

**TEMPLE UNIVERSITY-ENVIRONMENTAL HEALTH & SAFETY
SELECT BIOLOGICAL AGENTS INSPECTION**

ABU: _____ PHONE#: _____ DEPT: _____ DATE : _____

BLDG: _____ FLOOR : _____ ROOM#: _____ INSPECTED BY : _____

EHRIS note(Review the SBA license for list of agents, possession amounts, special license conditions, name of workers and training date. Review database for the updated shipping and transfer SBA).

Name of SBA:

Agent: _____ Amount: _____ Type of hood needed: _____

Agent: _____ Amount: _____ Type of hood needed: _____

Agent: _____ Amount: _____ Type of hood needed: _____

GENERAL SAFETY	Compliance			Comments	date of corrective action
	Y	N	NA (points)		
Documentation, warning and safety signs 1. Biohazard-warning signs is posted 2."No eating and drinking" is posted 3.Emergency procedure notification (police, Fire, EHRIS and ABU) is posted 4.Sign is posted "visitor, housekeeping and maintenance worker are only allowed with proper escort"	<	>	<1> <>		
Safety , Safety Devices and Security 1. Personnel Protective Equipment (PPE) accessible and stored in sanitary condition 2. Written SOP is available for the work being performed 3. Appropriate biological safety cabinets is in use, working, annually certified 4. For biosafety level ≥2 for aspirating waste a filter/membrane to protect vacuum line with bleach in the collection flask is used 5. All areas, equip (centrifuge, rotors, etc.) appropriately cleaned and decontaminated 6. SBA are secured 7. Accurate and updated running inventory is available 8. SBA are received by the EHRIS 9. EHRIS was notified prior to any SBA transfer 10. EHRIS was notified in event of intended and unintended injury and release 11. EHRIS was notified for any loss, misplaced or misused SBA, unauthorized receipt and security breach 12. Emergency eyewash is in the lab, unobstructed, tested weekly and annually 13. Emergency shower is accessible, unobstructed, tested weekly and annually 14. Compressed gas cylinders are secured capped and has the chemical name. 15. Fire extinguisher present, and fully charged 16. First Aid kit available stocked and labeled 17. Room lighting is adequate 18. Lab free from clutter and/or tripping hazards and/or generally clean 19. Walkways & doors unobstructed	<	>	<1> <>		
Personnel 1. Workers are wearing proper PPE (lab coat, gloves, glasses, face shield, etc) 2. No individual is eating or drinking and food or drink are not stored 3. No individual is wearing shorts or open-toed shoes 4. If required all worker are wearing their AC 5. There is no mouth pipetting 6. If applicable immunization is provided to personnel 7. Attended the required training (RTK, biological, chemical, SBA, etc) 8. Had been trained by the supervisor in hazards related to their operation 9. Competency of personnel, personnel have understanding: Name: _____ in emergency response procedure in use of safety devices in proper waste disposal in hazards associated with the agent in use required reporting Other: _____	<	>	<1> <>		
Biological waste and Destruction 1. Autoclaves are periodically validated for decontamination efficiency 2. Waste are stored in proper labeled container 3. Sharp are stored in proper container, lid closed and secured 4. Containers' lid are closed and not over packed 5. Storage area is clean 6. Destruction of SBA is performed according to the EHRIS policy	<	>	<1> <>		

FOLLOW-ACTIONS

ABU received a copy of this survey on _____

Lab personnel verbally notified.

ABU verbally notified

A violation letter was issued on _____

Corrective Action received.

Any repeated violation _____

Total violation points:

violation points _____

1st repeated violations (points X 2) _____

2nd repeated violation (points X 4) _____

Total point* _____

ABU note(Total point of ≥ 5 , name and violations will be reported to IBC for corrective actions)

Date reported to IBC: _____