CHEMICAL HYGIENE CHECKLIST

EVALUATION NUMBER: _____ **DATE:** _____ **EVALUATOR:** _____

FACILITY: _____

RESULT KEY

S = SATISFACTORY U = UNSATISFACTORY N/A = NOT APPLICABLE NE = NOT EVALUATED

Checklist Item Number	Reference Document (Include No., Sect/Para)	Verification Requirements	Result Key	Verification Conducted Describe documents reviewed, Personnel interviews and activities observed.
1	Chemical Hygiene Plan based on CFR 1910-1450	What formal document describes your Chemical Hygiene Plan?		_____ _____ _____ _____
2	based on 29 CFR 1910-120	Verity that the Plan contains the following: ● SOPs for use of hazardous chemicals ● Measures to reduce employee exposure ● Provisions for medical examinations ● Designated person responsible for Plan		_____ _____ _____ _____ _____

CHEMICAL HYGIENE CHECKLIST (continued)

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Checklist Item Number	Reference Document (Include No., Sect/Para)	Verification Requirements	Result Key	Verification Conducted Describe documents reviewed, Personnel interviews and activities observed.
3		Has CHP been evaluated on an annual basis?		_____ _____ _____ _____ _____ _____
4		How are personnel made aware of: ● location/availability of CHP ● signs & symptoms of exposure to hazardous chemicals ● location/availability of MSDSs ● medical examinations		_____ _____ _____ _____ _____ _____

CHEMICAL HYGIENE CHECKLIST (continued)

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Checklist Item Number	Reference Document (Include No., Sect/Para)	Verification Requirements	Result Key	Verification Conducted Describe documents reviewed, Personnel interviews and activities observed.
5		How do you ensure that labels: ● are not removed/defaced when chemicals are received ● are affixed when chemicals are transferred from one container to another		_____ _____ _____ _____ _____ _____
6		How do you ensure that MSDSs are available for chemicals in use?		_____ _____ _____ _____ _____ _____

CHEMICAL HYGIENE CHECKLIST (continued)

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7		Where are records maintained for employee exposure?		_____ _____ _____ _____ _____ _____
8		Verify the following items are in labs: ● respirators ● lab coats ● gloves (appropriate for chemical used) ● storage cabinet for chemicals ● eye wash stations ● first aid kits ● safety glasses ● spill kits ● safety showers ● emergency notification ● safety shoes		_____ _____ _____ _____ _____ _____

CHEMICAL HYGIENE CHECKLIST (continued)

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9		Verify inspection of eye wash stations.		_____ _____ _____ _____ _____
10		Check sashes on hoods. Check sash markings and hood flow velocity.		_____ _____ _____ _____ _____ _____

CHEMICAL HYGIENE CHECKLIST (continued)

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11		Verify hood inspections. Is flow measuring device calibrated?		_____ _____ _____ _____ _____ _____
12		Observe general housekeeping.		_____ _____ _____ _____ _____ _____

CHEMICAL HYGIENE CHECKLIST (continued)

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13		Verify training for: ● physical and health hazards in work area ● reporting unsafe condition ● Right to Know ● access to their individual medical records		_____ _____ _____ _____ _____ _____
14		Verify inspection of safety showers.		_____ _____ _____ _____ _____ _____

CHEMICAL HYGIENE CHECKLIST (continued)

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15		Identify the Chemical Hygiene Officer.		_____ _____ _____ _____ _____
16		Identify members of the Chemical Hygiene Committee.		_____ _____ _____ _____ _____ _____

CHEMICAL HYGIENE CHECKLIST (continued)

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17		Are prominent signs and/or labels posted to identify emergency equipment?		