

The University of Texas at San Antonio (UTSA)
Office of Environmental, Health, Safety & Risk Management - Laboratory Safety Division
Laboratory Safety Evaluation Procedures

	PURPOSE	Page	2
I.	SCOPE	Page	2
II.	LABORATORY SAFETY EVALUATION RECORD REPORT Section-by-section description	Page 2	2
III.	THE LABORATORY SAFETY EVALUATION PROCESS 1. Preliminary Information 2. The Actual Audit 3. Deficiency Notification 4. Deficiency Follow-Up 5. Evaluation / Deficiency Completion	Page 3 4 4 5 6	3
Appendix A	LABORATORY SAFETY EVALUATION RECORD	Page	7
Appendix B	EHSRM STANDARDIZATION & DROP DOWN MENU CODES	Page	11
Appendix C	HAZARDOUS CHEMICAL INVENTORY LIST & TRAINING UPDATE	Page	12

PROCEDURE REVIEW:

Original: 01/03/2005

Reviewed by:	Date:
<i>Signature on file</i> J. Brian Moroney – Director of EHSRM	January 30, 2009
<i>Signature on file</i> J. Brian Moroney – Director of EHSRM	January 27, 2011
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The University of Texas at San Antonio (UTSA)
Office of Environmental, Health, Safety & Risk Management - Laboratory Safety Division
Laboratory Safety Evaluation Procedures

PURPOSE: The purpose of these audit procedures is to anticipate, recognize, evaluate, and control potentially hazardous conditions in the university laboratory.

I. SCOPE: The Laboratory Safety Division staff conducts periodic audits to evaluate each laboratory's compliance with the most current version of the UTSA *Chemical Safety Plan, Biological Safety Plan, Bloodborne Pathogen Exposure Control Plan, Physical Safety Plan, Laser Safety Plan, X-ray Safety Plan and Radiation Safety Plan*. Laboratories will be evaluated on a frequency based on hazard severity: High = quarterly; Moderate = semi-annual; Low = annual, but each laboratory will be evaluated at least once per fiscal year. This evaluation includes a basic risk assessment and job hazard analysis for chemical, biological, radiological and physical hazards present in the laboratory, with the goal of reducing personal risk of exposure or injury, and loss of equipment and facilities. The safety plans cover policies and procedures to evaluate compliance with environmental, health, and safety regulations including, but not limited to: 1) The Texas Hazard Communication Act, 25 TAC §295; 2) Texas Department of State Health Services, Bloodborne Pathogen Control, 25 TAC §96; 3) TCEQ regulations on Spill Prevention and Control (30 TAC §327), Waste Minimization and Recycling (30 TAC §328), and Municipal Solid Waste (30 TAC §330); 4) Regulations adopted by the State Fire Marshal including NFPA 45 – Standard on Fire Protection for Laboratories Using Chemicals; 5) Biological containment recommendations as promulgated in *Biosafety in Microbiological and Biomedical Laboratories, 5th Edition*; and 6) Radioactive Material and Other Sources of Radiation (5 TAC §401).

II. LABORATORY SAFETY EVALUATION RECORD REPORT: The primary tool for accomplishing the stated purpose is the, *Laboratory Safety Evaluation Record* report, which is completed by Environmental, Health, Safety and Risk Management (EHSRM), safety specialist and coordinator staff under the direction of the Laboratory Safety Manager (LSM). This evaluation record contains 62 individual check items that are currently in use by a majority of UT System components, and stands ready to be revised as future needs or regulatory requirements dictate. This revision, dated 01/27/2011, may be downloaded from the EHSRM server, Safety on I Drive, or a copy viewed in Appendix A of these procedures. This form is used to record data gathered during the evaluation process or for data entry into the ISMS database, which is used to store the data, generate laboratory evaluation reports, and perform other statistical analysis reports.

