

## Annual Laboratory Safety Orientation

All individuals engaged in laboratory prepping, teaching, or research must attend an annual safety orientation conducted by the Lab Coordinator, Principal Investigator, or other qualified personnel, in their assigned lab(s), per UAA Policies and Procedures and the Controlled Space Access Plan.

This safety orientation covers general laboratory hazards, policies, procedures, and the Chemical Hygiene Plan and appendices as applicable to the specific lab(s) occupied. Also discussed are equipment, activities, and other hazards specific to various labs. After reviewing the hazards specific to the lab, training requirements are determined

Print Name: \_\_\_\_\_

UAA ID#: \_\_\_\_\_

Print Trainer Name: \_\_\_\_\_

Print Supervisor Name: \_\_\_\_\_

*Safety topics required by all laboratory personnel are marked with **ALL***

**Supervisors:** Review and check all areas that apply. Have each applicant read the required policies, locate the safety equipment associated with the lab, and receive instruction on how to use the equipment in the lab.

**Applicants:** For each item checked by your supervisor, read the policies, locate the safety equipment, and demonstrate proper use of the equipment. When completed, initial on the line after each item.

Administrative policies are located online at [EHSRMS Policies and Programs](#).

Lab Specific Policies are located online at [EHSRMS&EM](#).

UAA Administrative Policies (policy numbers included)

**ALL** #2 Hazard Communication Program \_\_\_\_\_

#16 Use of Chemical Carcinogens \_\_\_\_\_

**ALL** #3 Laboratory Safety Standards/ Manual \_\_\_\_\_

#17 Bloodborne Pathogens \_\_\_\_\_

**ALL** #4 Supervisor and Employee Responsibilities \_\_\_\_\_

#18 Hazardous Materials Management \_\_\_\_\_

**ALL** #5 Emergency Evacuations \_\_\_\_\_

#22 Disposal of Medical and Infectious Waste \_\_\_\_\_

**ALL** #7 Fire and Evacuation Safety \_\_\_\_\_

**ALL** #29 Personal Protective Equipment \_\_\_\_\_

#9 Respiratory Protection \_\_\_\_\_

#35 Controlled Substances Use in Research \_\_\_\_\_

#10 First Aid \_\_\_\_\_

#37 Tool Safety \_\_\_\_\_

#11 Hearing Protection \_\_\_\_\_

UAA Lab Specific Policies

**ALL** Chemical Hygiene Plan (CHP) \_\_\_\_\_

Research Lab Policy – CHP Appendix 1 \_\_\_\_\_

Dry Ice/ Cryogen Policy \_\_\_\_\_

Research/ Laboratory SOP – CHP Appendix 4 \_\_\_\_\_

**ALL** Hazardous Waste Policy – CHP Appendix 3 \_\_\_\_\_

Service Animals in Labs \_\_\_\_\_

**ALL** Controlled Space Access Plan \_\_\_\_\_

Radioactive Waste Policy – CHP Appendix 2 \_\_\_\_\_

Location of General Emergency Information/ Equipment

- |  |  |
|--|--|
| <b>ALL</b> Emergency Assembly Area _____ | <b>ALL</b> Fire Pull _____                     |
| <b>ALL</b> Emergency Contact List _____  | <b>ALL</b> First Aid Kit _____                 |
| <b>ALL</b> Evacuation Map/Routes _____   | <b>ALL</b> Phone _____                         |
| <b>ALL</b> Fire Blanket _____            | <b>ALL</b> Reporting an Emergency Poster _____ |
| <b>ALL</b> Fire Extinguisher _____       |  |

UAA General Emergency Procedures

- |   |  |
|---|--|
| <b>ALL</b> Accident/ Incident Reporting (Origami) _____ | <b>ALL</b> Evacuation procedure _____              |
| <b>ALL</b> Building Lock-down procedure _____           | <b>ALL</b> Room Equipment Safety/Maintenance _____ |
| <b>ALL</b> Earthquake procedure _____                   |  |

Safety Equipment and Personal Protective Equipment: Location and Use

- |  |   |
|--|---|
| <input type="checkbox"/> Biohazard Disposal _____  | <input type="checkbox"/> Gloves _____                 |
| <input type="checkbox"/> Biosafety Cabinets _____  | <input type="checkbox"/> Safety Shower _____          |
| <input type="checkbox"/> Eye Protection _____      | <input type="checkbox"/> SDS Binder _____             |
| <input type="checkbox"/> Eyewash Stations _____    | <input type="checkbox"/> SDS online access _____      |
| <input type="checkbox"/> Fume Hoods _____          | <input type="checkbox"/> Sharps Disposal Box _____    |
| <input type="checkbox"/> Gas Shut-off Valves _____ | <input type="checkbox"/> Spill Kits _____             |
| <input type="checkbox"/> Glass Disposal Box _____  | <input type="checkbox"/> Towel/Sweatshirt/pants _____ |

**Applicant:** I acknowledge reading, understanding, and agree to abide by the above noted policies and procedures and all other pertinent UAA policy and procedures.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Trainer:** By signing this document, I have made clear to the applicant that they will abide by all pertinent UAA policy and procedures.

Trainer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Supervisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(only if different from trainer)