**Pre-Laboratory Safety Inspection Form**

Your lab is scheduled for a safety and compliance walk-through on\_\_\_\_\_\_\_\_\_ @ \_\_\_\_\_\_\_\_\_\_\_.

Please complete **Page 1** of the information below and e-mail back at least 1 day prior to the inspection date. Also, e-mail a copy of your current chemical inventory prior to the visit.

|  |  |
| --- | --- |
| **Principle Investigator:** |  |
| **Department:** |  |
| **Building:** |  |
| **Lab Room#(s):** |  |
| **Shared Room #(s):** |  |
| **Office Phone #:** |  |
| **E-mail:** |  |
| **Lab Phone #:** |  |
| **Emergency Phone #:** |  |
| **Lab Contact: (if other than PI)** |  |
| **E-mail:** |  |
| **Phone:** |  |

**Names, six-digit personnel numbers and title of all researchers working in the lab**

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| **Name** | **Personnel Number** | **Title** |
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**List all controlled substances in the lab (e.g. Ketamine, THC, Narcotics, Barbital) room# and amount:**

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| **DEA Registration#:** |  | **Expiration Date:** |
| **Substance** | **Amount** | **Room Number** |
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**Laboratory Specific Information:** (*if not applicable) place N/A*

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| **Biosafety Level: (BSL1 or BSL2)** |  |
| **List BSL2 Rooms** |  |
| **List IBC Registration #s** |  |
| **List IACUC Protocol #s** |  |
| **List IRB Exemption #s** |  |
| **List Animal Materials** |  |
| **List Microbial Agents (viruses, bacteria, microbes etc.)** |  |
| **List Exempt Select Agent Toxins: (TTX Cholera Toxin, etc.)** |  |
| **List Radioactive Isotopes: (3H, C14, P32 etc.) w/ room numbers** |  |
| **List Radioactive Chemicals; (uranyl acetate etc.) w/ room numbers** |  |
| **X-Rays w/ room numbers** |  |
| **Lasers (Class 3R, Class 3B and Class 4 only) w/ room numbers** |  |
| **Hazardous Chemicals:** | Send current copy to Research Safety prior to inspection date |

**Required Training Based on Research.** *Must be Completed Prior to Inspection Date*

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| --- | --- | --- |
| **Training Title** | **Who Must Take This Training** | **Location of Training** |
| Laboratory Safety | Everyone working in the lab | Blackboard |
| Principles of Biosafety-BSL2 | Working with infectious materials and/or human materials | <http://www.uthsc.edu/research/safety/training.php> |
| Bloodborne Pathogen | Working with human materials including cell lines | Blackboard |
| Handling Controlled Substances In The Lab | Authorized Users in the lab | Blackboard |
| Biosafety Cabinet Use | Anyone working with the BSC | Blackboard |

**Manuals and Plans that must be accessible (***if applicable***) via copy in a binder or on a designated computer:**

|  |  |
| --- | --- |
| **Manual or Plan Title** | **Location on Research Safety Website** |
| Chemical Hygiene Plan | <http://www.uthsc.edu/research/safety/policies.php> |
| Emergency Response Plan | <http://www.uthsc.edu/research/safety/safety-information.php> |
| Exposure Control Plan | <http://www.uthsc.edu/research/safety/policies.php> |
| Hazardous Material Spill Contingency Plan | <http://www.uthsc.edu/research/safety/policies.php> |
| Controlled Substances In Research | <http://www.uthsc.edu/research/safety/policies.php> |
| Incident Reporting Policy | <http://www.uthsc.edu/research/safety/policies.php> |