The report is divided into 9 distinct sections, with a section-by-section description noted below:

1. HEADING & HAZARD ASSESSMENT SECTION:

- a. Describes the location, PI / Supervisor, and emergency contact information for the lab
- b. Items 1-11 in this section are used to enter or verify existing information in the EHSRM database, including type of room, basic laboratory hazards present, personnel and training

2. GENERAL POSTINGS SECTION – EVALUATION ITEMS 1-8:

- a. These survey items cover posted hazards, emergency contact information, and required notices

3. GENERAL SAFETY SECTION – EVALUATION ITEMS 9-16:

- a. 9-16 look at required Safety Manual and Procedure availability
- b. Training records, general housekeeping, food & drink policy are also covered here

4. GENERAL IAQ SECTION – EVALUATION ITEMS 17-19:

- a. These survey items look at general indoor air quality issues

UTSA Laboratory Safety Evaluation Procedures

5. FIRE SAFETY SECTION – EVALUATION ITEMS 20-28:

- a. This section of the survey contains questions pertaining to the UTSA Physical Safety Manual and NFPA 101 Life Safety Code

6. PHYSICAL SAFETY SECTION – EVALUATION ITEMS 29-36:

- a. This section of the survey again applies to compliance with the Physical Safety Plan with emphasis on OSHA General Industry Standards

7. GENERAL LABORATORY SAFETY SECTION – EVALUATION ITEMS 37-38:

- a. These items address compliance with regulations common to both biological and chemical laboratories.

8. BIOLOGICAL SAFETY SECTION – EVALUATION ITEMS 39-45:

- a. These items address compliance with the UTSA Biological Safety Plan, Exposure Control Plan, TDSHS / OSHA bloodborne regulations, and regulated medical waste.

9. CHEMICAL SAFETY SECTION – EVALUATION ITEMS 46-62:

- a. Survey items 46-58; primarily address compliance with the UTSA Chemical Safety Plan, Texas Hazard Communication Act, and NFPA 45– Standard on Fire Protection for Laboratories Using Chemicals.
- b. Survey items 59-60 address EPA/TCEQ hazardous chemical waste compliance
- c. The last 2 survey items, 61 & 62, address previous deficiencies and any additional items not covered on the survey.

III. THE LABORATORY SAFETY EVALUATION PROCESS: The laboratory evaluation process can be divided into 5 distinct parts: 1) Preliminary Information; 2) The Actual Audit; 3) Laboratory Evaluation Report; 4) Deficiency Follow-Up; and finally 5) Evaluation / Deficiency Completion. Each part of the process procedure is outlined below:

1. PRELIMINARY INFORMATION:

- a. Safety Manager, Specialist, or Coordinator determines whether lab has been previously surveyed, or is as yet not surveyed
 - i. If previously surveyed, then print out a copy of the previous report, get the evaluation from the files or access the previous report in the ISMS.
 - ii. If the lab is unevaluated or new, then input the laboratory's information into ISMS and access the appropriate form on the Mobile PC or print out a *Laboratory Safety Evaluation Record* off the EHSRM server, *Safety* folder - *Users on I Drive*, by doing the following:
 1. Click on the folders: *Users on I Drive* > *Common* > *Safety* > the *Program - Laboratory Safety* folder > *Lab Evaluation Program* folder > *Evaluations* folder > MS Word document titled, *UTSA Lab Safety Eval Report_01-27-11*.
 2. Complete as much of the Heading (first page) information as you are able.
- b. The EHSRM evaluator then contacts the Principal Investigator (PI), Lab Supervisor, or an administrative person in the department to set up an appointment to survey the lab. Be courteous, and answer any questions regarding the process that may come up – refer them to your supervisor if necessary. Every effort should be made to evaluate all of a PI's labs at one time. This facilitates improved response, awareness, and takes up less time.
 - i. If you are unable to contact someone to be there for the evaluation or the contact person is not present for a scheduled appointment, the audit may be conducted without anyone present, but this will most likely lead to increased deficiencies.

