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CHEM Violation Code Description Deficiency Y/N RTK A. RTK Hazard Communication The Chemical Inventory has not been updated in the chemical database. A01 Y Accurate chemical inventories are required under federal, state, and local regulations. Contact the Chemical Safety Office to get access to the database and/or training on its use to keep chemical inventory under your control current. Regulatory & Institutional References: 40 CFR 355 & 372; Georgia Code 45-22-9, BOR-USG Hazardous Chemical Protection Communication Policy; GHSU Policy 4.2.04.3.1; GHSU Chemical Safety Guide Chapter I.B.i. NFPA Chap 45, 7.2.3.3; Prudent Practices 4.D A02 Laboratory personnel are not current on Basic Awareness Right-to-Know Training, Chemical Specific Right-to-Know Training, and/or Hazardous Waste Awareness Right-to-Know Training. Basic Awareness Right-to-Know Training must be taken at least once from the onset of employment. Chemical Specific Right-to-Know and Hazardous Waste Awareness Right-to-Know Training must be taken annually by all employees working with hazardous chemicals. Links to Board of Regents of the University System of Georgia's on-line training for each is available on the Chemical Safety Office Web page at: http://www.georgiahealth.edu/services/ehs/chemsafe/chemsafe.htm. Regulatory & Institutional References: Georgia Code 45-22-8, GHSU Policy 4.2.01.3.4, BOR-USG Hazardous Chemical Protection Communication Policy; GHSU Chemical Safety Guide Chapter II.H. A03 Laboratory personnel do not know how to read a MSDS or where MSDS' are kept for the chemicals in their lab. Y Laboratory personnel should be informed of the following: Hard copies of Material Safety Data Sheets [MSDS] are maintained in the Chemical Safety Office. Any employee may contact the Chemical Safety Office at 721-2663 to request a copy or go to to the Chemical Safety Office web page at: http://www.georgiahealth.edu/services/ehs/chemsafe/MSDSLinks.htm to search for a vendor specific on-line copy. The Chemical Safety Office can provide training, upon request, on how to read, interpret, and use a MSDS. Regulatory & Institutional References: Georgia Code 45-22-7, GHSU Policy 4.4.01.3.2, BOR-USG Hazard Chemical Protection Communication Policy; GHSU Chemical Safety Guide Chapter II.F.Laboratory Personnel do not know how to retrieve a Georgia Health Sciences University Chemical Safety Guide. Y A04 Laboratory Personnel should be informed of the following: The GHSU Chemical Safety Guide is available in a printable PDF format on the Chemical Safety Office web page at: http://www.georgiahealth.edu/services/ehs/chemsafe/chemsafe.htm. Regulatory & Institutional References: GHSU Chemical Safety Guide All laboratory doors are not placarded with the required emergency information and hazard warnings. Y A05 All laboratory doors must have a Chemical Placard Sign posted with names and telephone numbers for personnel to be contacted in the event of an emergency, NFPA hazard ratings for each room, and other hazard warning symbols as required. Principal Investigators are required to provide the necessary information to the Chemical Safety Office for maintenance of the placards. Contact the Chemical Safety Office at 721-2663 to

assist in production and posting of placards.

