

LABORATORY SAFETY CHECKLIST (FORM 3010)

Purpose: This checklist was created in order to maximize the awareness of the general safety policies and procedures and to help ensure a safe working environment.

Procedure: All Lab employees and trainees must review and sign this checklist, and abide by these rules and policies. The Lab also asks that all short-term visitors (trainees, fellows and residents) to the lab review and sign this checklist.

General Safety

I know the location of the lab's safety documents and understand that I am responsible for learning and following the lab safety policies and procedures. If I am unsure about a specific policy, it is my responsibility to request additional information from other staff or the Lab Manager.

I agree to report any unsafe circumstance, any injury or accident I encounter while working in the lab to the Lab Manager.

I understand that emergency contact information for various emergency situations is posted on the Washington University School of Medicine Injury/illness Procedures for WU Employees in BJH Laboratory Buildings. These are posted throughout the lab. For serious injuries the first contact is BJH **Security (362-0911)**.

I understand the emergency numbers for cardiac/respiratory arrest, fire, or hospital security are affixed to each phone.

I am aware that safety posters and emergency information are posted at various locations in the lab and that it is my responsibility to be familiar with their content.

I know the location of eyewash stations and emergency showers and I understand how to use them in the event of a biological or chemical splash to my eyes or body.

I have completed the annual WU Employee Safety Program. I understand that it is my responsibility to ensure that I am current on all safety training requirements.

I understand that eating, drinking, and smoking are strictly forbidden within the lab. Eating and drinking are only permissible in the break room. Food and beverage containers should not be discarded in the lab, because they suggest that the lab area is being used.

I understand that I should always wash my hands before eating or drinking. I also understand that application of contacts, cosmetics, or lip balm is also forbidden in the lab.

I understand the policies and procedures relating to safe handling of electrical equipment and wiring.

I understand that there are ways to minimize the risk of musculoskeletal problems related to certain repetitive tasks.

Fire Safety

I know the location of the WU fire evacuation plan, the lab specific plan, the fire pull stations closest to the lab, fire extinguishers in the lab, and the lab fire blanket.

I know the location of the lab meeting point in the event of an evacuation.

Chemical Safety

I understand that a variety of hazardous chemicals are used in the Laboratory, and agree to become familiar with the chemical properties and hazards of the substances that I will be working with.

I understand what MSDS (Material Safety Data Sheets) are, and where they are located.

I agree to use proper personal protective equipment (PPE) when working with chemicals or reagents.

I understand that formalin and other fixatives pose potential hazards to laboratory personnel.

Formalin is a cutaneous and respiratory irritant. Direct contact of the eyes with formalin could lead to permanent visual impairment. Certain predisposed individuals can develop contact hypersensitivity or asthmatic reactions. Formaldehyde is regarded by OSHA as a carcinogen.

I understand and will abide by proper disposal procedures for all chemicals. These procedures are found in the lab's Chemical Hygiene Plan and MSDS sheets,

I understand that the lab has a systematic way of safely storing potentially reactive, toxic, or hazardous chemicals, and I agree to follow the established organization when returning chemicals to storage areas.

Chemical Spills

I understand the procedures required for cleaning up any chemical spills caused by me, but will notify the Lab Safety Officer/ Lab Manager if I am unsure how to handle a spill.

I know the location of the spill tamer kits, and I know how to use the contents properly.

I understand that large or toxic spills should be reported to **BJH Security (362-0911) or 362- 4357 (2-HELP)**.

I understand the procedures required for cleaning up any chemical spills caused by me, but will notify the Lab Safety Officer/ Lab Manager if I am unsure how to handle a spill.

Other Potential Hazards

I will read the policies regarding handling of compressed gas, liquid nitrogen, and UV light sources before using them.

I understand that radioactive materials cannot be used without prior approval and documentation of training.

I understand that latex gloves can cause allergic reactions and that powder-free Latex and non-Latex gloves are available in the lab.

Patient Safety

I understand that I cannot leave patient reports or other PPI in the lab or place them on any lab computer.

I understand that patient materials can only be used under the conditions specified by the Institutional Review Board.

I agree to return all patient materials (e.g. blocks) at the completion of my studies.

Signature:

Date: