

Laboratory Safety Checklist for New Biology Workers

Name: _____

1. Health and Safety Training: To be completed before you work in the laboratory.

Mandatory Courses (required of all employees):

Date Completed

- | | |
|--|-------|
| a. Worker Health and Safety Awareness | _____ |
| b. WHIMIS 2015 (Comprehensive) | _____ |
| c. AODA - Accessibility in Service | _____ |
| d. Western Safe Campus Community | _____ |
| e. Building Inclusivity through Anti-Racism | _____ |
| f. Supporting disclosures of gender based and sexual violence | _____ |
| g. Cyber safety awareness | _____ |
| Additional Courses: (if required. Discuss with Supervisor). | |
| i. Biosafety | _____ |
| ii. Lab Safety and Hazardous Waste Management | _____ |

2. Basic Safety:

Yes

You have been shown the location of:

- | | |
|-------------------------------------|--------------------------|
| a. The Lab Health and Safety Manual | <input type="checkbox"/> |
| b. Material Safety Data Sheets | <input type="checkbox"/> |
| c. Standard Operating Procedures | <input type="checkbox"/> |

You understand:

- | | |
|---|--------------------------|
| a. All injuries or incidents must be reported to supervisor | <input type="checkbox"/> |
| b. There is no food consumption in Laboratories | <input type="checkbox"/> |
| c. Doors must be locked when lab is unoccupied | <input type="checkbox"/> |
| d. Procedure/pickup times for Chemical waste disposal | <input type="checkbox"/> |

3. Emergency Equipment and Procedures:

Yes

You know the location and use of:

- | | | | |
|-------------------------------------|--------------------------|-------------------------------|--------------------------|
| a. Emergency phone numbers | <input type="checkbox"/> | b. Safety deluge shower | <input type="checkbox"/> |
| c. Eyewash station | <input type="checkbox"/> | d. Chemical spill kit | <input type="checkbox"/> |
| e. Fire alarm pull and extinguisher | <input type="checkbox"/> | f. Evacuation/alternate route | <input type="checkbox"/> |
| g. First aid kit | <input type="checkbox"/> | | |

4. Personal Protective Equipment

Yes

I understand that:

- | | | | |
|---|--------------------------|----------------------------------|--------------------------|
| a. Safety glasses must be worn in the lab | <input type="checkbox"/> | b. No open-toed shoes to be worn | <input type="checkbox"/> |
| c. No bare legs | <input type="checkbox"/> | | |
| d. There should be a safety glass tray for visitors | <input type="checkbox"/> | | |
| e. Lab gloves must be discarded <u>prior</u> to leaving lab areas | <input type="checkbox"/> | | |

5. Electrical Safety

I understand that:

- | | |
|--|--------------------------|
| a. Appliances must be plugged directly to wall outlet | <input type="checkbox"/> |
| b. Equipment/electronics/power bars must be ESA approved | <input type="checkbox"/> |
| c. Extension cords must not be used | <input type="checkbox"/> |

6. Position Hazard Communication Form:

Yes

This online form has been completed with your supervisor.

7. I will ask my Supervisor/Safety Officer/SERG Rep if I have a concern