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CHEM Violation Code Description Deficiency Y/N RTK A. RTK Hazard Communication Regulatory & Institutional References: Georgia Code 120-3-3 - NFPA 704; GHSU Policy 4.2.04; GHSU Chemical Safety Guide Chapter III.A.1. NFPA Chap 45, 10.1; Prudent Practices in the Laboratory 5.D.6 A06 The Georgia Department of Labor Right-to-Know Poster is not prominently displayed as required Y All areas must post the Georgia Department of Labor (DOL) Right-to-Know Poster. For copies of the poster contact the Chemical Safety Office at 721-2663. Regulatory & Institutional References: Georgia Department of Labor Laws Section 300-3-19, BOR-USG Hazard Chemical Protection Communication Policy, GHSU Policy 4.2.01. A07 Hazard warning signs or labels are not placed where there are immediate dangers or potential risks. Y In addition to the Chemical Placard signs at the entrance doors, other Hazard warning signs, tags and/or labeling may be required for unusual hazards unique to your area. Contact the Chemical Safety Office 721-2663 for assistance in identification of the hazards and production of appropriate signs, tags, and/or labels specific to your area. Regulatory & Institutional References: Georgia Code Title 25 -12-3-3; GHSU Chemical Safety Guide Chapter III.A. 2.; NFPA Chap 45-10.1; Prudent Practices in the Laboratory 2.E.4 CS **B.** Chemical Storage Chemicals are stored without regard to hazard class or compatibility. Y Chemicals must be segregated by their hazard class and compatibility. At a minimum, Flammable/Combustibles, Oxidizers, Poisons/Toxics, Acids, Bases/Alkalines, Pyrophoric and Water Reactives, and Environmentally Hazardous chemicals should have their own designated storage areas in the laboratories. Contact the Chemical Safety Office at 721-2663 if you need assistance with hazard and compatibility segregation for storage of chemicals. Regulatory & Institutional References: NFPA 45-7-2.3.4,; GHSU Chemical Safety Guide Chapter IV; Prudent Practices in the Laboratory 4.E.1. B02 Bases/Alkalis are not properly segregated and not properly stored. Alkalis should be in corrosive cabinets and should not be stored with acids without proper segregation. In the absence of a corrosive cabinet, strong alkalis/base chemicals should be stored in chemical resistant secondary containers. Regulatory & Institutional References: NFPA 45-7-2.3.3 &4; GHSU Chemical Safety Guide Chapter IV, Section F, Part 2; BOR Design Criteria for Laboratories Chap IV, G.

Listing of Inspection Categories Georgia Regents University

CHEM	Violation	Code Description Description	eficiency Y/N
CS	B. Che	mical Storage	
	B03	Acids, Organic and Inorganic not properly segregated or stored. Acids should be stored in acid cabinets and segregated into organic and inorganic groups and then by compatibility. Segregation may be by different shelves within the same cabinet as as there is secondary containment to prevent mixing of organic and inorganic acids and incompatible acids. Nitric Acid must be stored separate from all other acids.	Y s long
		Regulatory & Institutional References: NFPA 45-7-2.3.4; BOR-USG Design Criteria of Laboratories Chap VI, G; GHSU Chemical Safety Guide Chapter IV. Section F; Prudent Practi Laboratories 4.E.1.	ces in the
	B04	Toxic chemicals are not properly segregated and stored. Store chemicals known to be highly toxic (including carcinogens) in unbreakable, chemically resistant secondary containers, in well ventilated areas. Toxins, carcinogens, reproductive hazards, and environmentally hazardous chemicals should be segregated from all other chemicals. Keep quantities at a minimum working level, and label storage areas with appropria warning signs.	
		Regulatory & Institutional References: NFPA 45-7-2.3.4; GHSU Chemical Safety Guide Chapter IV, Section E; Prudent Practices in the Laboratory 4.E.6.	
	B05	Oxidizers, peroxide formers, and/or time sensitive chemicals are not properly segregated, labeled, and/or not properly stored. Oxidizing agents should be stored separately from organics, dehydrating agents, reducing agents, or finely divided metals. Segregate oxidizers from all other chemicals and place in chemical resistant secondary containment. Some chemicals decompose into peroxides or other hazardous substances. These either heat/pressure/shock sensitive or toxic (e.q. chloroform). Date all time sensitive chemicals according to EH&S SOP 005 and dispose upon reaching the date of expiration.	Y are
		Regulatory & Institutional References: NFPA 45-7-2.3; NFPA 45-10-3.2; GHSU Chemical Safety Guide Chapter IV.D.2; Prudent Practices in the Laboratory 4.E.5	
	B06	Water Reactive and pyrophoric chemicals are not properly stored. Store materials that react violently with water away from possible contact with water. Water reactive chemicals should be dessicated. Pyrophoric chemicals will ignite spontaneously is and therefore should be stored under inert conditions. Contact the Chemical Safety Office at 721-2663 for guidance in storage of Water Reactive and Pyrophoric Chemicals.	Y n air
		Regulatory & Institutional References: NFPA 45-7-2.3; NFPA 45-7-2.1; GHSU Chemical Safety Guide Chapter IV, Section D.1; Prudent Practices in the Laboratory 4.E.5.	
	B07	Flammable/Combustible liquids exceed the regulatory storage limits for the fire area and/or are not properly stored.	Y
		Storage of Flammable and Combustible liquids in a Fire Area shall not exceed the following limits: Ten (10) gallons in proper containers but not in safety cans, Twenty-five (25) gallon UL (Underwriters Laboratory) approved cans with automatic closures and flame arrestors, and three hundered sixty (360) gallons in safety cabinets (UL approved). Contact the Chemi Safety Office for assistance in maintaining regulatory compliance for storage of flammable/combustible liquids.	as in Ical
	•	Regulatory & Institutional References: 29 CFR 1910.106; Georgia Code 120-3-3; NFPA Chap 30-9.6.1 and Chap 45-7.2.3; GHSU Policy 4.2.01.6.0; Prudent Practices in the Labor 4.E.3.	atory
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Listing of Inspection Categories