UTSA Laboratory Safety Evaluation Procedures

- ii. If you have a copy of the previous chemical inventory, you may forward that in advance to the PI/Supervisor or contact person for update prior to the evaluation.
- iii. If you are able to verify employees working in the lab over the phone or by e-mail, this will also allow you to review training records prior to the actual audit.

2. THE ACTUAL AUDIT:

- a. Once you've scheduled an appropriate time for the evaluation, bring your clipboard with a hard copy of the *Laboratory Safety Evaluation Record* form or the mobile PC with an electronic version of the form, appropriate personal protective equipment (safety glasses, protective gloves, & labcoat at minimum) and any other items you deem necessary from your preliminary information review. These items may include:
 - i. Hazard warning signs, required regulatory notices, and Safety Plans
 - ii. Labels: chemical, biohazard, hazardous waste, etc.
- b. Be prompt, maintain a professional appearance (labcoat with proper identification) and introduce yourself. Remember, the focus should be on customer service. Ask for the PI/Supervisor or contact person you spoke with on the phone, or by e-mail, and start the process by reviewing what hazards the lab personnel are working with, training records, and relevant Safety Plans.
- c. Continue the process noting on the Evaluation Record whether the answer to each question is Y = Yes, N = No, N/O = Not Observed, or N/A = Not Applicable.
 - i. Record any comments in the space provided.
- d. If there is no current chemical inventory on file, or it is in need of a major update, send the appropriate forms to the laboratory contact. Refer to Appendix C: Hazardous Chemical Inventory List.
- e. **IDLH = Immediately Dangerous to Life & Health.** In the event of a condition immediately dangerous to life, health, or property, **mark the IDLH box.** Contact the Laboratory Safety Manager or the Institutional Safety Officer (Director of EHSRM) to resolve the situation immediately – either has the authority to immediately cease lab operations.
 - i. **SRS = Serious.** If, in the opinion of the evaluator, the safety condition is deemed to be serious (i.e. – unsecured cylinder of gas, generating infectious aerosols in a failed biosafety cabinet, etc.), then **mark the SRS box**, and notify the Laboratory Safety Manager as soon as possible.

3. DEFICIENCY NOTIFICATION:

- a. Once you've completed the evaluation, every effort should be made to get the Laboratory Evaluation Report, to the respective PI/Supervisor or contact person designated for that laboratory, within 10 business days. In order to accomplish this, the report needs to be furnished to the LSM as soon as possible, but no later than 5 business days after the evaluation. Any special or unusual situations should be reported to the LSM immediately. This facilitates a more prompt response to suggested corrective actions if required.
- b. Creating the Laboratory Evaluation Report
(Note: Refer to Appendix B: *EHSRM Data Entry Standardization & Drop Down Menu Codes*)
 - i. The data from the Laboratory Evaluation Record will be input automatically in the ISMS database.
 - ii. Edit the Laboratory Evaluation Report generated by ISMS and submit to the LSM or create the Laboratory Evaluation Report to send to the PI as follows:
 - 1. Click on the *Evaluations* folder > MS WORD document titled, *Lab Evaluation Report.doc*.

