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### Access Control

- Is access to laboratory/facility controlled?
  - Is access to animal rooms limited such that only persons required for the program or support purposes are authorized to enter the facility. Are personnel advised of potential hazards and appropriate safeguards before entering?
  - Does the laboratory director control access to the laboratory and restrict access to persons whose presence is required for program or support purposes?
  - Are persons who are at risk of acquiring infection, or for whom infection may have serious consequences not allowed in the laboratory or animal rooms? (For example, persons who are immune-compromised or pregnant may be at risk of acquiring infections)
  - Does the laboratory director establish policies and procedures whereby only persons who have been advised of the potential biohazard, who meet any specific entry requirements (e.g. immunization), and who comply with all entry and exit procedures, enter the laboratory or animal rooms?
  - Are no minors allowed in the laboratory?
  - Are visitors escorted at all times and receive training on safety and maintenance of containment prior to their entry?

### Annual Verification

- Are facilities re-verified and manuals reviewed and updated, at least annually, utilizing operational experience as guidance?
- Are HEPA systems tested at least annually?
- Can laboratory personnel verify that the direction of airflow is proper?
- Are penetrations in floors, walls, and ceiling surfaces sealed, including openings around ducts, doors, and door frames to facilitate pest control and proper cleaning?
- Is airflow at lab or animal room entrance negative (flowing into lab)?
- Are wall ceiling and floor surfaces, and seams intact and sealed (not cracked, peeling, or chipped)?
- Is illumination adequate for all activities; are reflections and glares that could impede vision avoided?

### Autoclaves

- Are autoclaves used and maintained properly?
  - Are autoclaves used to inactivate biomedical wastes/sharps containers tested for efficacy on schedule (every 40 hrs.)?
  - Is an autoclave use log maintained?
  - Are stainless steel (recommended) or polypropylene or polycarbonate (not high density polyethylene) pans used to autoclave biowaste?
  - Are temperature resistant red bags being utilized for autoclaving?
  - Is an autoclave maintenance log maintained?
  - Are autoclave(s) used for sterilization (not disinfection) tested for efficacy (initially and every 6 months)?

### Biomedical Waste

- Is Biomedical Waste collection and specimen/agent transport being handled properly?

- Are all potentially contaminated waste materials from labs and animal rooms decontaminated before disposal or reuse?
- Are serological pipettes discarded in the biohazard bag in a manner that decreases the risk for puncture of the bag and/or box?
- Is infectious/potentially infectious waste or recombinant DNA waste that is being generated in the biosafety cabinets discarded into a disinfectable container?
- Are Biomedical Waste container(s) not overfilled?
- Are Biomedical Waste box(es) found to be lined with the correct bag?
- Is biomedical waste awaiting autoclaving placed within a leak-proof secondary container (i.e. not found sitting directly on the floor)?
- Are Biohazard Waste container(s) containing infectious materials covered?
- Are clean gloves and other non-contaminated laboratory materials discarded as clean lab ware?
- Are pipette tips discarded properly (not haphazardly into biomedical waste bags or into regular trash)?
- Are Biohazardous Waste bags/box free of chemically-contaminated pipet tips and/or gloves?
- Are biomedical waste bags free of liquid waste?
- Is Biohazardous Waste generated in the biosafety cabinet (BSC) only being collected inside the BSC (not outside the BSC)?
- Are biomedical waste bags free of regular trash (wrappers, bottles, etc.)?
- Are open wire-basket(s) lined with a biohazard bags never used to discard infectious/potentially infectious biowaste?
- Is potentially infectious material placed in a durable leak proof container during collection, handling, processing, storage, and transport within the facility?
- Are transport containers surface disinfected with an appropriate disinfectant?
- Is there a method available in the facility for decontaminating all wastes (i.e., autoclave, chemical disinfection, incineration, or other validated decontamination method)?
- Is infectious Biomedical Waste / Biological waste and/or rDNA decontamination and waste transport compliant?
  - Are materials to be decontaminated outside of the immediate laboratory placed in a durable, leak-proof container and secured for transport?
  - Are waste materials to be removed from the facility packed in accordance with applicable local, state, and federal regulations?
  - Are waste containers destined for decontamination surface disinfected prior to transport and are they being transported through non-public areas?