EM	Violation C	Code Description E	eficiency Y/N
	B. Chem	nical Storage	
	B08	Flammable cabinet(s) door(s) are not kept closed with vent plugs in place. Vent openings in flammable cabinets should be sealed with the bungs supplied by the manufacturer of the cabinet and cabinet doors should be closed when not in use.	Y
		Regulatory & Institutional References: NFPA Chap 30-9.5; MCG Policy 4.2.03.6.0; GHSU Chemical Safety Guide Chapter IV Sect C.3. sect F.2; NFPA Chap 45-7.2.3.6.	
	B09	Flammables stored in a non-explosion proof refrigerator are not in sealed secondary container with dessicant or in a dessicator. Flammables stored in non-explosion proof refrigerators must be stored in sealable secondary containers with dessicant or in a dessicator. Otherwise, flammables must be stored in an explosion proof refrigerator.	Y
		Regulatory & Institutional References: NFPA 45-9-2.2.2; GHSU Chemical Safety Guide Chapter IV, Section F.2; Good Safety Management Practice.	
	B10	Chemicals in storage are stacked. Stacking of chemicals in storage create an unecessary safety risk. Each chemical should have its own space on a shelf or in a cabinet.	Y
		Regulatory & Institutional References: Prudent Practices in the Laboratory 4.E.1.	
	B11	Integrity of chemical containers is in poor condition, not closed securely, and/or not labeled properly. Chemical containers should be in good condition with labels securely attached and closed when not in use. Chemicals in manufacturer's container should be marked with PI's name, do received, date opened and expiration date if applicable. An expiration date is required for time sensitive chemicals such as peroxide formers, strong oxidizers, and picric acid. Working solutions or secondary containers should be labeled with the name of the chemical, name of the PI or preparer, and date chemical was transferred to the container.	Y
		Regulatory & Institutional References: 40 CFR 262.34; GHSU Chemical Safety Guide Chapter 2, Section G(2)(a).	
	B12	All reagent bottles are not stored on appropriate shelves at or below eye level. Reagent bottles should be stored at or below eye level of the shortest person in the lab to prevent spills onto the individual who will be accessing the containers. Shelves should be wall mounted with 1/2 inch lip to prevent spills.	Y
		Regulatory & Institutional References: NFPA 45-7-2.3.4; GHSU Chemical Safety Guide Chapter III.D.2; Prudent Practices in the Laboratory 4.E.1	

