

SIGNAGE	Y	N	NA
13. Biohazard signs posted on lab entrances?			
14. Emergency contact information posted on lab entrances?			
15. Is the Biohazard Work Area, if only a portion of the lab, delineated with floor markings?			
16. Biohazard signs or labels on storage and use areas?			
17. Biohazard symbol affixed to potentially contaminated equipment?			
18. Refrigerators labeled "Not for Storage of Food for Human Consumption"			
RISK REDUCTION – WORK PRACTICES, PPE, AND ENGINEERING CONTROLS	Y	N	NA
19. Staff wash hands after handling viable materials, after removing gloves, and before leaving Biohazard Work Area?			
20. Eating, drinking, smoking, applying lip balm or cosmetics, and handling contact lenses are prohibited in the work area?			
21. Is food and drink stored outside the Biohazard Work Area in a dedicated refrigerator?			
22. Are procedures performed carefully to minimize splashes, sprays, and the creation of aerosols?			
23. Is the lab maintained in a clean and sanitary condition?			
24. Lab coats worn in the Biohazard Work Area?			
25. Lab coats free of visible contamination?			
26. Contaminated lab coats laundered on-site or by suitable outside contractor; not taken home by lab personnel?			
27. Lab coats removed before leaving for non-lab areas (library, cafeteria, administrative offices)?			
28. Gloves worn when handling biological agents?			
29. Gloves not used when touching "clean" surfaces (telephone, keyboard, elevator buttons, doorknobs)?			
30. If splashes or sprays might occur, is protective eyewear available and used?			
31. Respiratory protection strictly limited to <i>voluntary</i> use of filtering facepieces (dust masks)?			
32. UofM <i>Voluntary Use of Dust Masks</i> form completed for all staff choosing to use dust masks?			
33. OSHA Respiratory Protection Standard implemented when respiratory protection exceeds voluntary use of dust masks (filtering facepieces)?			
34. Are Biosafety Cabinets (BSCs) available (Class I or Class II)?			
35. Biosafety cabinet certified within past 12 months?			
36. Are BSCs located away from doors, fume hoods, air supply vents or other sources of airflow disruption?			
37. Has smoke testing determined that sources of airflow disruption do not interfere with proper functioning of the BSC?			

38. Only incidental amounts of chemicals used inside the BSC?			
39. Are laminar flow hoods (“clean air benches”) located in the lab?			
40. Are the laminar flow hoods used only for non-hazardous agents?			
41. Mechanical pipetting devices used?			
DISINFECTION, DECONTAMINATION, AND WASTE	Y	N	NA
42. Work surfaces decontaminated at least daily and immediately after spills?			
43. Decontaminants effective against agents in use?			
44. List decontaminants used:			
45. Written procedures in place for large and small spills or leaks?			
46. Biohazard spill kit available and properly stocked?			
47. Is an autoclave available?			
48. Are biological indicators routinely used to verify the efficacy of the autoclave?			
49. Biohazardous waste disposal procedures in place and implemented?			
50. Biological waste placed into appropriately labeled or color-coded receptacle?			
51. Waste container closed when not in use?			
52. Needles / sharps placed into appropriate containers (labeled, leak-proof, puncture resistant)?			
53. If materials are decontaminated outside the laboratory, are they transported in durable, leakproof containers?			

Biosafety Level 2

Laboratories using biosafety level 2 agents must also comply with the following provisions:

	Y	N	NA
1. Does the lab have access to the CDC's <i>Biosafety in Microbiological and Biomedical Laboratories</i> ?			
2. Is access to the lab limited or restricted when working with infectious agents?			
3. Describe method of access control (e.g., closed doors)			
4. Entrance signage includes biosafety level, and any special requirements for entry (such as PPE, training, or vaccination requirements)?			
5. Are medical evaluation and reporting procedures in place in the event of accidental exposure?			
6. Can staff describe the procedures to follow in the event of an exposure?			
7. Only needle-locking syringes or disposable syringe-needle units used?			
8. Needles are not bent, broken, removed or otherwise manipulated by hand before disposal?			
9. If needles must be recapped, is a one-hand technique used?			
10. Biosafety cabinet used for procedures that might produce infectious aerosols or splashes?			
11. Biosafety cabinet used for large volumes or high concentrations of infectious agents?			
12. If viable materials are centrifuged, are safety containment cups or sealed rotors with O-rings used?			
13. Are safety containment cups or sealed rotors opened only within a BSC?			
14. Is whole-face protection used for procedures that must be conducted outside the BSC?			
15. Sink utilizes hands-free controls (foot, knee, or automatically operated)?			
16. Emergency shower/eyewash station readily available?			
17. Are vacuum lines protected with a liquid disinfectant trap and HEPA filter?			

Bloodborne Pathogens (human blood, unfixed tissues, body fluids, cell lines)

Laboratories using any of the above substances must comply with the General Biosafety, Biosafety Level 2, and Bloodborne Pathogens sections of the checklist.

	Y	N	N/A
1. Is a Departmental <i>Exposure Control Plan</i> available and up-to-date?			
2. Does the lab have access to the OSHA <i>Bloodborne Pathogens Standard</i> (29CFR 1910.1030)?			
3. Have personnel with potential exposure received Bloodborne Pathogens training?			
4. Is refresher training provided annually?			
5. Have potentially exposed personnel been offered the Hepatitis B vaccine?			
6. Is a Vaccination Declination form on record for employees who have opted out of the HBV vaccination program?			
7. Are Universal Precautions employed?			
8. Does the lab maintain a needlestick / sharps injury log?			

Recombinant DNA

Labs utilizing recombinant DNA molecules must comply with the General Biosafety and the rDNA sections of the checklist. The BSL-2 section must also be completed if any of the vectors or agents involved are biosafety level 2 (or Risk Group 2) agents.

	Y	N	NA
1. Does the lab have access to NIH's <i>Guidelines for Research Involving Recombinant DNA Molecules</i> ?			
2. Is a <i>Registration for Recombinant DNA Research</i> form on file with EH&S?			
3. Is the rDNA experiment NIH Category III-F (exempt)?			
4. Is the agent replication deficient?			