UTSA Laboratory Safety Evaluation Procedures

- a. Email a copy of the report to the LSM for review and editing.
 - iii. The LSM will review the report, edit as necessary, approve the report in ISMS, if used, and save a copy in the Lab Evaluation Report folder in the I Drive.
 - c. Once the report is approved the LSM will do the following:
 - i. Attach the Laboratory Evaluation Report to an email using standardized wording according to the deficiencies noted or a no deficiency report.
 - ii. The email will be sent to the evaluator and to academic personnel according to the procedure in 4 (g) below.
 - iii. A copy of the email will be attached to the Laboratory Evaluation Record and Laboratory Evaluation Report for filing.
 1. State of Texas record retention period is: After the Date of Completion of all deficiencies, plus 5 years.
4. **DEFICIENCY FOLLOW-UP:** Depending on the nature and severity of any noted deficiency, the following corrective action will be taken by the Safety Manager, Specialist, or Coordinator:
- a. **Immediately Dangerous to Life & Health (IDLH):** If the evaluator notes any condition where there is risk of immediate danger to life, health, or facilities, this will be brought to the immediate attention of the Laboratory Safety Manager and the Institutional Safety Officer (Director of Environmental Health, Safety, and Risk Management). Corrective action may include immediate shut down of all operations as per the authority of the Director of EHSRM.
 - b. **Serious deficiency:** Any uncorrected deficiency (violation) deemed to be serious in the opinion of the evaluator will be reviewed and corroborated by the Laboratory Safety Manager. The LSM will establish a corrective action plan, which may include an on-site re-evaluation within a specified time period, additional training, etc.
 - i. Failure by the PI or supervisor to correct a serious deficiency within the time frame specified (not to exceed 30 days) will result in an *Escalated Deficiency Notification* follow-up as noted in item (e), this section.
 - c. **Other deficiencies:** Other deficiencies (violations) noted on the report for which no corrective action has been received within 30 days by an e-mail will remain open items and will be reviewed during the next evaluation.
 - i. **Facilities:** the evaluator will forward any deficiency that requires action by Facilities personnel to Work Control for resolution.
 - ii. **Repeat deficiencies:** Any deficiencies from a previous evaluation that are noted as a repeat violation during the evaluation process will be treated with greater severity, and will be noted on the Laboratory Evaluation Report as serious. Any repeat violations which are not addressed by the PI / supervisor with a plan for corrective action within the required time frame (normally 30 days) listed on the evaluation report will result in an *Escalated Deficiency Notification* follow-up as noted in item (e), this section.
 - d. **Disputed Deficiencies / Violations:** If a Principal Investigator / Lab Supervisor disputes a noted deficiency, and the dispute cannot be resolved by discussion with the Laboratory Safety Manager, or Director of Environmental Health, Safety, and Risk Management (Institutional Safety Officer), then the dispute will be forwarded to the Chair of the appropriate UTSA Faculty Safety Committee (Institutional Animal Care and Use, Institutional Biological Safety, Institutional Review Board, Laboratory Safety or Radiation and Laser Safety, Chemical Safety) for resolution.
 - e. **Escalated Deficiency Notification:** Deficiencies posing an unusual hazard, or those of a serious nature that have not been resolved after the specified time period, not to exceed 30 days (whichever is less), will be escalated.

UTSA Laboratory Safety Evaluation Procedures

- f. **Laboratory Safety Committee review:** This committee meets on a periodic basis to review unresolved laboratory deficiencies. The committee is composed in part of the Executive Vice Provost, AVP of Business Affairs, Director of Facilities, Director of EHSRM, and the Laboratory Safety Manager. The purpose of this committee is to ensure compliance with laboratory safety. The committee will identify sources of funding, and other resources to ensure all deficiencies are completed in a timely manner as needed.
 - i. **Quarterly Status Reports:** The LSM generates a quarterly report tracking labs evaluated, deficiencies, and lab safety training course attendance. This report is presented at the quarterly Laboratory Safety Committee meeting.
- g. **Reporting Process:** Emails containing reports are sent to Laboratory Safety personnel and to:
 - i. The PI/Laboratory Supervisor (LS) for a first notification (even for serious items).
 - ii. The PI/LS and copied to the Chair for a second notification.
 - iii. The Chair and copied to the Dean and PI/LS for a third notification.
 - iv. The Dean and copied to the Provost, Chair and PI/LS for a fourth notification.
 - v. The Provost and copied to the LSC, PI, Chair, Dean and Provost.
 - vi. If not resolved the matter will be turned over to the President.

The appropriate UTSA Safety Committee will consider extenuating or mitigating circumstances.