EM	Violation (Code Description Deficient	icy Y/
	B. Chem	aical Storage	
	B13	Chemical reagents and/or hazardous working solutions are kept on center aisle shelves. All chemical reagents must be stored on wall mounted shelves with 1/2 inch lip. Only non-hazardous working solutions may be kept on center aisle shelves, which should also have 1/2 inch lip. lip.	•
		Regulatory & Institutional References: NFPA Chap 45-7.2.3.1; BOR Design Criteria for laboratories IV, 6; GHSU Chemical Safety Guide Chapter III.D.3.	
	B14	Chemicals are stored near heat, ignition sources, and/or in direct sunlight Keep all chemicals away from heat and ignition sources and do not store chemical in direct sunlight.	
		Regulatory & Institutional References: NFPA 45-9-2.3.3; GHSU Chemical Safety Guide Chapter IV, Section C; Prudent Practices in the Laboratory 4.E.1.	
	B15	Hazardous Chemicals are stored on the floor and/or under the sink. It is preferable not to store hazardous chemicals on the floor, whether you place them under a work bench or not. However, if you must store larger containers of chemicals on the floor under work benches, then those chemicals must be placed in secondary containment to prevent leaks or spills and segregated by hazard class and compatibility. Hazardous chemicals should never be stored under a sink. Only common household cleaning supplies may be stored under the sink.	
		Regulatory & Institutional References: GHSU Chemical Safety Guide III.D.3.	
	B16	Old, outdated, expired, and/or two or more open containers of the same chemicals are present in the laboratory. Old, outdated, expired, and/or two or more open containers of the same chemical will attract an EPA/EPD inspector's attention and possibly generate a regulatory citation. This is especially true for chemicals that may decompose over time to create an explosion hazard, or that are temperature sensitive, shock sensitive, pyrophorics, or water reactive. If you have chemicals that meet these descriptions, you should consider turning them in for disposal. The only exception may be unique dyes or stains that you may use only on rare occasions for special/unique procedures - for these keep the containers free of dust and make sure that the labels are kept intact and securely attached to the container. Any chemical that you are not using and do not intend to use, contact the Chemical Safety Office at 721-2663 to turn it in for exchange or disposal.	
		Regulatory & Institutional References: 40 CFR 261.2; GHSU Chemical Safety Guide Chapter III.D.3 and V.B.3	
	B17	Gas cylinders are not properly restrained, and/or not properly segregated. Cylinders without regulators are uncapped. Compressed gas cylinders must be securely restrained at all times, whether empty or full, in use or not in use. Incompatible gases must be segregated and stored by their hazard class in separate areas, even when the cylinder is presumed empty. Separate the incompatible cylinders by a distance of at least 20 feet, or a five foot firewall with a fire rating of 1/2 hour. All cylinders not in use and/or not attached to a regulator must be capped. Oxidizing gases must be stored at least 20 feet from flammable gases. Contact Facilities Management at 721-2434 to request a work order for installation of gas cylinder restraints. If you have problems determining where to place your gas cylinders, contact the Chemical Safety Office at 721-2663.	
		Regulatory & Institutional References: NFPA 45 8.1.5; GHSU Policy 4.3.02.4.0; MCG Chemical Safety Guide Chapter IV.J	

IEM	Violation	<u>Code</u> <u>Description</u> <u>Deficient</u>	icy Y/N
8	B. Cher	mical Storage	
	B18	The number of compressed gas cylinders secured together with one restraining device exceeds the allowable limits. No more than 5 compressed gas cylinders may be restrained using one restraining device or chain. You may not store spare gas cylinders in a laboratory unit, with the exception that you are allowed one spare for each single cylinder connected to a regulator to deliver gas to laboratory operation for use. The spare must be secured along side the cylinder in use. If the number of cylinders restrained exceeds the limit of 5, additional restraint systems must be installed to maintain the limit of 5 per restraining device. Contact Facilities Management at 721-2434 to have gas cylinder restraints installed as needed.	Y
		Regulatory & Institutional References: NFPA 45 8; GHSU Policy 4.3.02; GHSU Chemical Safety Guide Chapter IV.J.1.g	
	B19	Compressed gas cylinders are not clearly marked to identify contents. All compressed gas cylinders must be clearly marked to identify their content. Cylinders that are color coded by vendors do not constitute "clearly marked." All chemical containers, including cylinders, must be labeled with the contents, hazard warnings, and manufacturer/vendor contact information.	Y
		Regulatory & Institutional References: GHSU Policy 4.3.02.4.9; GHSU Chemical Safety Guide Chapter IV.J	
	B20	Pressurized cryogenic container(s) relief valve(s), venting devices, and/or gauges are not appropriate or properly functional. All cryogenic containers are inspected for appropriate gauges, relief valves, and venting devices to ensure that the systems do not pose a safety risk. Contact the Chemical Safety Office at 721-2663 for assistance in correcting any problems with these containers.	Y
		Regulatory & Institutional References: NFPA Chap 45-8.1 and 8.2; EH&S SOP Liquid Nitrogen Safety; GHSU Chemical Safety Guide Chapter IV.I.c.	
	B21	Dewars are not properly labeled with contents, and/or do not have proper venting. Dewars must have proper venting to avoid quick and violent pressure changes when cryofluid vaporizes. All cryogenic containers must be labeled with contents, including those used for transporting the liquids. Use only approved cryogenic apparatus for containment and/or transport of cryogenic liquids.	
		Regulatory & Institutional References: EH&S SOP Liquid Nitrogen Safety; GHSU Chemical Safety Guide Chapter IV.J.1.a, NFPA 45, Chap 8.1.3 & 8.1.4	
	C. Gene	eral Laboratory Safety	
	C01	First aid supplies are not available. First aid kits should be available and maintained for treatment of minor injuries or for short-term emergency treatment before getting medical assistance. Kits must conform to the Georgia Health Sciences University standards.	
		Regulatory & Institutional References: GHSU Chemical Safety Guide Chapter III.B.4; Prudent Practices in the Laboratory 6.F.2.6	

