AUGUSTA UNIVERSITY

LABORATORYSAFETY TRAINING CHECKLIST

Under Georgia Law and AU policies, supervisors are responsible for providing documented Right-To-Know (RTK) safety training for all employees and compliance with all pertinent safety regulations applicable to their work functions. Training can be formal or informal, individual or group-based. This form, which is required only one time, for each lab the lab worker is assigned, will be used to document specific items to be completed by the employee and his/her supervisor to successfully complete the Initial Chemical Lab Safety Training and the Initial Biosafety and Bloodborne Pathogen Safety Training. Employees will receive credit for this training after this form has been completed (**both pages**), signed and returned to EH&S. Questions should be directed to Augusta University's EH&S (706-721-2663).

IMPORTANT: General safetyissues are covered and documented during the Initial Chemical Lab Safety training and the Initial Biosafety and Bloodborne Pathogen Safety Training. The Supervisor is responsible for verifying attendance atthis training, completion of all itemsof laboratoryspecific training, and location of safetyitems listed below prior to the start of work.

Required Training	Date of Completion
Right-to-Know Basic Awareness with Global	
HarmonizedSystem(NEW)	
https://www.usg.edu/facilities/rtk-ghs	
HazardousWasteAwarenessRTK	
http://www.usg.edu/facilities/training/hazwaste/	
EPA Training for AU Laboratory Staff	
https://video.augusta.edu/Video/2008/mcstrategi	
es/epa/index.html	
Initial Biosafety and Bloodborne Pathogen Training.	
For compensated employees,	
go to https://augusta.percipio.com	
Enter your JAG ID & Password	
Search for Initial Biological Safety and	
Bloodborne Pathogen Training click and Launch.	
For all others please contact the Biosafety Office:	
706-721-2663 or via email: <u>BIOSAFETY@augusta.edu</u>	

Location of Safety Items	Date of Verification
Safety Shower	
Eyewash Station	
Fire Extinguisher	
First Aid Kit	
Chemical Spill Kit	
Gas Shutoff Valve	
Electrical Panel Box	
Critical Event & Emergency Response Flipchart	
Code Red Poster	
I am familiar with the location(s) of all safety equipment in my work area and their operation, and have demonstrated to my supervisor this knowledge	Y/N

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I am aware of the Personal Protective Equipment (PPE) requirements for the hazards within my work area (to include full length long sleeve lab coat, safety eyewear, closed toed shoes, long pants/skirt, and appropriate gloves) and can access these items.		Y / N	
	r Augusta University Policies and Procedures (P&P)	4.2.01, Hazardous Chemical	Y / N
	ta University's Policy and Procedures P 4.2.01. Hazar	dous Chemical Protection & RTK Plan	Y / N
I reviewed and understand the lab's Institutional Biosafety Committee (IBC) approved Biosafety Protocol(s) (BSPs) and Standard Operating Procedures (SOPs), and know that these documents are available to me			Y / N
I am familiar with the Emergency Accident/Injury/Exposure procedures, and the emergency telephone numbers for DOAS and EH&S are readily available to me with detailed instructions on the Critical Event and Emergency Response Guide			Y / N
-	azards in the lab and anyincreased risks of infection res (e.g. vaccinations)were discussed with me	that may exist in the lab.	Y / N
	ne individual to my biosafety protocol (BSP) and to my e work practices in my laboratory.	chemical safety permit. I will provide laboratory a	and hazard specific
Employee's Name & Signature			
Print Name:	Signature:	Date:	
Supervisor' Name & Signature:			
Print Name:	Signature:	Date:	
ICC Number	BSP Number_		

Return signed form within 10 daysfrom starting in the lab to the Chemical Safety Office at: <u>CI-1009</u>