

SAFETY SELF-INSPECTION TAG

Building: _____

Room: _____

Contact Person: _____

YEAR:	
MONTH:	INSPECTED BY:
January	
February	
March	
April	
May	
June	
July	
August	
September	
October	
November	
December	

ONGOING:

- **Immediate Hazards** - identify any observed hazards and address as appropriate, e.g.
 - o poor housekeeping
 - o inadequate attire and/or PPE
 - o food/drink/cosmetics in lab
 - o improper labeling of materials or unattended experiments
 - o propped doors
 - o obstruction of exits, aisles, pull stations or emergency equipment
 - o unsafe equipment or work practices

WEEKLY (as applicable):

- **Eyewash** - activate eyewash station to flush line and ensure proper operation; ensure area around station is clear

MONTHLY (as applicable):

- **Fire Extinguisher** - confirm extinguisher is in place & verify it is fully charged (green zone on pressure gauge)
- **First Aid/Spill kit** - check kit contents and replace items if required
- **Fume hoods** check certification of alarms & notify EHS if certification has expired. Notify PR if malfunctioning. Ensure work area & airflow is not obstructed
- **BSCs** – check certification and notify EHS if certification has expired. Notify BSC manufacturer if BSC is malfunctioning. Ensure work area & airflow is not obstructed
- **Chemical Storage** - inspect storage areas for leakage, expired/old chemicals, and separation of incompatibles. Ensure flammables are stored in flammable storage cabinets.
- **Emergency Lighting** – check for proper functioning of emergency lighting and replace as necessary

PERIODICALLY/ANNUALLY (as applicable):

- **Chemical Inventory** - confirm MSDSs are available for all chemicals in the lab and online inventory is up to date
- **Warning Signs** - confirm signage required for biosafety, radioactive materials, lasers, mechanical hazards, noise, chemical or electrical hazards are in place and visible