Listing of Inspection Categories

EM <u>∨</u>	Violation C	Code Description Deficient	ciency Y/N
S	C. Gener	ral Laboratory Safety	
	C02	The room aisles, hallways, stairways, and/or pathways are cluttered, blocking travel and creating tripping hazards. Room aisles, hallways, and stairways should always be clear, clutter free, and provide unobstructed access to emergency exits, emergency equipment and utility controls. Hallways and stairways may not be used for storage areas and should be kept clear. Clearance in emergency exit pathways should be maintained at 36 inches. Contact the Fire Safety Office at 721-291 for assistance in meeting the requirement for your building. Regulatory & Institutional References: NFPA 101 7.3.4.1; NFPA 101 7.1.3.2.3; GHSU Policy 3.0.10; GHSU Chemical Safety Guide Chapter III.D.1	Y 18
	C03	Floors have oil, grease, liquids, broken and uneven surfaces, tripping hazards or sharp objects. Floors must be dry and clear of all clutter and debris at all times. All spills are to be cleaned up immediately from work areas and floors. Lab areas and aisles are to be kept clean and uncluttered, providing access to exits, emergency equipment, and utility controls.	Y
		Regulatory & Institutional References: GHSU Chemical Safety Guide Chapter III.D.1	
	C04	Evidence of smoking, drinking, application of cosmetics, and/or eating are in the lab. Eating, drinking, gum chewing and cosmetic application (i.e., hand cream) are not permitted in the laboratory. Food shall not be eaten or stored in places where chemicals are being used stored. Employee break or lunchrooms should be identified within the department or located outside of the laboratory. GHSU is a tobacco free campus.	or Y
		Regulatory & Institutional References: GHSU Chemical Safety Guide Chapter III.C.1; GHSU Tobacco Free Policy; Prudent Practices in the Laboratory 5.C.2.2.	
	C05	Chemical spill supplies are not available and readily accessible. Chemical spill supplies should be available to control a spill of 1 gallon or less. Spill supplies needed are based on chemical hazards present in your laboratory. All laboratory personnel should be informed of the location for spill supplies in their lab. For additional information contact the Chemical Safety Office at 721-2663.	Y
		Regulatory & Institutional References: GHSU Chemical Safety Guide Chapter IV.H.2; Prudent Practices in the Laboratory 5.D.6.	
	C06	Laboratory trash is not properly segregated and/or in appropriate containers. (Examples: sharps, chemical waste, biological waste, radiological waste, broken glass, etc.] General non-hazardous trash should be segregated from all hazardous wastes. All hazardous waste must be segregated and placed in appropriately marked containers, stored in designate locations, and disposed in accordance with regulatory requirements. Contact the Chemical Safety Office at 721-2663 for assistance in management of hazardous waste generated in the laboratory.	Y ed
		Regulatory & Institutional References: GHSU Chemical Safety Guide Chapter V.D	