### BioSafety Cabinets

- Are Biosafety Cabinets (BSCs) being used properly?
  - Are Biosafety cabinet(s) (BSCs) neat (not cluttered with excess supplies)?
  - Are Bunsen Burners forbidden in BSC(s)?
  - Is UV light use discouraged in BSC(s)?
  - Are the front grills of BSC(s) clear (unblocked)?
  - Are lab doors closed (not propped open) while BSC(s) are in use?
  - Is cleanup facilitated by using plastic-backed paper toweling on non-perforated work surfaces within biological safety cabinets?
  - Is the catch basin underneath the BSC work surface clean?
  - Is the BSC functioning properly?

- Are BSCs located in such a way as to not compromise function?
  - Are BSC(s) located away from entrances?
  - Is clearance around BCS(s) adequate
  - Are BSC(s) located away from HVAC supply?
- Are all open manipulations involving infectious materials, procedures with a potential for creating aerosols or splashes, or procedures with high concentrations or large volumes conducted in a Class II or Class III Biological Safety Cabinet?
- Are BSC(s) certified annually or labeled as 'not for use with infectious materials' if not certified?
  - Does Biosafety Cabinet(s) not in use with infectious materials have a 'not for use with infectious materials' label?
  - Do Biosafety Cabinet(s) that are used with infectious materials have current certification(s)

### Chemical Fume Hoods

- Is fume hood compliant?
  - Is storage of items in chemical fume hoods kept to a minimum?
  - Are the fume hood alarms working properly?
  - Are the side panels in place and sealed properly?
  - Is there sufficient visibility through the fume hood sash?
  - Is the fume hood sash at the proper height and closed if not in use?
  - Is the fume hood velocity within range?

### Chemical Safety

- Is an appropriate chemical spill kit available?
- Are proper dating/storage/use/disposal procedures followed for perchloric acid/picric acid?
- Are proper dating/storage/use/disposal procedures followed for peroxide forming compounds?
- Are chemicals stored safely?
  - Are liquid chemicals stored below shoulder height?
  - Are all containers in good condition, no rusted containers or broken bottles?
  - Are all containers properly capped with a tight sealing lid?
  - Are dry and liquid chemicals kept separate?
  - Are flammable solvents only stored in approved fridges or freezers?
  - Are liquids stored in secondary containers (not stored directly on the floor)?
- Are all transfers of liquid nitrogen done in a well-ventilated area?
- Are lab chemicals in use and within expiration dates (not unused or outdated).?
- Is use of Chromic acid for cleaning glassware discouraged?
- Is air quality in the lab acceptable (no particulates or chemical odors)?
- Are all containers of chemicals properly labeled in the lab?
  - Are labels legible and easily read (not deteriorating or falling off)?
  - If the lab is using abbreviations or chemical formulas, do they have an abbreviation sheet posted?
  - Are all chemicals labeled (no unlabeled containers)?
- Are chemicals stored by compatibility?
  - Are organic and inorganic chemicals kept separate?
  - Are acids and bases segregated?

- Are corrosives separated from metals, flammables, and oxidizers?
- Are oxidizers separated from metals and flammable chemicals?
- Are inorganic acids separated by compatibility?
- Are cold rooms being used properly?
  - Is cold room free of excess clutter and cardboard?
  - Is the amount of flammables in the cold room kept to a minimum?

### Compressed Gases

- Are gas cylinders securely transported using a hand truck?
- Are the UF Compressed Gas Rules posted in a prominent location?
- Per the PI or PI's designee, is the regulator connection leak tested after installation and before each use?
- Are cylinders with no regulators capped (even when empty)?
- Are cylinders stored away from heat sources?
- Are contents of cylinders clearly labeled?
- Are hydrostatic tests current (cylinders have not been stored more than 5-10 years)?
- Are compressed gas cylinders adequately secured (even when empty)?
- Are gas cylinders stored by compatibility?
- If the lab has any high hazard gases, is there an emergency plan in place?
- Are highly toxic gasses kept in cabinets vented to the outside (not loose in the open room)?

