# **Lab-Specific Training Checklist**

This guide may be used to assist PIs/supervisors with lab-specific training for new lab **members. Training records should be updated as new areas become relevant; initial and date** next to checkboxes for training provided after initial date. Keep a copy of this document and send a copy to EHS.

|  |  |  |  |
| --- | --- | --- | --- |
| PI: | | | Department: |
| Building: | | | Room: |
| Initial | Basic laboratory safety | | |
|  | Review [UO Safety Policy](http://policies.uoregon.edu/policy/by/1/08-health-and-safety/safety) | | |
|  | Review safe lab practices (proper attire, handwashing, no pets allowed etc.) | | |
|  | Identify designated areas for food consumption/storage outside of the lab | | |
|  | Review procedures for working after hours | | |
|  | Review procedures for incident/accident first aid, reporting and applicable [forms](https://safety.uoregon.edu/injury-reporting-and-workers-compensation) | | |
| Emergency information: spills, injury, fire, and power failure | | | |
|  | Fire extinguisher and first aid kit | | |
|  | Evacuation plans and Fire alarm pull stations | | |
|  | Safety shower and eyewash locations and use | | |
|  | Lab spill kit and Emergency procedures (wall flip-chart) | | |
| Waste handling procedures (labeling, packaging, [requesting pick-up](https://safety.uoregon.edu/hazardous-waste)) | | | |
|  | Chemical | | |
|  | Radioactive | | |
|  | Pathogenic/Biohazard and Carcasses | | |
|  | Sharps (e.g., needles/razor blades), and uncontaminated glass waste | | |
| Work involving chemical hazards | | | |
|  | Review of UO and lab-specific [Chemical Hygiene Plans](https://safety.uoregon.edu/chemical-safety) (CHP) | | |
|  | Review location of Safety Data Sheets (SDSs) | | |
|  | Review Chemical Inventory | | |
|  | Review procedures for chemical procurement and distribution | | |
|  | Storage (compatible storage, corrosives cabinet, flammable liquid storage cabinet, flammable liquid storage refrigerator, etc.) | | |
|  | Location where certain procedure(s) may be performed (e.g., fume hood) | | |
| Personal protective equipment | | | |
|  | Discuss required PPE for various lab work, plus additional PPE for specific tasks | | |
|  | Review selection and proper use of gloves (& manufacturer’s guidance) | | |
|  | If a respirator is required for work, arrange for [evaluation, training, and fit testing](https://safety.uoregon.edu/respiratory-protection-program) | | |
| Housekeeping, maintenance, and inspections | | | |
|  | Discuss materials stored or frequently present on the floor | | |
|  | Discuss maintenance of scientific equipment | | |
|  | Review maintenance of lab’s safety equipment: weekly flushing of eyewash, checking fire extinguishers monthly, monitoring gauges on fume hoods, biosafety cabinets, keeping safety showers and electrical panels accessible, etc.) | | |
| Initial | | Exposure monitoring/medical surveillance | |
|  | | Discuss PEL and TLV for chemicals in use and how to reduce employee  exposure | |
|  | | Discuss use of fume hoods, biological safety cabinets or other mechanical  ventilation systems | |
|  | | Review criteria for medical surveillance, as found in the UO Chemical Hygiene  Plan | |
|  | | Discuss the need for employee to inform health care provider of hazardous substances used in the lab, particularly in instances of immunocompromised  status | |
| Working with pathogenic or recombinant/synthetic materials | | | |
|  | | Review standard microbiological practices; use of biosafety cabinet if applicable | |
|  | | If work involves human blood, other human-derived or non-human primate  derived materials, contact BSO to enroll in [Bloodborne Pathogens Program](https://safety.uoregon.edu/bloodborne-pathogens) | |
|  | | If recombinant or synthetic DNA is used, review procedures for spills, exposures,  and reporting requirements | |
|  | | Review [UO Biosafety Manual](https://safety.uoregon.edu/biosafety-program) and lab-specific biosafety manual for BSL-2 labs | |
| Working with radioisotopes | | | |
|  | | Contact Radiation Safety Officer for enrollment into program | |
|  | | Review [Radiological Safety Manual](https://safety.uoregon.edu/radiation-safety) | |
|  | | Review [Dosimetry Program](https://safety.uoregon.edu/radiation-safety) | |
| Working with animals | | | |
|  | | Contact Animal Care Services for animal handler training | |
|  | | Contact Biosafety Officer for occupational health training | |
|  | | Complete and submit Medical Questionnaire to University Health Center | |
| Additional lab-specific hazards | | | |
|  | | Review applicable topics such as liquid nitrogen, [lasers](https://safety.uoregon.edu/laser-safety-program), [controlled substances](https://safety.uoregon.edu/controlled-substances) | |
|  | | Discuss ongoing laboratory training (e.g., review of incidents/accidents/injuries  and how to prevent recurrence) | |

*I certify the above items have been reviewed with me and I agree to take responsibility for maintaining a safe laboratory environment.*

Lab member’s signature: Date:

Supervisor’s signature: Date:

**INCIDENT RESPONSE**

**EMERGENCY 911**

**URGENT (Campus Dispatch) 541-346-2919**

## BE PREPARED  BE SURE YOU KNOW

**WHERE ARE YOU LOCATED?**

**WHERE IS FIRST AID KIT LOCATED?**

**FIRE EXTINGUISHER?**

**FIRE BLANKET?**

**FIRE ALARM PULL STATION?**

**NEAREST BATHROOMS?**

**SPILL KIT LOCATION?**

**SDS LOCATIONS?**

**EVACUATION ROUTES?**

**INJURY REPORTING PROCEDURES?**