- 5. **EVALUATION / DEFICIENCY COMPLETION:** Once all the deficiencies noted on the Laboratory Evaluation Report have been resolved to the satisfaction of all concerned parties, then the evaluating Safety personnel will enter this completion date in the ISMS database.
 - i. Do this for each Laboratory Evaluation (inspection) with outstanding deficiencies that have been completed for this P.I. / Supervisor.
 - b. This completes the Laboratory Evaluation until the next evaluation date.
 - c. Once all deficiencies have been completed, retain the paper copy of the *Laboratory Evaluation Record* and supporting documentation for a period of not less than 5 years.

The University of Texas at San Antonio (UTSA)
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Laboratory Safety Evaluation Procedures

APPENDIX A: LABORATORY SAFETY EVALUATION RECORD, page 1 of 4

BUILDING	ROOM / AREA	EHS&RM PERSONNEL CONDUCTING EVALUATION	
_____	_____	_____, _____	
DATE OF EVALUATION	PRINCIPAL INVESTIGATOR / SUPERVISOR / MANAGER		TITLE
____/____/____	_____, _____		_____
DEPARTMENT	CONTACT PERSON		TITLE
_____	_____, _____		_____
CONTACT PHONE	STREET ADDRESS	CITY	ZIP + 4
____-____-____	_____	_____	____-____-____

Hazard Assessment

1) ROOM TYPE:

- | | | | | |
|--|---|--|---|--|
| <input type="checkbox"/> RES-Research Lab | <input type="checkbox"/> ANA-Anml holding | <input type="checkbox"/> EQU-Equip. room | <input type="checkbox"/> CLN-Clean Room | <input type="checkbox"/> Storage room |
| <input type="checkbox"/> TEA-Teaching lab | <input type="checkbox"/> ART-Art Lab / Shop | <input type="checkbox"/> INA-Inactive lab/rm | <input type="checkbox"/> OTH-Other room | <input type="checkbox"/> WIC-Walkin cb or fr |
| <input type="checkbox"/> TLC-Tiss. Cult. Lab | <input type="checkbox"/> AUT-Autoclav/Wsh | <input type="checkbox"/> FS-Facilities shop | <input type="checkbox"/> PRO-Procedure rm | <input type="checkbox"/> WNC-Walkin incub |
| <input type="checkbox"/> ANA-Anatomy Lab | <input type="checkbox"/> Dark Room | | | |

2) Biological agents used? **NO** **YES, LIST AGENTS:** _____, _____, _____, _____
 (Bacteria, virus, fungi, rDNA, etc.)

SELECT AGENTS / USDA PATHOGENS IN USE? **NO** **YES**

BSL: 1, 2, 3, 4

Are Human / Primate cell lines, blood, or tissue used in lab? **NO** **YES**

IBC Approval on file? **NO** N/A **YES**, list Protocol #(s): _____, _____,

3) Laboratory animals used? **NO** **YES**, List type (species): _____, _____, _____ **ABSL:** 1, 2, 3, 4

Vertebrate? **NO** **YES**, if YES, then list IACUC protocol #(s): _____,

4) Human Subjects used? **NO** **YES**, if yes, than list HS-IRB Protocol #: _____

Does protocol involve use of rDNA? **NO** **YES**

If YES, then does protocol have IBC & NIH RAC approval? **YES** **NO**

5) Chem. hazards present? **NO** **YES**, Check or LIST TYPES: Corrosive, Flammable, Peroxide former

Carcinogens – list: _____, _____, _____, _____, _____, _____

Other – list: _____

NFPA: Health=____, Fire=____, React.=____, Spc.=____

Haz. Waste Satellite Collection - YES, list waste _____

6) Radioactive materials? **NO** **YES**, LIST ISOTOPES: _____, _____, _____, _____ **X-Ray:** **YES** **NO**

List any other radiation producing devices (except LASERS): _____

7) Are any LASERS in use? **NO** **YES**, LIST CLASS: _____ **TRAINING:** **YES** **NO** **N/A**

8) Controlled substances? **NO** **YES**, LIST (include synthetic precursors): _____, _____, _____, _____

If YES, then DEA License available? **NO** **YES**. License #: _____

UTSA Laboratory Safety Evaluation Procedures

9) Special hazards present?

