in the laboratory? | | | |
| 54. Are monthly records maintained of hazardous waste generation? | | | | n. Are only needle-locking syringes or disposable syringes used? | | | |
| 55. Is the waste collected, stored and disposed of in accordance with applicable regulations (e.g., 40 CFR, Parts 261, 262, etc.)? | | | | o. Are waste syringes and other sharps properly disposed of in puncture-resistant, leak-proof containers? | | | |
| 56. Are programs in place to minimize waste, when possible? | | | | p. Is a safety manual available? | | | |
| H. Personal Protective Equipment: | | | | q. Are biological safety cabinets or other physical containment devices used for procedures with a potential for creating infectious aerodols? | | | |
| 57. Is the appropriate personal protective equipment available? | | | | 63. Is Biosafety Level 3 containment equipment available, where necessary? | | | |
| 58. Are employees trained in the handling, use, and care of the equipment? | | | | J. Infectious Waste: | | | |
| 59. Are respirators stored in a convenient and sanitary location? | | | | 64. Is infectious waste contained and stored in a manner which affords protection from animals, weather, and does not provide a breeding place or food source for insects and rodents? | | | |
| 60. Are respirators inspected routinely? | | | | 65. Is infectious waste stored in containers which are impervious to moisture? | | | |
| 61. Have employees who are required to wear respirators received medical approval, as described in Chapter 11, Section 3 of the Safety and Health manual? | | | | 66. Do waste containers have a strength sufficient to preclude ripping, tearing, leaking, or bursting? | | | |
| | | | | 67. Are waste containers labeled properly (red or orange in color with biohazard label)? | | | |
| | | | | 68. Are sharps stored in rigid puncture-resistant containers? | | | |
| | | | | 69. Are autoclaves routinely tested? | | | |
| | | | | 70. Is infectious waste disposed of properly? | | | |

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K. Records:

Are the following written records or materials available?

- a. Employee safety training?
- b. OSHA injury and illness records?
- c. Material safety data sheets?
- d. List or inventory of hazardous chemicals?
- e. Emergency procedures?
- f. Chemical Hygiene Plan?
- g. Safety Manual?
- h. Safety inspections and assessments?
- i. Exposure monitoring data?
- j. Medical surveillance data?

| YES | NO | N/A |
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L. Miscellaneous:

- Are broken glass containers available?
- Are no eating, drinking, and smoking restrictions enforced?
- Do employees participate in the Occupational Medical Monitoring Program?
- Are employees trained to know the symptoms of chemical exposure?

| YES | NO | N/A |
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M. Other (Enter items not listed in this checklist that are applicable to your section)

N. Corrective Action

| ITEM NO. | DEFICIENCIES IDENTIFIED | REQUIRED ACTIONS TO CORRECT DEFICIENCIES | ACCOMPLISHMENT |
|-----------------|--------------------------------|---|-----------------------|
| | | | |