### Controlled Substances

- If controlled substances are used, is the DEA permit current?
- Are controlled substances stored in a secure location?
- Are outdated or unwanted DEA substances disposed of appropriately?
- Does the lab have an inventory of all in-use controlled substances?
- Have all employees using controlled substances or novel compounds (neurotrophic or addicting) filled out an Employee Questionnaire?
- Is the lab completing a biennial (every 2 years) inventory of all controlled substances?
- Is the lab free of any outdated pharmaceutical products?

### Documentation

- Is the lab's LATCH complete?
  - Does the lab have an up to date roster?
  - Is a Lab Safety Manager assigned?
  - Is a Hazardous Waste Manager assigned?
  - Is the hazard assessment and PPE determination completed in LATCH?
  - Has the lab specified where SOPs are saved in the Notes section of the risk assessment?
  - Has everyone in the lab or work area read and signed the completed risk assessment?
- Is the lab's chemical inventory compliant?
  - Does the lab have a chemical inventory?
  - Is the chemical inventory current?
  - Is the inventory accurate as determined by a check/spot check? (include details in the notes section)

- Are all project(s) personnel list(s) current?
- Are all EH&S registered project(s) room list(s) current?
- Do EH&S registered project(s) accurately reflect ongoing research activities?
- Does the PI have a FL Department of Business and Professional Regulations medical exemption letter if applicable?
- Is the UF Laboratory Safety Manual readily accessible?
- Does everyone in the lab have access to the SDSs for all chemicals used in the lab?
- Does the lab have Voluntary Use forms for lab members using N95 type respirators voluntarily and are they being used correctly?
- Is the UF Biological Safety Manual readily accessible?
- Does the lab maintain SOPs that incorporate health & safety?
- Do all lab personnel have access to all SOPs?
- Are the SOPs in the required EHS format?

### Electrical Safety

- Is access to circuit breaker panel unobstructed?
- Are openings on breaker panel, receptacle boxes, etc. sealed?
- Are Ground Fault Circuit Interrupters (GFCI) used near sinks and wet areas?
- Is the lab only using extension cords temporarily?
- Are extension cords manufactured commercially (not shop made)?
- Are electrical cords undamaged (not frayed)?
- Is the lab free of electrical hazards?
- Do extension cords, power strips, and surge protectors have long enough cords (not inter-connected or Daisy Chained)?
- Are electrical panel covers secure? Are all unused openings in electrical enclosures and fittings appropriately plugged or covered?
- Are power strips UL listed?
- Are all electrical cords routed properly (not running through doors, walls or partitions, under rugs/matts, or above drop ceilings)?
- Are power strips being used only for small electronics?
- Are all power strips either mechanically affixed or resting on a flat surface?

### Emergency

- Is a fully stocked First-Aid kit compliant?
  - Is the first aid kit complete and are all contents within their expiration dates (unexpired)?
  - Is a first aid kit in evidence? (check no if they need a new first aid kit)
  - Is the first aid kit easily accessible/unobstructed?
- Is calcium gluconate available where hydrofluoric acid (HF) is stored or handled?
- Is the overhead emergency shower(s) compliant?
  - Is overhead emergency shower(s) working properly?
  - Is overhead emergency shower(s) tested regularly?
  - Is overhead emergency shower(s) unobstructed?

- Is the emergency eye wash station(s) compliant?
  - Is eyewash station working properly?
  - Is eyewash tested regularly?
  - Does eyewash station does have dust covers?
  - Is eyewash unobstructed?
- Per the PI or PI's designee, is lab staff trained in the lab's emergency procedures?
- Are written records of spills, accidents and exposure incidents maintained?
- Is medical evaluation and treatment following an exposure incident provided as appropriate?
- Are emergency and disaster recovery plans for man-made or natural disasters in place and reviewed annually?
- Are biological spill kits and spill management procedures compliant?
  - Is a Biological Spill kit available and fully stocked?
  - Is a biological spill SOP readily available?
  - Are the spill and incident management procedures posted?
  - Is the bleach in spill kit unexpired?
  - Are infectious materials spills reported and evaluated?
  - Is the biological spill kit kept segregated (in a separate container) from any chemical spill kits?
- If any exposure incidents occurred, were they properly reported/investigated?