Listing of Inspection Categories

EM	Violation C	Code Description Defici	iency Y/
\mathbf{S}	C. Gener	eral Laboratory Safety	
	C07	Laboratory equipment, apparatus, and glassware not free of defects and/or damaged. Careful handling and storage procedures should be used to avoid damaging laboratory equipment, apparatus, and glassware. Damaged laboratory equipment and apparatus should be properly repaired. Chipped, cracked or broken glassware should be discarded in appropriate waste containers.	Ţ
		Regulatory & Institutional References: GHSU Policy 4.4.01.3.7; GHSU Chemical Safety Guide Chapter III.H.1	
	C08	Benches, floors, and fume hoods are soiled with chemical residue or spills. Chemical Spills are to be cleaned up immediately from work areas and floors. Any spills or accumulations of chemicals on work surfaces, on floors and in fumehoods shall be removed daily using techniques that minimize residual surface contamination.	ν,
		Regulatory & Institutional References: GHSU Chemical Safety Guide Chapter III D.1	
	C09	Safety showers, eyewash stations, fire extinguishers, breaker boxes, and emergency shut-off valves are blocked and/or not easily accessible. Areas beneath Safety showers cannot be used for storage and should be kept clear at all times. Eyewash stations, fire extinguishers, breaker boxes, and emergency shut-off valves must be kept unblocked and easily accessible at all times.	
		Regulatory & Institutional References: NFPA 10-6.1.3; Chemical Safety Guide Chapter III.B.6.b; Prudent Practices in the Laboratory 5.C.3.	
	C10	Safety Showers and Eyewash Stations are not inspected at least annually. Safety showers and eyewash stations must be inspected at least annually. Environmental Health & Occupational Safety (EHOS) inspects all safety showers and eyewash stations on an ann basis and in some cases every three months. Deficiencies noted during the inspection should be corrected as soon as possible. For inspection information contact EHOS at 721-2663.	ual
		Contact Facilities Management at 721-2434 to correct any deficiencies in the function of eyewash stations and safety showers. Regulatory & Institutional References: GHSU Chemical Safety Guide Chapter III.B.3.b.1	
	C11	Laboratory fume hoods are not inspected and certified for use at least annually to ensure that they are functioning properly. Environmental Health & Occupational Safety (EHOS) performs inspection and certification of fumehoods on an annual basis. All laboratory fume hoods must be inspected and certified whe installed or repaired, and at least annually thereafter to ensure that they are functioning properly. Contact EHOS at 721-2663 for insection and certification of new fume hoods and assistance in correcting deficiences or problems associated with the operation of fume hoods.	en
		Regulatory & Institutional References: GHSU Chemical Safety Guide Chapter IV.B.6	

CHEM	Violation C	Ode Description Defici	ency Y/N
GLS	C. Gener	ral Laboratory Safety	
	C12	Laboratory fume hoods are cluttered and/or used for storage purposes. Laboratory fume hoods should not be used for storage of equipment or chemicals. Items in the hood should remain at a minimum. Only equipment and materials necessary to the procedure being performed should be in the fume hood. Equipment, chemicals, and all other materials not necessary to the procedure being performed should be removed and stored elsewhere.	Y
		Regulatory & Institutional References: GHSU Chemical Safety Guide Chapter IV.B.7.d.	
	C13	Laboratory fume hood sashes have obstructed movement and are not kept closed when not in use. Fume hood sashes should always maintain unobstructed movement. Items such as chemicals or equipment should not be placed in the path of the sash. Fume hood sashes should be closed when not in use.	Y
		Regulatory & Institutional References: NFPA 45.6.8.3; GHSU Chemical Safety Guide Chapter IV.B.5.	
	C14	Perchloric acid is used in other than a perchloric acid fumehood. Because of its potential to form shock sensitive crystals in the ducting systems, Perchloric Acid should only be used in a Perchloric Acid Hood which are equipped with washdown capability For assistance in locating a Perchloric Acid fume hood which is closest to your laboratory, contact the Chemical Safety Office at 721-2663.	Y .
		Regulatory & Institutional References: GHSU Chemical Safety Guide Chapter IV D.8; NFPA 45 Chap 6.11.	
	C15	Refrigerators have missing labels for designated uses. Laboratory refrigerators should be labeled for designated use Example: "No Food - Chemical Storage Only" "Biohazards w/biohazard symbol" "Radioactive Materials w/radiation symbo For appropriate labeling and specific requirements contact the Chemical Safety Office, the Biological Safety Office, or Radiation Safety Office at 721-2663.	Y Y
		Regulatory & Institutional References: GHSU Chemical Safety Guide Chapter III.F.	
HWM	D. Hazar	rdous Waste Management	
	D01	Hazardous Chemical Waste containers are not properly labeled. Hazardous waste containers must be labeled with the following information: the words: "Hazardous Waste", name of the chemical components [legible, in English, and no abbreviations of formulas], Percentage of each component in the container, building and room number, Principal Investigator's name, and hazard warnings such as: Flammable, Toxic, Carcinogen, Corrosive Acid, Corrosive Alkaline, or NFPA Diamond with hazard ratings for Health, Fire, Reactivity, and Special Hazards. Contact the Chemical Safety Office at 721-2663 for Hazardou Waste container labels.	

