



# Laboratory Safety Self-Assessment

Department of Environmental Health and Safety  
1800 Arthur St. Louisville, KY 40208  
(502) 852-2830

Date: \_\_\_\_\_ Lab Designee: \_\_\_\_\_

Building: \_\_\_\_\_ Room Number: \_\_\_\_\_

Principal Investigator: \_\_\_\_\_

Please note:

- *This form is meant to function as a self-assessment and is not a substitute for a DEHS full annual assessment. Self-assessments are intended to assist labs in promoting a safe work environment and strong safety culture while remaining compliant with guidelines and best practices set forth by the Occupational Health and Safety Administration (OSHA), Environmental Protection Agency (EPA), National Institute of Health (NIH), Centers for Disease Control and Prevention (CDC), Department of Transportation (DOT), and other agencies.*

Instructions:

- *Complete this form manually while assessing the lab.*
- *IM stands for Improvement Made during the assessment. Please note in the Comments section what actions were taken to improve the assessment item.*
- *Input your answers into BioRAFT using the Laboratory Self-Assessment. Select the Self Inspections tab from your lab view page. Click 'Add a new Self Inspection,' select 'Laboratory Self-Assessment' from the drop menu, and click 'Inspect.' For IM responses, choose Yes and use the Add Details feature to input your Comments from this form. Click Save at the bottom when complete. An instructions document for using the BioRAFT Self Inspection module is available on the Lab Safety Assessment Program website.*

Ref #	Assessment Item	Yes	No	IM	Comments
<b>1.00 Administrative Controls</b>					
<b>Documentation and Training</b>					
1.01	Applicable safety training is up to date and can be verified through documentation for all lab personnel, including general, lab-specific, and Standard Operating Procedure (SOP) training. Documentation is easily accessible.				
1.02	An updated chemical hygiene plan (CHP), chemical inventory, Safety Data Sheets (SDS), and applicable SOPs are easily accessible to lab personnel. Any volunteers and minors working in the lab have completed the appropriate forms.				
<b>Hazard Communication</b>					
1.03	External lab doors are posted with signage that displays all hazards present in the lab and current emergency information and contacts. All exit signs are functional, have working emergency lights, and are not obstructed from view.				

1.04	Chemical storage cabinets are labeled with the class of chemicals stored, including relevant hazards. Refrigerators are labeled for the storage or no storage of flammable liquids. Proper biohazard signage is present on applicable lab equipment.				
<b>2.00 Emergency</b>					
<b>Emergency Equipment</b>					
2.01	Eyewash station and emergency shower certifications tags are up to date. Access to eyewash stations and safety showers is unobstructed.				
2.02	Sufficiently stocked spill kits for all relevant chemical types are available and easily accessible. Access to sufficiently stocked first aid kit is unobstructed. If hydrofluoric acid (HF) is in use in the laboratory, a sufficient supply of unexpired 2.5% calcium gluconate gel is readily available.				
<b>Fire Safety</b>					
2.03	Fire extinguisher inspection tags are current and contain tamper indicators. Access to all fire extinguishers is unobstructed. Access to all fire alarm pull stations is unobstructed.				
2.04	Evacuation routes are posted, and all lab personnel are aware of evacuation procedures. All laboratory doorways are unobstructed.				
<b>Emergency Procedures</b>					
2.05	All lab personnel are aware of applicable Exposure Control Plans (ECPs) and lab-specific emergency SOPs and can easily access them. Emergency contact numbers are easily accessible.				
2.06	All lab personnel are aware of the incident report form. All spills, accidents, and exposures are reported to Principal Investigators and DEHS immediately. All lab personnel know to contact ULPD (502-852-6111) in the event of a non-life threatening emergency.				
<b>3.00 General Safety</b>					
<b>Housekeeping/Work Practices</b>					
3.01	Food, drinks, cosmetics, and lotions are not present in lab. Mouth pipetting is prohibited.				
3.02	An uncluttered sink is present for washing hands and is supplied with soap and paper towels. Lab personnel wash their hands before leaving lab.				
3.03	Lab is clear of trip hazards (equipment, boxes, electrical cords, etc.) and the floor is clean (no noticeable debris and spills). Access to circuit breaker and electrical boxes is unobstructed.				
<b>Sharps</b>					
3.04	Broken glass containers with plastic liners are available and no more than $\frac{3}{4}$ full.				
3.05	Disposable sharps are placed in a specific sharps disposal container that is kept shut or designed to prevent the contents from spilling. The container is				