### Equipment

- Is laboratory equipment clean?
- Is use of equipment with sharp edges and corners avoided?
- Are centrifuge rotors/buckets used for infectious agents sealed? (check for gaskets to be present and not cracked)
- Is laboratory equipment safely operated and maintained in accordance with manufacturer instructions?
  - Are vacuum lines protected with liquid disinfectant traps and HEPA filters/ Is the HEPA filter changed as needed?

### Facility Design

- Are Laboratory doors self-closing and lockable?
- Is the facility separated from areas that are open to unrestricted personnel traffic within the building and are external doors self-closing and lockable?
- Is there a hand washing sink available in each laboratory or animal room?
- Is there a hands-free hand washing sink available at the exit of the areas where infectious materials and/or animals are housed or manipulated and in other segregated areas?
- Are the spaces between doors and floors and frames capable of being sealed to facilitate decontamination?
- Are cabinets and bench surfaces lab-grade material (impervious to water and resistant to heat, organic solvents, acids, alkalis, and other chemicals)?
- Are facility walls, ceilings and floors impervious to water and resistant to heat, organic solvents, acids, alkalis, and other chemicals, slip resistant and constructed for easy cleaning and decontamination?
- Does the laboratory and/or animal rooms have directional airflow that draws air into the facility from 'clean' areas and toward 'contaminated' areas and does the facility have a ducted exhaust ventilation system?
- Is there a passage through a series of two self closing doors into the laboratory from the access corridors?
- The exhaust air is not recirculated to any other areas of the building.

- Is the exhaust dispersed away from occupied areas and air intakes, or is the exhaust HEPA-filtered?
- When exhaust air from Class II safety cabinets is to be discharged to the outside through the building exhaust air system, are the cabinets connected in a manner that avoids any interference with the air balance of the cabinets or the building exhaust system (e.g., an air gap between the cabinet exhaust and the exhaust duct)?
- When Class III biological safety cabinets are used are they directly connected to the exhaust system?
- If the Class III cabinets are connected to the supply system, is it done in a manner that prevents positive pressurization of the cabinets?
- Are the BioSafety Level 3 facility design and operational procedures documented?
- Is the facility tested for verification that the design and operational parameters have been met prior to operation?
- Is additional environmental protection (e.g., personnel showers, HEPA filtration of exhaust air, containment of other piped services and the provision of effluent decontamination) considered if recommended by the agent summary statement, as determined by risk assessment, the site conditions, or other applicable federal, state, or local regulations?

### Fire Safety

- Are fire extinguishers compliant?
  - Have fire extinguishers been checked monthly by Fire Safety?
  - Is fire extinguisher unobstructed?
  - Is a Fire Extinguisher located near or in the lab?
- Are large metal drums of flammable liquids reported in the inventory and risk assessment?
- Are flammable liquids stored in approved containers?
- Is no more than 10 gallons of flammable liquids stored in the open (outside of a flammables cabinet or safety can)?
- Are vents on flammable storage cabinets sealed?
- Are sprinkler heads clear (i.e. at least 18 inch clearance)?
- If the lab has any propane gas, is the quantity less than 2x 1lb cylinders loose in the lab with another 2x 1lb cylinders in a flammables cabinet?
- Is the lab free of any gasoline and/or any gasoline containers?
- Are all ceiling tiles in place in the lab?

### General Safety

- Is lab space being utilized safely?
- Are workspaces un-crowded?
- Are benches and shelves never overloaded?
- Are chairs appropriate for laboratory environment?
  - Are chairs non-porous and cleanable?
  - Are chairs undamaged?
  - Do chairs have a 5-star base?
- Are vacuum pumps (with a belt/pulley) equipped with a belt guard?
- Is there no food for human consumption stored in lab fridges/freezers?
- Are walkways clear of obstructions?