NO

YES, LIST TYPE: UV, High voltage, Other – list: _____

APPENDIX A: LABORATORY SAFETY EVALUATION RECORD, page 2 of 4

10) Laboratory Hazard Severity Rating and Evaluation Frequency:

Determine Lab rating and frequency of inspection by completing the table below. Refer to questions 1-9:

Lab Hazard Severity Rating	Biosafety Hazard Rating (1, 2, 3, or 4)	NFPA Chemical Rating (H, F, or R)	Radiation / LASER Hazard Rating	Evaluation Frequency
<input type="checkbox"/> LOW	ABSL/BSL/BL-P 1	0, 1, or 2	None; LASER Class 1, or 2	<input type="checkbox"/> Annual
<input type="checkbox"/> MODERATE	ABSL/BSL/BL-P 2	3	X-Ray; LASER Class 3b, or 4	<input type="checkbox"/> Semi-annual
<input type="checkbox"/> HIGH	ABSL/BSL/BL-P 3, 4	4	Any radioisotope	<input type="checkbox"/> Quarterly

Mark the appropriate box for the Lab Hazard Severity Rating, and Evaluation Frequency for the row that applies to the data gathered in questions 1-9.

11) PERSONNEL & TRAINING:

LAST NAME	FIRST NAME	MI	EMPL ID or Banner ID	SA 443 HazCom & Lab Safety			Specific Chemical Hazard Trng			SA 467 Biosafety			SA 419 Bloodborne Pathogens			SA 401 HazWaste Generator's		
				Y	N	N/A	Y	N	N/A	Y	N	N/A	Y	N	N/A	Y	N	N/A
XXXXXXXX	XXXXXX	X	XXXXXXXXXX	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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UTSA Laboratory Safety Evaluation Procedures

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				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

UTSA Laboratory Safety Evaluation Procedures

APPENDIX A: LABORATORY SAFETY EVALUATION RECORD, page 3 of 4

Date Performed: _____

Lab / Room: _____

P.I. / Supervisor: _____

Procedure: Evaluate each of the following laboratory items according to the requirements of the appropriate UTSA Safety Manual(s). Place a check in the appropriate space for Y (Yes), N (No), N/O (Not Observed), or N/A (Not Applicable). Enter comments in the space provided.

SECTION	#	DESCRIPTION	Y	N	N/O	N/A	IDLH	SRS	COMMENTS		
GENERAL POSTINGS	1.	NFPA 704 Code	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
	2.	No Food or Drink	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
	3.	Radiation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
	4.	Biohazard (> BL2 – med surveillance & PPE req'd)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
	5.	UV Light	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
	6.	LASER	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
	7.	Current emergency phone numbers posted?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
	8.	TDH Radiation Notice to Employees	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
GENERAL SAFETY	9.	Current Chemical Safety Plan available?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
	10.	Current Biological Safety Plan available?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
	11.	Current Radiation Safety Plan available?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
	12.	Current Physical Safety Plan available?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
	13.	Current Emergency Response Plan available (web access)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
	14.	Appropriate training records on file?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	
	15.	General housekeeping orderly?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	
GENERAL IAQ	16.	No food or drink observed in lab?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	
	17.	No unusual odors present?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	18.	Is room pressure negative to corridor?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
FIRE SAFETY	19.	No visible particulates coming from vents?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	20.	Fire egress unobstructed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	21.	Access to pull alarms clear?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	22.	Fire extinguisher available & inspected?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	23.	Smoke detector present?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	24.	Self-closing door to lab functional and closed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	25.	Path to electric panel & gas shut off clear?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	26.	Natural gas lines functional, labeled, & used properly?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	27.	Heat sources separated from combustibles?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	28.	18 inches clearance to sprinklers, lights & air vent ducts?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
PHYSICAL SAFETY	29.	Absence of slip, trip, & cut hazards?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	30.	Compressed gas cylinders secured?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	31.	Noise levels acceptable (action level = 85 dB)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	32.	Guards in place for mechanical hazards?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	33.	Electrical equipment grounded properly/ Circuits/outlets not overloaded?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	34.	Extension cords not in use (except emergency)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	35.	Ceiling tiles & walls intact & in good condition?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	36.	Evidence or report of leaks or water damage?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			

