HEALTH AND SAFETY 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	Health & Safety Plan based on 29 CFR 1910-120	**GENERAL** Review Health and Safety plan or manual in use lab-wide. Does the manual address the following: **(Y/N)** Scope ● Safety Policy ● Organizational ● Responsibility ● Safety Officer - Designation and Duties ● General Industrial Safety ● Chemical/Toxicity Safety ● Hazardous Substances and Operations ● Radiological Safety ● Medical Services ● Safety Training ● Accident Prevention		_____ _____ _____ _____ _____ _____ _____ _____ _____ _____

HEALTH AND SAFETY 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.
2		List any area-specific Health and Safety guide-lines in use.		_____ _____ _____ _____ _____ _____
3		Is general housekeeping in lab and office areas adequate?		_____ _____ _____ _____ _____ _____

HEALTH AND SAFETY CHECKLIST (continued)

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4		Review OSHA accident reports for frequency, severity and corrective measures.		_____ _____ _____ _____ _____
5		Are there building and laboratory security systems?		_____ _____ _____ _____ _____

HEALTH AND SAFETY CHECKLIST (continued)

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6		**TRAINING** Review training manual: ● Rad Worker Training ● Chemical Worker Training ● Location of safety equipment ● Specific training ○ Fire Extinguisher ○ Hazardous Waste ○ Precautions for specific operations		_____ _____ _____ _____ _____ _____
7		Do Health and Safety guidelines appear in the training manual?		_____ _____ _____ _____ _____ _____

HEALTH AND SAFETY CHECKLIST (continued)

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8		Are training records kept for each employee?		
9		Does the supplier have, on its' staff, an individual who is knowledgeable in DOT hazardous materials regulations?		

HEALTH AND SAFETY CHECKLIST (continued)

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10		**EMERGENCY PREPAREDNESS** Is there an agreement with a local medical facility regarding emergencies at this facility?		_____ _____ _____ _____ _____ _____
11		Is a spill control policy developed and implemented to include containment, cleanup and reporting?		_____ _____ _____ _____ _____ _____

HEALTH AND SAFETY CHECKLIST (continued)

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12		**MEDICAL PROGRAM** Are medical exams given to each employee?		_____ _____ _____ _____ _____ _____
13		Review radiation dosimetry records; any anomalies?		_____ _____ _____ _____ _____ _____

HEALTH AND SAFETY CHECKLIST (continued)

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14		Review bioassay sample records; any anomalies?		
15		Is a respiratory protection program established and maintained?		

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16		**CLIENT COMMUNICATIONS** Is there a procedure or contract provision for communication from clients regarding, expected sample characteristics and potential hazards of samples?		_____ _____ _____ _____ _____ _____
17		**FIRE SAFETY** Are proper safeguards in place for the prevention of fire?		_____ _____ _____ _____ _____ _____

HEALTH AND SAFETY CHECKLIST (continued)

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18		Are fire exists clearly marked and accessible?		_____ _____ _____ _____ _____
19		Are fire extinguishers available throughout building?		_____ _____ _____ _____ _____

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20		Does the lab have a fire alarm system?		
21		Are procedures in place, for actions taken in the event of fire?		

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22		**HEATING & AIR MONITORING** Is temperature control adequate throughout building?		_____ _____ _____ _____ _____ _____
23		**VENTILATION & AIR MONITORING** Is ventilation system adequate for minimization of potential airborne contaminants?		_____ _____ _____ _____ _____ _____

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24		Is environmental monitoring of airborne concentrations of radioactive and high toxic chemicals conducted?		