- Is food consumption or storage, smoking, drinking, handling of contacts, or applying cosmetics prohibited within the laboratory work area?
- Are work surfaces and benches free of clutter to reduce risk of spills and accidents?
- Per the PI or PI's designee, are lab rooms all closed and locked when no personnel are in the lab?
- Is mouth pipetting prohibited; Are mechanical pipetting devices used?
- Is water conserved as much as possible?
- Are lab appliances properly labeled?
- Do all older style vacuum pumps have oil traps inline of their exhaust?

### Hazardous Waste

- Is the current SAA sheet posted?
- Is the current SAA waste manager listed?
- Are SAA waste totals under the limit?
- Is waste properly segregated?
- Is waste compatible with the container?
- Are waste containers in good condition?
- Is waste stored at or near the point of generation?
- Is waste under the control of the generator?
- Are waste containers closed?
- Is the SAA free of spills and leaks?
- Are hazardous waste containers labeled using the updated format?
  - Are the waste hazards associated with the waste clearly indicated?
  - For waste mixtures: are all contents listed with associated percentages totaling 100%?
  - Are Principal Investigator, Building & Room information entered?
  - Are hazardous waste containers marked with the words "Hazardous Waste"?
- Is all waste identified (no unknown present)?
- Per the PI or PI's designee, is hazardous waste being properly disposed of through EH&S (not poured down sinks)?
- Is all waste being stored in the SAA (not in additional points throughout the lab)?
- Is the monthly SAA self-audit up to date and available?

### Pest Management

- Is an effective integrated pest management program in place?

### Personal Protective Equipment

- Is PPE (e.g. gloves, safety glasses/goggles, lab coats, thermal protection, etc.) available (stored clean and in good repair) and worn for the activity being conducted?
- Is PPE stored in a manner to prevent damage or contamination?
- Are full coverage shoes with good sole grips worn in the lab?
- Are cryogenic materials handled with the proper PPE?
- Is the lab using the appropriate gloves for their work (have they consulted the glove compatibility reference chart)?

- Are gloves being used and disposed of properly?
  - Are used gloves being disposed of with other contaminated laboratory waste?
  - Are disposable gloves prohibited from being washed or reused?
  - Are gloves being removed and hands being washed when work with hazardous materials has been completed and before leaving the laboratory?
  - Are gloves being changed when contaminated, integrity has been compromised, or when otherwise necessary?
- Are respirator wearers trained, fit tested and enrolled in the respiratory protection program and/or Biopath as appropriate?
- Are laser specific safety glasses or goggles available if the lab is working with lasers?
- Is hearing protection worn for high noise areas (e.g. sonicators, grinders)?
- Has a noise survey been conducted to determine the need for using hearing protection?
- Are protective laboratory coats, gowns, or uniforms worn to prevent contamination of personal clothing and are they removed before leaving for non-laboratory areas (i.e. cafeteria, library, administrative offices)?
- Are scrub suits and uniforms removed before leaving the facility? Is reusable clothing appropriately contained and decontaminated prior to laundering? Is laboratory and protective clothing prohibited from being taken home?
- Are eye and face protection compliant?
  - Based on risk assessment, are eye and face protection (goggles, mask, face shield, or other splatter guard) used for anticipated splashes or sprays of infectious or other hazardous materials when the microorganisms must be handled outside the BSC or containment device? Do persons who wear contact lenses in laboratories also wear eye protection?
  - Is eye and face protection disposed of with other contaminated laboratory waste or decontaminated before reuse?

