WOULDIOCATETY OUTSING TO	waynes ODO DMDL Marral (2000)								
KSU BIOSAFETY CHECKLIST (Refe			_	- 4 -					
Room:	Building:			Date:					
PI:	Phone:			Department:					
Laboratory Supervisor:	Audit	Comple	Completed By:						
Agent Information		Yes	No	N/A	Comments				
Name/type of agent				1					
2.									
Is agent replication deficient				1					
Agent received from				1					
Quantity of agent stored in lab									
Potential harmful effects to:	Humans								
	Animals								
	Plants								
Storage of viable materials					Location				
Copy of CDC rDNA guidelines in lab									
Administrative Controls and Docum	entation	Yes	No	N/A	Comments				
Biosafety level appropriate				1					
Previous audit's deficiencies corrected				1					
Researcher has experience working with agent				1					
Number of employees conducting work				1					
<u> </u>			1						
Biosafety Level 2		Yes	No	N/A	Comments				
A. Standard Microbiological Practices				+					
Access limited at when experiments in progress (discretionary)				1					
Persons wash hands after work w/ cultures & removing gloves, before leaving				1					
3. Eating, drinking, storing food, etc. prohibited				1					
4 Mouth pipetting prohibited; pipettors used				1					
5. Sharps policies in place				+					
6. Splashes & aerosols are minimized				†					
7. Work surfaces disinfected 1x per day and after spills, disinfectants effective				1					
Regulated waste disposed properly.				1					
9. Insect & rodent control program in place.				1					
B. Special Practices:									
Lab access restricted when working with infectious agents.			L						
2. Policies so that persons advised of hazards & have required immunizations.									
3. Biohazard sign <b>must</b> be present: agent, BSL, PPE, exit require., name, phone.									
4. Lab personnel receive appropriate immunizations & tests for agents handled.									
5. Baseline serum collected, as appropriate.									
6. Biosafety manual adopted. Persons informed of special hazards.									
7. Director ensures personnel receive appropriate training & annual updates.									
8. Sharps precautions: needles, slides, pipettes, cap. tubes, scalpels:				1					
a. Sharps restricted to use when no alternative exists.				1					
b. Needles are integral to syringe and not recapped, bent, etc.				-					
c. Safe needle devices used where appropriate.				1					
d. Broken glassware handled by mechanical means.				1					
<ul><li>9. Specimen containers leak proof and covered during transport.</li><li>10. Equipment &amp; work surfaces disinfected regularly, after work w/ agents, after</li></ul>				1					
11. Spills & accidents reported to lab director. Medical follow-up as appropriate.				1					
12. Animals not involved in work not permitted in lab.									

C. Safety Equipment (Primary Barriers)								
Biosafety cabinet (Class II) and other containment devices or PPE used when:								
a. Potential for aerosols or splashes exist.								
b. High concentrations or large volumes of agents are used.								
Face protection used for work outside BSC that may generate splashes.								
3. Lab coats worn and removed prior to leaving lab. Laundered by the institution.								
4. Gloves worn when working with agents. Alternatives to powered lat								
D. Laboratory Facilities (Secondary Barriers)								
Provide lockable doors for restricted agents. (42 CFR 72.6)								
2. Locate new labs away from public areas.								
3. Labs have hand wash sink								
4. Easily cleaned. No carpets or rugs								
5. Bench tops impervious to water and resistant to chemicals								
6. Lab furniture is appropriate for loading and use. Spaces accessible for cleaning								
7. BSC's located away from doors, heavily traveled areas, etc, to mair								
8. Eyewash readily available.								
9. Illumination is adequate, avoiding glares and reflections that could impede vision.								
10. Negative airflow recommended. Windows have fly screens.								
		•	•					
Are autoclaving procedures verified? Yes □ No □ If yes, explain how?								
Training of Barrannal	V	NIa	NI/A					
Training of Personnel	Yes	No	N/A	Comments				
Documented lab safety training?								
Documented bloodborne pathogens training?								

ADDITIONAL COMMENTS: