INSTRUCTIONS FOR COMPLETING THE LABORATORY SAFETY PLAN

Print this plan and keep it on file in the laboratory for review

General Lab Information

Required: For all laboratories

- Complete Principal Investigator's Agreement (page 2)
- Complete Laboratory Information (page 3)
- Review and sign Lab Safety Plan annually (page 4)
- Complete General Lab Safety and Emergency Information (page 13)
- Post lab evacuation route near lab exits
- Print and post Bomb Threat checklist near telephones
- Post Emergency contact information near telephones

UAB Work Safety Orientation Checklist

Required for all labs to provide documentation of training

- Review current practices and procedures and check for any changes or updates
- Mark off items on orientation checklist as they are completed
- Mark off task based training and provide documentation of lab specific training
- Sign off on General and Emergency Safety, Chemical Hygiene Plan, and Exposure Control Plans as they are completed
- Require Principal Investigator or Lab Manager to sign off on training documentation once completed

Exposure Control Plan (separate document)

Required for all labs working with human or primate blood or other potentially infectious material (OPIM)

- Require personnel to complete Basic Biosafety Training
- Review Responsibilities and Requirements
- Require personnel to complete Bloodborne Pathogens Training
- Complete Exposure Determination
- Require personnel to enroll in Occupational Medicine Program

Chemical Hygiene Plan (separate document)

Required for all labs using hazardous chemicals

- Review UAB Chemical Safety and Waste Management Manual
- Require personnel to complete Chemical Safety Training
- Require personnel to complete Hazardous Waste Handling
- Compile or update Chemical Inventory

PRINCIPAL INVESTIGATOR'S AGREEMENT

By signing below, I certify that the information presented in the Laboratory Specific Safety Plan Form is accurate and complete. I agree to comply with all the policies and procedures required in the Laboratory Specific Safety Plan and to fully train and supervise all researchers under my direction.

_____
Principal Investigator

_____
Signature

_____
Date

Safety Officer

In addition to the principal investigator, labs may designate one or more lab members to act as a Safety Officer. If a safety officer has been appointed in your lab, please identify below.

_____
Safety Officer Name

_____
Department/ Campus Address/ Campus Phone

LABORATORY INFORMATION

Name/Title (Principal Investigator)

Office Phone

E-mail address

Campus Address

Office Location(s):

UAB Affiliation (Department, Center or Institute):

Lab Location (Building(s)/Room number(s):

Location of Chemical Inventory:

Individual responsible for training personnel in this lab:

ANNUAL LAB SAFETY PLAN REVIEWAL/ REVISION

P.I. Must Sign Off Each Year

_____
Signature

_____
Date

_____
Signature

_____
Date

_____
Signature

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Date

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Signature

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Date

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Signature

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Date

_____
Signature

_____
Date

INSTRUCTIONS FOR LABORATORY SAFETY ORIENTATION CHECKLIST (pg. 6 and 7)

This form is to be used as a template only and does not necessarily imply that you as the Principle Investigator should have all areas completed. This form does, however, allow you to check off all of those areas that do apply to your operation and it provides documentation that the required training has been performed. It is your responsibility to make sure all required training modules are completed and that each person in your lab understands what is required of them. If you have any questions, feel free to contact EH&S at 4-2487.

SECTION 1 (pg. 6)- **Safety Orientation Checklist** (check applicable fields)
This area is used for documenting training that has occurred in all labs where the topic and its application are required. This form should act as a lab specific training template for all new lab members. After the training has been completed, check off and date those training modules that apply and have the employee sign the form. The PI or designee must also sign and date the form for it to be a valid document. You must have separate documentation for each lab employee on file.

SECTION 2 (pg. 7)- **Task-Based Training Programs** (check applicable courses)
Check all fields that apply for specialized training. For example, if the employee is working with or is exposed to human/non-human primate blood, human/non-human primate body fluids, hazardous chemicals, select agents or infectious agents, then he/she must be trained in the hazards of bloodborne pathogens (BIO500), chemical safety (CS101), etc. The PI is responsible for performing a job risk assessment to determine the appropriate training required for each employee. EH&S will aid with job-specific risk assessments; for assistance, call 4-2487. Please refer to the EHS Training Chart for help on what training is required.

SECTION 3 (pg. 7)- **Other Requirements** (list other requirements specific to your operation)
This section is designed for specific areas of concern that may apply to your laboratory operation. For example, if a respiratory protection program is needed based on the processes in your lab or related to your research, then you must provide respiratory protection (masks, respirators) for your employees with the program. If you have any questions as to which “other” programs are required, please contact EH&S at 4-2487.