	kept no more than $\frac{3}{4}$ full. Unprotected sharps are not present in the lab.				
<b>4.00 Personal Protective Equipment (PPE)</b>					
4.01	PPE is not worn outside of the lab.				
4.02	Gloves are worn when hands may contact potentially hazardous materials and disposable gloves are not washed or reused. Alternatives to latex gloves are available.				
4.03	Lab coats and other protective clothing (gowns, shoe covers, etc.) are available and worn when necessary. Closed toed shoes and long pants are worn at all times.				
4.04	Safety glasses are available and worn in lab when needed. Additional protection, such as safety goggles and face shields, are available when deemed necessary.				
4.05	If lab personnel are wearing respirators, DEHS has conducted a hazard assessment to confirm respiratory protection is needed and which type offers the best protection. Required training, medical surveillance, and fit testing are complete and up to date for all lab personnel using respiratory protection.				
<b>5.00 Chemical Safety</b>					
<b>General Chemical Storage</b>					
5.01	Chemical containers are in good condition and properly closed when not in use. All chemical containers are legibly labeled with at minimum the full chemical name in English and specific hazards. Working solutions may be labeled with abbreviations.				
5.02	Stored chemicals are segregated by compatibility. Liquid corrosives are stored in corrosive cabinets in secondary containment. Flammables are stored in an approved flammable cabinet or refrigerator.				
<b>Chemical Fume Hoods (CFH)</b>					
5.03	All CFH performance certifications are within the past 12 months and a label is attached.				
5.04	CFH is not overcrowded with equipment, chemicals, etc., and all materials are at least 6 inches from the hood face. Airflow is not blocked. CFH sashes are kept at or below the working height when in use and are closed when not in use. The airflow alarm is functional and not muted.				
<b>Compressed Gas Cylinders</b>					
5.05	Compressed gas cylinders are labeled as to their contents, stored upright, and are secured by a chain about $\frac{2}{3}$ up the cylinder. Cylinders are capped when not in use and have a pressure regulator when in use. Flammable gas cylinders are stored separately from oxidizing gas cylinders.				
<b>Chemical Waste</b>					
5.06	Waste containers are labeled with 'Hazardous Waste' and all waste constituents. Waste containers remain				

	closed when not in use and stored, if necessary, in secondary containment that is compatible with waste content.				
5.07	Chemical waste is segregated by compatibility (e.g. acid waste not stored with alkaline waste), and containers are compatible with their contents.				
5.08	No more than 55 gallons of waste are accumulated in any single lab. Waste generated in a lab must remain in that lab.				
<b>6.00 Biological Safety</b>					
<b>Documentation and Training</b>					
6.01	Lab has current and accurate registration with the Institutional Biosafety Committee (IBC) for research activities involving biohazard materials.				
6.02	All lab personnel working with biological agents and/or recombinant DNA must complete general and any required lab-specific training. Applicable Biosafety SOPs are easily accessible.				
<b>Biological Safety Cabinets (BSC)</b>					
6.03	All active BSCs have been certified within the past 12 months, and a certification label is attached. BSCs not in use or pending certification are marked as out of service.				
6.04	BSC sashes are set at appropriate heights and not propped up by equipment. The alarm is not muted. Intake and rear grills are free of obstructions, and nothing is stored on top of BSCs.				
<b>General Biosafety</b>					
6.05	All procedures with the capability of producing infectious aerosols or high concentrations of infectious materials are conducted in a BSC or other appropriate containment device.				
6.06	Spaces between benches, cabinets, and equipment are accessible for cleaning. Disinfectant procedures are developed, and proper disinfectant is available and labeled.				
6.07	A biohazard spill kit is present and stocked in the lab, and all lab personnel know its location.				
<b>Biological Waste</b>					
6.08	All biohazard waste is collected for decontamination prior to disposal. Untreated biohazard waste is not mixed with chemical waste.				
6.09	Solid, non-sharps biohazard waste is collected in a durable, leak-proof biological waste container (Stericycle box) that is lined with a plastic bag. Both the bag and box are marked with 'Biohazard' and the biohazard symbol.				