# **MTRL Semi-Annual Laboratory Inspection**

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| **Building name and Room Number:** |   |
| **Lab Manager / Supervisor:** |  |
| **Name(s) of Inspector(s):** |  |
| **Date:** |  |
| **General Laboratory Hazards** | **Y** | **N** | **N/A** |
| 1. Are monthly inspections up-to-date?
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| 1. Is appropriate Personal Protective Equipment (PPE), such as lab coats, gloves and protective eyewear, available to all workers and is it being used?
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| 1. Is appropriate laboratory attire being worn (i.e. no shorts, skirts or sandals are present)?
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| 1. Is the space free of evidence of food, drink, or chewing gum present in the lab, including lab garbage cans?
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| 1. Are fire extinguishers adequate for materials used, readily accessible, unobstructed, charged, and inspected within the last year? Is signage present (if not clearly visible)?
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| 1. Are fire-alarm pull-stations accessible and are emergency exit doors unobstructed and functional?
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| 1. Are emergency eyewashes accessible, unobstructed, functioning properly, and tested at least monthly?
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| 1. Are emergency showers accessible, unobstructed and tested at least yearly by operations / facilities personnel?
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| 1. Are spill kits accessible, stocked and in working order? Are spill response and clean-up procedures and proper signage present?
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| 1. Are aisles, fire exits, sprinklers, stairwells and electrical panels kept clear of materials, equipment, and spills?
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| 1. Are occupants aware of how to access first aid when needed?
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| 1. Are laboratory emergency contacts clearly posted?
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| 1. Are “No Eating/Drinking/Smoking” signs posted?
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| 1. Does door signage indicate the hazardous materials present in the lab?
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| 1. Are electrical cords in good repair (no exposed wiring) and adequately restrained? No electrical hazards present?
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| 1. Have seismic issues been considered i.e. shelving secured, restraints, heavy items stored low?
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| 1. Do lab supplies (glassware, tubing, etc.) appear to be in good condition?
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| 1. Are lab areas, benchtops, sinks, fumehoods, etc. clean and tidy?
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| 1. Do new staff receive workplace and task-specific orientations and are records kept?
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| 1. Are supervisors and workers aware of the requirement to have written procedures to ensure the safety of people working alone or in isolation (work alone policy)?
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| 1. Are vacuum ballasts/dewar flasks protected?
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| **Chemical Safety** | **Y** | **N** | **N/A** |
| 1. Is the Chemical Safety Manual readily available and easily accessible?
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| 1. Is there a chemical inventory with expiry dates and are the expired chemicals properly disposed?
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| 1. Are fumehoods tidy, functional, and annually certified?
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| 1. Are gas cylinders properly secured, located away from doors & heat / ignition sources?
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| 1. Are there proper supplier and / or workplace labels on all containers (compliant with WHMIS 2015)?
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| 1. Are all chemicals stored in proper containers/cabinets (not stored on floor)?
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| 1. Are Safety Data Sheets (SDS) readily available, easily accessible and regularly updated (less than 3 years old)?
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| 1. Is there less than 25 L of flammables in the open lab & containers less than 5 L?
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| 1. Is concentrated perchloric acid (70%) absent and is dilute perchloric acid stored safely?
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| 1. Is there an inventory of peroxide-forming chemicals?
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| **Laser Safety** | **Y** | **N** | **N/A** |
| 1. Is laser hazard warning signage posted?
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| 1. Is the beam enclosed or have other provisions to prevent accidental exposure been implemented?
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| **Additional Comments** |
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