After the above sections are completed, both the PI and the lab personnel must sign and date the “Laboratory Safety Plan Agreement” (pg. 8) attesting that the orientation has been completed and understood. These completed forms must be available for review by EH&S personnel when requested (during lab safety audit.

SECTION 1: SAFETY ORIENTATION CHECKLIST

Must be completed for each lab member

_____(lab personnel) has received laboratory safety training for the following:

	Date	Method**
General Laboratory Safety		
☐ Emergency Evacuation Plan and procedures		I☐ W☐ O☐
☐ Medical Emergency Procedures		I☐ W☐ O☐
☐ Non-Medical Emergency Procedures		I☐ W☐ O☐
☐ Loss of Utilities, gas leaks and flooding		I☐ W☐ O☐
☐ Laboratory Security		I☐ W☐ O☐
☐ Workplace Violence		I☐ W☐ O☐
☐ Eyewash: location and proper use		I☐ W☐ O☐
☐ Safety Shower: location and proper use		I☐ W☐ O☐
☐ Fire Extinguishers: locations and proper use		I☐ W☐ O☐
☐ Fire Alarm Pull Stations: locations and proper use		I☐ W☐ O☐
☐ PPE and Proper laboratory Attire		I☐ W☐ O☐
☐ Physical Laboratory Hazards		I☐ W☐ O☐
☐ Electrical Laboratory Hazards		I☐ W☐ O☐
Chemical Safety		
☐ Chemical Hygiene Plan		I☐ W☐ O☐
☐ SDS sheets (physical or online)		I☐ W☐ O☐
☐ Chemical Waste Handling		I☐ W☐ O☐
☐ Fume Hood: proper use and care		I☐ W☐ O☐
☐ Chemical Spill Kit: location and proper use		I☐ W☐ O☐
Biosafety		☐ ☐ ☐
☐ Exposure Control Plan		I☐ W☐ O☐
☐ Biological Safety Cabinet: proper use and care		I☐ W☐ O☐
☐ Autoclave: location and proper procedures		I☐ W☐ O☐
☐ Disinfectant Solutions: selection and proper use		I☐ W☐ O☐
☐ Biological Spill Kit: location and proper use		I☐ W☐ O☐
☐ Sharps: proper use and disposal		I☐ W☐ O☐
☐ Broken Glass Discard Box: proper use		I☐ W☐ O☐

** I=in person W=written O= online

View manuals and training courses at the UAB EHS Website

TASK-BASED TRAINING COURSES

Must be completed for each lab member

UAB Learning System Training Programs (check all that apply)

☐ Chemical Safety Training – CS101 (required if lab uses chemicals)

☐ Hazardous Waste Training – CS055 (required for the handling, storing, packing and manifesting of hazardous chemical waste)

☐ Medical Waste Training – BIO301L (required for the generating, handling, packing, or signing for pickup of medical waste)

☐ Basic Biosafety – BIO303 (required if lab uses BSL-1 or BSL-2 containment, practices, procedures)

☐ Hazard Communication – HS200 (required for all labs)

☐ Bloodborne Pathogens Training – BIO500 (required for labs with potential for exposure to bloodeborne pathogens)

☐ Shipping Infectious Substances, Category A training – BIO202 (required for the handling or packing of a Biological Substance, Category A)

☐ Shipping Biological Substances, Category B training – BIO201 (required for the handling or packing of a Biological Substance, Category B)

☐ Shipping with Dry Ice – BIO200 (required for the handling or packing of shipping packages using dry ice)

☐ Enrollment in Occupational Medicine Program (required for all lab personnel)

SECTION 3: List All Other Lab-Specific Requirements

Other Requirements (i.e. Respiratory Protection Program) :

_____

_____

_____

_____

LABORATORY SAFETY PLAN AGREEMENT

SHOULD BE COMPLETED BY EACH EMPLOYEE

By signing below, I certify that I have read the Laboratory Safety Plan and its supplemental material in its entirety. I understand the Laboratory Specific Safety Plan and agree to follow the policies and procedures as described in the plan when working in the laboratory for which it was written.

_____ _____

Employee Signature Date

_____ _____

PI/Supervisor Signature Date

Chemical Hygiene Plan Sign Off

By signing below, I certify that I have read the Chemical Hygiene Plan in its entirety. I understand the Chemical Hygiene Plan and agree to follow the policies and procedures as described in the plan when working in the laboratory for which it was written.

_____ _____

Employee Signature Date

_____ _____

PI/Supervisor Signature Date

Exposure Control Plan Sign Off

By signing below, I certify that I have read the Exposure Control Plan in its entirety. I understand the Exposure Control Plan and agree to follow the policies and procedures as described in the plan when working in the laboratory for which it was written.