UTSA Laboratory Safety Evaluation Procedures

SECTION	#	DESCRIPTION	Y	N	N/O	N/A	IDLH	SRS	COMMENTS
GENERAL LAB SAFETY	37.	Spill kit available?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	38.	Appropriate warning signs posted (hood, refrigerators, etc.)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
BIO-LOGICAL SAFETY	39.	Standard / Universal precautions utilized?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	40.	Potentially exposed workers offered vaccines / medical surveillance?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	41.	PPE available and used as required?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	42.	Hand washing facilities adequate?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	43.	Biological Safety Cabinet certified annually?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	44.	U V lamps used properly & posted?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
CHEMICAL SAFETY	45.	Medical waste / sharps properly stored and handled?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	46.	Hazardous chemical list / inventory updated?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	47.	CSC approval to work with carcinogens on file?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	48.	Required (OSHA) chemical monitoring on file?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	49.	Controlled substances secured and logs in order?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	50.	Excessive chemicals not stored in fume hood?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	51.	Linear flow rate in fume hood adequate, inspection current, and sash height proper?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	52.	Chemicals stored and segregated properly?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	53.	Chemicals labeled properly (hazards & date received)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	54.	No very old or potentially explosive chemicals?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	55.	No flammables stored in non-explosion proof refrigerator?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	56.	Hazardous liquid chemicals stored below employee's eye level or 6 feet?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	57.	Safety shower / eyewash available within 100 ft. or 10 seconds travel & tested monthly?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	58.	Employees able to locate MSDS & Safety Manual(s)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	59.	Chemical waste properly stored? Liquid waste capped / closed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	60.	Chemical waste properly labeled including approximate component %?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	61.	Previous deficiencies adequately resolved?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	62.	There are no additional safety concerns?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Any unsatisfactory safety condition or concern must be relayed to the appropriate UTSA constituent utilizing the Laboratory Safety Division - Laboratory Evaluation Deficiency Report.

Date Performed: _____
 Report Date: _____

SIGNATURES

This facility has been evaluated against criteria specified in the UTSA Laboratory / Chemical Hygiene, Biological & Bloodborne Pathogens, Radiation, and Physical Safety Manuals.

Evaluated By: _____ Date evaluated: _____

Reviewed By: _____ Date reviewed: _____

APPENDIX A: LABORATORY SAFETY EVALUATION RECORD, page 4 of 4

UTSA Laboratory Safety Evaluation Procedures

APPENDIX B: EHSRM DATA ENTRY STANDARDIZATION & DROP DOWN MENU CODES, page 1 of 2

Data Entry: Employee names, training, etc. will be entered in capital letters. Only exceptions are radioisotopes or chemical formulas where small case is used in the element name (i.e. – copper = Cu; sodium = Na), or drop down menu / auto descriptors. EMPL / Banner ID: Enter continuous 9-digit string preceded by zeros (i.e. – 000222333).

Buildings: Buildings on each campus be listed using the 2 or 3 letter code in the most current UTSA Directory / Facilities Planning Coordinator Building Code Listing.

