

**TEACHING NON-CHEMICAL LABORATORY SELF-AUDIT CHECKLIST**

Department Name: \_\_\_\_\_ Building: \_\_\_\_\_ Room: \_\_\_\_\_

Course(s): \_\_\_\_\_

Inspected by: \_\_\_\_\_ Date of Inspection: \_\_\_/\_\_\_/\_\_\_ Faculty: \_\_\_\_\_

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**A. Training**

Name	Employee Safety	Hazard Communication GHS	Office Safety	Slips/Trips/Falls	Dept. TA Training	Dept./Building EAP	UAF Hand and Power Tool Safety	Machine Guarding								
1.																
2.																
3.																
4.																
5.																
6.																
7.																
8.																
9.																
10.																

Required training: Employee Safety, Hazard Communication, Office Safety, Slips/Trips/Falls, and Dept. Emergency Action Plan. Other trainings may be required, depending on lab operations (e.g., Dept TA training, UAF Hand and Power Tool Safety, Machine Guarding (Skilsoft), Driver's Safety, etc.). Key: --: training not required; X: training completed; blank: training not completed.

**B. Administrative**

- Yes  No  N/A Are there chemicals present in the lab, such as cleaning solvents, paint, gasoline?
- Yes  No  N/A Are SDS available in the lab?
- Yes  No  N/A Have Job Hazard Analyses (JHAs) been done for procedures in the lab?
- Yes  No  N/A Is the chemical inventory current (updated within 12 months)?

**C. General Safety Concerns**

- Yes  No  N/A Is the use of electrical outlets and power strips appropriate (no adaptors for outlets, no daisy-chaining, power strips positioned appropriately)?
- Yes  No  N/A Is the permanent use of extension cords avoided?
- Yes  No  N/A Are electrical cords positioned appropriately (e.g., not under carpets or in aisles, not suspended from or within the ceiling)?
- Yes  No  N/A Are all exits and aisles to the outside free from any obstructions?

**D. Seismic Safety/Fire Safety**

- Yes  No  N/A Is overhead storage minimized?
- Yes  No  N/A Is overhead storage restrained?
- Yes  No  N/A Is overhead storage kept 24" below ceiling or 18" below sprinkler heads?

**E. Personal Protective Equipment**

- Yes  No  N/A Is the appropriate personal protective equipment required for the lab available?  
\_\_\_ Safety Glasses \_\_\_ Goggles \_\_\_ Face Shields \_\_\_ Gloves  
\_\_\_ Lab Coats/aprons
- Yes  No  N/A If the lab is considered a high-hazard fire area, is an appropriate extinguisher available?
- Yes  No  N/A In high-hazard fire areas, are lab personnel current on fire extinguisher training?

**F. Laboratory Equipment**

- Yes  No  N/A Is the eyewash free from any obstructions?
- Yes  No  N/A Is the eyewash operated weekly?
- Yes  No  N/A Is the emergency shower free from any obstructions?
- Yes  No  N/A Is the emergency shower operated weekly?
- Yes  No  N/A Has the local exhaust ventilation system (snorkels, canopies, hoods) been tested within the last year?
- Yes  No  N/A Is non-ionizing radiation equipment (lasers, microwave sources, and ultraviolet light sources) posted with warning labels and shielded?
- Yes  No  N/A Are vacuum systems that are capable of imploding protected with cages or barriers?
- Yes  No  N/A Are proper gloves and safety glasses available for use with liquid nitrogen?
- Yes  No  N/A Is the belt guard on the vacuum pump in place?
- Yes  No  N/A Are two-pronged appliances not located within a five foot radius or directly located above a sink or flammable materials?

**G. Other Safety Issues Present in the Lab (lasers, power tools, compressed gases, etc.)**

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Additional comments:

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