Listing of Inspection Categories

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Y

CHEM Violation Code Description Deficiency Y/N HWM D. Hazardous Waste Management Regulatory & Institutional References: 40 CFR 262.34; 29 CFR 1910.1030(g)(A); EPA Document # 233-B-00-001 Environmental Management Guide for Small Laboratories; GHSU Chemical Safety Guide Chapter V.E.2; 40 CFR 262.34(c)(1)(ii) D02 Hazardous waste is not stored in a designated area and segregated according to compatibility. Y Hazardous waste should be stored in a designated area, Satellite Accumulation Area (SAA), at or near the point of generation and under the control of the person generating the waste, within the laboratory, and segregated by their hazard class and compatibility to prevent accidental reactions. Regulatory & Institutional References: 40 CFR 262.34(c)(1); D03 Hazardous chemical waste containers are not appropriate for contents, integrity of the container is not sufficient to prevent leaks or spills, and/or containers are not kept closed when not in use. Hazardous waste containers must be compatible with the waste collected. Integrity of the container must provide for safe storage, and secure transport of the hazards contained. Do not use containers over 2.5 gallons or 10 liters as waste containers without prior consultation with the Chemical Safety Office. Large containers are difficult to handle, difficult to transport safely and pose an unnecessary risk to hazardous waste handlers. Hazardous waste containers must be kept closed unless material is being added to the container. Regulatory & Institutional References: 40 CFR 262.34(c)(1)(i); 40 CFR 265.171; 40 CFR 265.172; 40 CFR 265.173(b); GHSU Chemical Safety Guide for Laboratories Chapter V.E.1 Hazardous waste accumulated in the laboratory area exceeds the allowed quantity limits and/or the regulatory time limit. Y D04 Hazardous waste accumulated in the laboratory may not exceed 55 gallons total, nor more than 1 quart acutely hazardous waste. Waste in excess of this amount must be moved to the Central Accumulation Area within 3 days. All full containers of hazardous waste must be labeled for disposal and removed from the laboratory by the next Wednesday. The Chemical Safety Office picks up wastes every Wednesday from all requesting laboratories. Call 721-2663 to request a pick up. Regulatory & Institutional References: 40 CFR 262.34(c)(1) &(2); GHSU Chemical Safety Guide Chapter V.B

D05 Hazardous/Chemical Waste is not handled nor stored in a manner to prevent rupture or leakage.

Containers used to accumulate hazardous waste in your lab must be placed in secondary containers to prevent accidental release of the materials onto the floor or down a drain.

Regulatory & Institutional References: 40 CFR 262.34(c)(1)(i); 40 CFR 265.173(b) GHSU Chemical Safety Guide Chapter V.

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CHEM Violation Code Description Deficiency Y/N HWM D. Hazardous Waste Management D06 Hazardous Waste is being disposed of by impermissable methods. Y No hazardous waste may be disposed of by means of evaporation, improper neutralization, nor drain disposal. Regulatory & Institutional References: 40 CFR 262.10, 262.11(d); GA EPD 391-11-08 D07 Waste determinations have not been made for all waste streams generated. Y A waste generator must determine if the waste is a hazardous waste. Contact the Chemical Safety Office at 706-721-2663 for assistance to determine if a waste is hazardous 40 CFR 262.11 **PPE D. Personal Protection Equipment** Minimum appropriate Personal Protective Equipment [PPE] is not worn while working with chemicals and/or hazardous materials. Y Personal Protective Equipment (PPE) at minimum should include chemical resistant gloves, chemical splash goggles, full length lab coat, and closed toe shoes. Open toe shoes, sandles, or clogs with open heal, should not be worn in the laboratory. Additional protection may be required, such as face sheild, chemical resistant apron, cryogenic gloves, etc., depending upon hazards associated with materials in the laboratory and the procedures being performed. PPE should be selected according to hazards and risks present in the specific laboratory. Personnel should be trained in the proper selection, maintenance, and use of all PPE for the materials they are handling and operations they are performing. Contact the Chemical Safety Office at 721-2663 for work site assessments, consultation on appropriate PPE, and personnel training requirements for your area. Regulatory & Institutional References: Georgia Code Title 45-22; 29 CFR 1910.132; GHSU Chemical Safety Guide Chapter III.B.8; Prudent Practices 6.F. Standard Operating Procedures (SOP) do not include specific Personal Protection Equipment/Clothing (PPE) recommendations (hazard assessments). E02 Y Each laboratory should develop Standard Operating Procedures (SOP) specific to hazards present and operations performed in the laboratory. These would include procedures for special operations and PPE recommendations. See GHSU Chemical Safety Guide, Chapter 3, Section 8, paragraphs a and b for guidelines. Call the Chemical Safety Office at 721-2663 for assistance. Regulatory & Institutional References: Georgia Code Title 45-22; 29 CFR 1910.1450; GHSU Chemical Safety Guide Chapter III.B.8 Employees who use respirators or protective masks are not registered with the EH&S Respiratory Protection program. Y E03 In order to use this form of personal protection you must have a medical evaluation in order to determine if you can use this type of equipment effectively and you must be fit-tested and trained in how to use, maintain and properly store the equipment. Call EHOS 721-2663 for further details. Regulatory & Institutional References: Georgia Code Title 45-22; 29 CFR 1910.134; GHSU Chemical Safety Guide Chapter III.B.8; Prudent Practices in the Laboratory 6.F.2.4.