### Practices

- Are medical surveillance and/or immunizations available as appropriate for lab personnel? Are records maintained?
- Are staff aware that immune-suppressed conditions can make them more susceptible to the agents they are working with and do they know they should discuss their conditions with Occupational Health?
- When a procedure or process involving infectious agents cannot be conducted within a BSC, are appropriate combinations of PPE (e.g. respirators, face shields) and physical containment devices (centrifuge safety cups or sealed rotors) then used?
- Are needleless systems and other safe devices used when appropriate?
- Are non-research animals or plants prohibited in the laboratory?
- Are sink traps and floor drains filled with water, and/or appropriate disinfectant to prevent migration of vermin and gases?
- Are personnel washing their hands after removing gloves and before exiting the laboratory?
- Are soap and paper towels available at wash station?
- Are procedures performed to minimize the creation of splashes and/or aerosols?
- Are laboratory equipment and work surfaces decontaminated routinely, after work with infectious materials is finished, and especially after overt spills, splashes, or contamination with infectious materials?
- Is bleach or an appropriate disinfectant (not ethanol) being used to disinfect surfaces?

- Is bleach being used properly for disinfection?
  - Is there sufficient bleach in the BSC aspirator flask?
  - If aspirator flasks are used over the course of several days, is there adequate chlorine to disinfect the waste?
  - Is bleach properly diluted and made fresh each day?
  - Is bleach un-expired?

### Sharps

- Are sharps handled and disposed of properly?
  - Are safety devices being chosen for sharps being used with infectious material/rDNA?
  - Are sharps generated in the BSC being collected into sharps containers within (not outside) BSC?
  - Are sharps properly segregated (gloves, paper towels or other 'soft' items are never in the sharps containers)?
  - Are sharps containers not overfilled?
  - Are containers of contaminated needles, sharp equipment, and broken glass decontaminated before disposal, and disposed of according to any local, state, and federal regulations?
  - Are non-disposable sharps placed in a hard-walled container for transport to a processing area for decontamination, preferably by autoclaving?
  - Are sharps containers conveniently located to the work being performed?
  - Is broken glassware being handled properly (removed using mechanical means such as a brush and dustpan, tongs, or forcep)? Is plastic ware substituted for glassware whenever possible?
  - Are needles not bent, sheared, broken, recapped, removed from disposable syringes, or otherwise manipulated by hand before disposal?
  - Is a high degree of caution always taken with any contaminated sharps items including needles and syringes, slides, pipettes, capillary tubes, and scalpels?

### Signs and Postings

- Are the Notice Board (NB) with Emergency Call list and hazard warning labels compliant?
  - Is the Notice Board posted at the lab entrance?
  - Is the notice board legible? (check no if they need a new NB)
  - Are the hazard stickers on the NB complete (none need to be added)?
  - Does the NB have a current emergency call list (ELC)? (check no if they need a new ECL sticker)
  - Does the emergency call list have two names with afterhours phone numbers?
  - Does the lab have signage identifying the lasers present in the lab?
  - If the NB has a privacy ECL, is it updated?
- Is warning signage posted to alert entrants what PPE is required?
- Is Laboratory (Biosafety) Signage compliant?
  - Does the sign contain the BIOHAZARD symbol with the appropriate biosafety level written in?
  - Does all laboratory equipment have the appropriate hazard stickers?
  - When infectious materials or infected animals are present, is a hazard sign incorporating the universal biohazard symbol posted on all laboratory and animal room access doors?
  - Are persons entering the lab required to read and follow instructions on practices and procedures?
  - Are people entering the lab advised of hazards present?

- Are entry and exit procedures/requirements posted as appropriate?

### Training

- Per the PI or PI's designee, do lab personnel receive appropriate training regarding the potential hazards associated with the work involved, special microbial practices and manipulations of infectious agents, the necessary precautions to prevent exposures, and exposure evaluation procedures? Does the PI/Director ensure employees demonstrate proficiency prior to being allowed to work with infectious agents?
- Are records for annual training sessions, and staff attendance at the training sessions in evidence and complete?
  - Is Hazardous Waste training complete for all personnel including the in-person training session for the hazardous waste manager?
  - If work involves blood or OPIM, is Blood borne Pathogen / Biomedical Waste Training complete for personnel?
  - Is Biomedical Waste training complete for all personnel?
  - Are personnel receiving lab/facility-specific training annually and/or when changes in procedures occur?
  - If the lab staff ships biological materials or dangerous goods is training certification for shipping biological materials/dangerous goods current?
  - Are personnel trained initially and annually in spill handling?