_____ _____

Employee Signature Date

_____ _____

PI/Supervisor Signature Date

LABORATORY EMERGENCIES

Emergency Evacuation Plan: Attach map/diagram

Location of posted building floor plan evacuation route signs

Emergency evacuation route(s) to be used by students, staff, and visitors

Location of emergency assembly point

Method to be used to account for laboratory staff, students, and visitors in the event of an emergency

Location of areas of refuge for mobility impaired staff, students and visitors:

Staff Emergency Evacuation Responsibilities

Task	Responsible Individual
Shutting off oxygen or compressed gases	
Shutting off equipment, experiments or reactions	
Securing all freezers and refrigerators	
Ensuring all personnel have left the area	
Head count at assembly area	
Closing and securing all doors	
Securing or removing personnel items	
Securing laboratory materials	
Other	
Other	

Medical Emergencies

Review UAB Policy and Lab Specific Procedures. Post emergency numbers near phone. Have accident report forms readily accessible.

Fire Safety

_____

Fire extinguisher locations (room # and area)

_____

Locations of the fire alarm pull stations (room # and area)

Adverse Weather

_____

Location of safe area(s) in case of adverse weather (corridors, stairways, etc.):

Bomb Threats/ Suspicious Packages
Review Lab Procedures. Print Bomb Threat check sheet and post near telephones

Loss of Utilities

Equipment that must be shut down during loss of utilities:

Equipment	Location	Responsble Individual

LABORATORY SECURITY (fill out all that apply)

Risk Assessment performed by

Hazardous materials and chemicals and locations

Hazardous equipment and location

Infectious agents and locations

Select agents and toxins and locations

Laboratory Safety Equipment

Location(s) of laboratory eyewash(s)

Location(s) of safety shower(s)

Location(s) of first aid kit(s)

Location(s) of Biological/Chemical Spill kit(s) in the laboratory

Minimal requirements of PPE associated with specific types of lab work

PHYSICAL HAZARDS

Check the method(s) of risk reduction used for each hazard encountered in your lab.

Engineering Control: any physical or mechanical measures taken to minimize risk exposure (closed doors, added ventilation, etc.)
Administrative Control: any work practice taken to minimize risk exposure (safety policies, life safety audit, lock-out tag-out, etc.)
PPE Control: any equipment worn or u sed by worker to minimize risk exposure (gloves, safety glasses, lab coat, etc.)

Hazard	Method of Risk Reduction
Burn	☐Engineering ☐Administrative ☐PPE
Chemical Exposure	☐Engineering ☐Administrative ☐PPE
Biological Exposure	☐Engineering ☐Administrative ☐PPE
Electrical	☐Engineering ☐Administrative ☐PPE
Cryogenic	☐Engineering ☐Administrative ☐PPE
High Noise Levels	☐Engineering ☐Administrative ☐PPE
High Pressure Systems	☐Engineering ☐Administrative ☐PPE
Lasers	☐Engineering ☐Administrative ☐PPE
Physical Impacts from Falling Objects	☐Engineering ☐Administrative ☐PPE
Sharps	☐Engineering ☐Administrative ☐PPE
Slip/Trip	☐Engineering ☐Administrative ☐PPE
Steam Generators and Autoclaves	☐Engineering ☐Administrative ☐PPE
Radiation	☐Engineering ☐Administrative ☐PPE
Other:	☐Engineering ☐Administrative ☐PPE
Other:	☐Engineering ☐Administrative ☐PPE
Other:	☐Engineering ☐Administrative ☐PPE
Other:	☐Engineering ☐Administrative ☐PPE
Other:	☐Engineering ☐Administrative ☐PPE

EMERGENCY CONTACT INFORMATION

Reporting General Emergencies

For any emergency situation, contact the UAB Police or use the nearest Help Phone. State your name, location and the nature of the emergency. Send someone to meet the emergency responders if needed.

Place all Emergency calls from a UAB desk phone

- UAB Police/ Fire/ Ambulance: 911 or 4-3535
- Poison Control: (800) 222-1222
- UAB Hospital Emergency Room: 4-4911
- Occupational Medicine/The Workplace: 933-5300
- UAB HR On-The-Job-Injury Information: 4-4458

Location of Clinics for Employee Medical Treatment:

UAB Hospital Emergency Department
Jefferson Towers North 1st Floor
934-5100
Entrance is on 6th Av. South

Occupational Medicine-The Workplace
Health South Medical Center
1201 11th Avenue South, Suite 100
933-5300

Environmental Health and Safety
UAB Environmental Health & Safety: 4-2487
UAB Hazardous Materials Facility: 4-3797

	Name	Office location/phone	Home Phone	Cell Phone
Primary Investigator				
Laboratory Supervisor				
Authorized Lab User				
Authorized Lab User				
Authorized Lab User				
Authorized Lab User				