Listing of Inspection Categories

Georgia Regents University

CHEM Violation Code Description Deficiency Y/N **PPE D. Personal Protection Equipment** EP **E. Emergency Protection** Fire doors between fire areas are inoperable or blocked open. F01 Y The Georgia State Fire Code requires that fire doors must not be locked, or blocked open. Fire doors are designed to isolate fire in specific areas to give occupants the time necessary to evacuate the building. Do not obstruct, lock, or block open fire doors. Regulatory & Institutional References: NFPA 101.7.2.1.8.1 Emergency Response flipchart and Code 17 (Fire Plan) are not properly displayed. F02 Y An Emergency Response Flipchart should be posted in all laboratories and work areas where chemicals are used or stored. A Right-to-Know Poster and a Code 17 (Fire Plan) should be posted in all areas. Contact the Chemical Safety Office at 721-2663 for assistance in getting the flipchart, poster, and fire plan to post in your area. Regulatory & Institutional References: 40 CFR 355 & 370; 29 CFR 1910.1200; GHSU Policy 4.4.03; GHSU Chemical Safety Guide Chapter III.A.2 F03 Storage is higher than 18 inches from the ceiling in an area with sprinkler heads. Y Sprinkler heads may not be obstructed from proper functioning in the event of a fire. Storage of any materials, supplies and/or equipment on shelving must be low enough to maintain 18 inch clearance from all ceilings. Regulatory & Institutional References: NFPA 13 8.5.6.1; Prudent Practices in the Laboratory 4.E.1 DEA H. Drug Enforcement Agency Controlled Substances, as defined by the Drug Enforcement Agency (DEA), are not kept under lock and key with limited access. G01 Y DEA Controlled Substances must be kept under lock and key when not in use to guard against theft and diversion of such materials. Access should be limited to the control of the Principal Investigator licensed to have the materials. Regulatory & Institutional References: 21 CFR Chapter 13, 1301.71(a): Drug Abuse Prevention and Contol Act A logbook detailing use, as required for all DEA Controlled Substance Act, is not provided Y G02 Each individual authorized to possess DEA Controlled Substances is required to maintain a logbook with detailed records and required documentation for each item under his/her control. Regulatory & Institutional References: 21 CFR Chapter 13, 1304.23(a).

Listing of Inspection Categories

Violation	Code Description Deficie	ncy Y/N		
H. Drug	g Enforcement Agency			
G03	Registrant has failed to maintain an Biennial Inventory as required. Registrant shall provide an inventory at the time of registration, and shall take a new inventory of all stocks of controlled substances on hand at least every two years. The biennial inventory may be taked on any day which is within two years of the previous biennial inventory date.	Y		
	Title 21 CFR, Section 1304.11(c)			
No Violations/No Deficiencies				
NOV	No Deficiencies or Violations found.	Y		
Other S	Safety Issue - Not Previously Stated			
H01	Other Safety Issues - Not previously addressed.	Y		
	No Vio	H. Drug Enforcement Agency G03 Registrant has failed to maintain an Biennial Inventory as required. Registrant shall provide an inventory at the time of registration, and shall take a new inventory of all stocks of controlled substances on hand at least every two years. The biennial inventory may be taked on any day which is within two years of the previous biennial inventory date. Title 21 CFR, Section 1304.11(c) No Violations/No Deficiencies NOV No Deficiencies or Violations found. Other Safety Issue - Not Previously Stated		