



LAB PERSONNEL SAFETY CHECKLIST

EMPLOYEE/STUDENT NAME/POSITION (PRINT FIRST NAME, LAST NAME, and POSITION):

PRINCIPAL INVESTIGATOR/SUPERVISOR (PRINT FIRST AND LAST NAME):

DEPARTMENT/BLDG/ ROOM #:

DATE OF INITIAL REVIEW WITH EMPLOYEE: _____

All employees/students working in a research laboratory at UH Manoa shall be trained in the topic areas on this list, where applicable, to ensure compliance with UH Safety and Health policies and procedures and to reduce the occurrence of workplace illness and injury. This checklist shall be reviewed with the employee/student in person by the lab supervisor or his/her/their designee annually.

ADMINISTRATIVE POLICIES & PROCEDURES	Date Reviewed	N/A
Has the PI/Lab Supervisor reviewed with the employee/student the laboratory signage system as indicated on the door?		
Has the PI/Lab Supervisor discussed the nature of the research being conducted in the laboratory?		
Has the UH Safety Solutions Laboratory Hazard Assessment been assigned for review and acknowledgment?		
Has the employee/student been trained on the safe methods for performing specific job duties (have Standard Operating Procedures (SOP's) been reviewed)?		
Have basic laboratory safety requirements (prudent laboratory practices) been explained and reinforced with the employee/student?		
Has the PI/Lab Supervisor reviewed the laboratory Chemical Hygiene Plan (CHP) with the employee/student?		

EMERGENCY POLICIES & PROCEDURES	Date Reviewed	N/A
Have all applicable emergency equipment locations and procedures been identified and reviewed with the employee/student (see the following for specific areas to be covered)?		
<ul style="list-style-type: none"> ● Emergency Shower 		
<ul style="list-style-type: none"> ● Emergency Eyewash 		
<ul style="list-style-type: none"> ● Workplace first aid kit 		
<ul style="list-style-type: none"> ● Chemical spill kit(s) location(s) and spill procedures 		



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Has the Emergency Response Guidebook (see Department of Public Safety website: http://manoa.hawaii.edu/dps/emergencyguidebook.html) been reviewed (with emphasis of the following information)?		
<ul style="list-style-type: none"> Department of Public Safety telephone Extension: 808-956-6911 		
<ul style="list-style-type: none"> Meeting location upon evacuation: (fill in the blank) <p>_____</p>		
Have the workplace procedures for properly reporting, documenting, and receiving treatment for a workplace injury been reviewed?		
<ul style="list-style-type: none"> Other (not listed) <p>_____</p>		
Has the PI/Lab Supervisor discussed the need for the employee/student to inform their health care providers of the hazardous substances (chemical, biological, radioactive) used in the laboratory during each medical visit (for example, in the case of pregnancy, informing the physician about hazardous materials used in the laboratory)?		

POTENTIAL HAZARDS/RISKS	Date Reviewed	N/A
Has the PI/Lab Supervisor discussed the hazardous components of the research?		
Has the PI/Lab Supervisor discussed the safe use of, storage location, inventory location, and quantities of the following items (if present)?		
<ul style="list-style-type: none"> Chemical 		
<ul style="list-style-type: none"> Biological 		
<ul style="list-style-type: none"> Radioactive 		
Has the PI/Lab Supervisor discussed other potential hazards, including physical hazards (high/low pressure and/or temperature, fire, compressed gases, lasers, machinery, hand/power tools, electricity, noise, vibration, heights, etc.)?		
Has the employee/student received instruction on known symptoms associated with exposure to highly toxic chemicals and/or biological commodities used in the laboratory?		

Personal Protective Equipment	Date Reviewed	N/A



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Has the <i>UH Safety Solutions Laboratory Hazard Assessment</i> information concerning Personal Protective Equipment (PPE) required in the laboratory been reviewed and acknowledged?		
Has appropriate PPE been provided to the employee/student?		
Has the student/employee been shown how to properly don, wear, doff, and maintain PPE?		
Has the student/employee been informed of the limitations of PPE?		

HAZARDOUS WASTES	Date Reviewed	N/A
Have the locations been identified and the procedures for handling various wastes been reviewed with the student/employee?		
<ul style="list-style-type: none"> Hazardous Chemical Waste (location of the Satellite Accumulation Area(s), location of emergency procedures, etc.) 		
<ul style="list-style-type: none"> Sharps/broken glass 		
<ul style="list-style-type: none"> Radioactive materials 		
<ul style="list-style-type: none"> Biological materials 		

TRAINING(S) Note: Training required to work in a lab will depend on commodities present and be determined by the PI.	Date Completed	N/A
Do you work in a laboratory setting? If yes, complete EHSO provided Laboratory Safety training. Initial in-person training: https://www.hawaii.edu/ehso/lab-safety-training/		
Conduct annual laboratory safety refresher training with PI/lab supervisor using this document.		
Completed Hazardous Waste Generator training (if generating chemical waste and submitting for proper disposal to UH EHSO). Initial in-person training: https://www.hawaii.edu/ehso/hazardous-waste-generator-training/		
Completed Hazardous Waste Generator annual refresher online training through Laulima.		
Completed Biosafety and Bloodborne Pathogen training. Initial in-person training: https://www.hawaii.edu/researchcompliance/biosafety-education		
Completed Biosafety and Bloodborne Pathogen annual refresher online training through Laulima.		
Completed Radiation Safety training.		



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Initial in-person training: https://www.hawaii.edu/ehso/radiation-training/		
Completed Radiation Safety annual refresher online training through Laulima.		
If you are planning to use a <i>respirator</i> on the job, a medical clearance, training, and fit testing may be required. Please contact the EHSO prior to initial use.		
For other training(s) that are not listed above but may be required by your PI (e.g. compressed gas safety, pressure vessel safety, fire safety, electrical safety, etc.), contact the EHSO for guidance.		

All laboratory personnel must: **KNOW** the hazards, **UNDERSTAND** the hazards and risks, and have the **SKILLS** to execute safe practices.

ACKNOWLEDGMENT OF RESPONSIBILITIES:

I have acknowledged that I fully understand the policies and procedures for working at this facility. I agree to comply with all safety procedures at all times. Furthermore, I understand that if I endanger my own or a colleague’s safety, I may have restricted access to certain work areas and duties as deemed necessary by my supervisor until further review and training.

Employee/Student:

Signature

Date

Principal Investigator/Lab Supervisor:

Signature

Date

Keep this completed form with employee training records.