Radioactive Isotopes: Enter as P-32, H-3, S-35, not as ³²P, ³H, or ³⁵S

Labs / Rooms: The following 3 letter codes will be used for EHSRM lab / room drop down menu:

RES	= Research Lab
TCL	= Tissue Culture Lab (HEPA filtered, positive airflow, CB or BSC)
ANI	= Animal holding room
AUT	= Autoclave, wash room, automated cage wash
INA	= Inactive lab / room
EQU	= Equipment room; computers, fermentors, etc.
OTH	= Other room – list in lab notes
FSS	= Facilities Shop - Print, Wood, Auto, Paint, etc.
WIC	= Walk-in Cold Room or freezer
WNC	= Walk-in incubator
DRK	= Dark room for photography or insects
STO	= Storage room or area (small – lab size)
TEA	= Teaching (Student) Lab
PHY	= Physics Lab
ART	= Art Lab – ceramic shop, print shop, painting studio

Drop Down Menu Designations of the UTSA Campus as listed on UTSA Website:

CAMPUS	Campus Address
1604	One UTSA Circle, San Antonio, TX 78249-0619
Downtown San Antonio	501 W. Durango Blvd, San Antonio, TX 78207
Institute of Texas Cultures	801 S. Bowie Street San Antonio, TX 78205
Off Campus	Varies

Training Courses

Division	Course #	Frequency	Course Title
Laboratory Safety	SA 443	One-time	Hazard Communication and Laboratory Safety
	SA 467	One-time	Biosafety
		Annual	BSL-3 Training
		One-time	BSL-3 Entry/Exit Training
		One-time	HazCom for Art
Environmental Protection and Construction Safety	SA 401	One-time	Hazardous Waste Generator's
Risk and Life Safety Management	SA 419	Annual	Bloodborne Pathogens

UTSA Laboratory Safety Evaluation Procedures

Appendix C: Hazardous Chemical Inventory List, page 1 of 1

New Chemicals to be added to the Hazardous Chemical List:

Please complete the information requested in the table below for each new hazardous chemical you have added to the lab / area inventory since the last update or not included on the attached list.

INCLUDE CHEMICALS WITH A RECOGNIZED PHYSICAL AND/OR HEALTH HAZARD.

- Physical Hazards: Combustible, flammable, compressed gas, explosive, organic peroxide, oxidizer, pyrophoric, or reactive.
- Health Hazards: Carcinogen, toxic, irritant, corrosive, or sensitizer.

DO NOT INCLUDE THE FOLLOWING TYPES OF CHEMICALS FOR THIS LIST:

- Non-hazardous chemicals and retail consumer goods used for their intended purpose. For example *Easy Off Fume Free Max Oven Cleaner* or *Arm & Hammer Baking Soda*.
- Reagents and Stock Solutions containing less than 1% of a hazardous chemical, or less than 0.1% of a highly toxic or carcinogenic chemical. For example, a 0.5% solution of Tris Buffer would not be included, but a 0.5% solution of benzene would.
- Items considered "Articles" under the law. Articles include items such as ink pens, markers, alcohol pads, and blood collection tubes, which may contain small amounts of hazardous chemicals, but under normal use, there is little or no risk of human exposure. Contact Env. Health, Safety & Risk Mgmt if you have questions about articles.

If available, include the CAS number and NFPA 704 code, H - (health=blue color), F - (Flammability=red color), R - (Reactivity=yellow color), Spc - Special Hazard such as Carcinogen (CA), Oxidizer (OX), Corrosive (COR), Acid (ACID), Radioactive material (RAD), Poison – highly toxic (TOX), Water reactive (W).

#	Chemical Name	CAS Number (Chemical Abstracts Sequence)	NFPA 704 Code				Avg. Storage Qty/Day: grams (g) or liters (L)	Max Storage Qty at any time: g or L	Room #
			H	F	R	Spc			
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									
11									
12									
13									
14									
15									
16									
17									
18									

Lab Number / Area: _____

PI / Supervisor: _____

Date: _____