SAFETY HAZARD REVIEW CHE University of Washington Facilities	CKLIST		HRC#
onivolony of videnington i demine			☐ Amended on://_
Before scheduling a job or assigning wor coordination or preventive/corrective acti			that apply, initiate appropriate
IMPORTANT NOTE: If you do not know h department safety contact or Environment			gulations and/or consult the your
Site Specific Walkthrough Completed	Yes	Date	No
Work Request #		Location	
Task			
Have you identified all potential hazards?	?		
SAFE WORK SITE			
☐ Access/Egress ☐ Inadequate lightin	ıg □ Ladder □ F	Pedestrian traffic Scaff	olding Uehicle traffic
☐ Other			
POTENTIAL HAZARDS (Mark all that a	ipply)		
☐ Airborne Contaminants			
☐ Animal dander ☐ Gas ☐ Genera	al Room Dust (pa	per, soil, clothing fibers, e	etc.) \square Metal dust or fume \square Mist
\square Mold \square Wood dust \square Vapor			
☐ Other			
☐ Animals (includes insects)			
☐ Asbestos - If suspect material preser	nt, AHERA surve	y information required or	assumed positive
☐ Biological Hazards (feces, blood)			
☐ Compressed Gasses			
☐ Confined Space ☐ Permit-Required	d Confined Spac	ce	
☐ Cranes ☐ Hoisting & Rigging			
☐ Electrical			
☐ Extension cords (GFCI required)	☐ Exposed ener	gized electrical equipmer	nt 🗆 Generators
☐ Power lines overhead/undergrour	nd) 🗆 Outdoors a	and/or moist environment	(GFCI protection required)
☐ Ergonomics ☐ Lifting ☐ Repetitive	motion □ High F	orce Awkward posture	9
☐ Excavation, Trenching and Shoring	J		
☐ Fall Hazard			
☐ Fire Hazard			

☐ Other _

 \square Hazardous Chemicals

☐ Hot work ☐ Flammable materials

POTENTIAL HAZARDS (continued)			
☐ Hazardous Energy			
\square Heat \square Hydraulic \square Stored energy (kinetic energy) \square Pressure			
☐ Other			
☐ Heat Stress ☐ Cold Stress			
☐ Laboratory			
\square Pre-work decontamination required \square FS Tool/Equipment decontamination required			
☐ Other			
☐ Lead (paint, pipe, shielding, etc.)			
□ Noise			
☐ Heavy Equipment ☐ Powder Actuated Tools ☐ Power/Hand Tools			
☐ Overhead Hazard			
☐ Powered Materials Handling including forklifts, powered industrial trucks, hoists			
☐ Other			
□ Radiation			
\square lonizing (x-rays, lab sources and radioactive chemicals)			
\square Non-ionizing (cell tower transmitters, Magnetic Resonance Imaging (MRI), lasers, ELF)			
☐ Scaffolding			
\square Less than 10' high \square Greater than 10' high \square No Guardrails			
☐ Other			
□ Silica			
☐ Welding/Torch Cutting/Soldering			
☐ Other Potential or Actual Hazards			
SAFEGUARDS			
☐ Administrative Controls			
\square Confined Space Permit \square Employee rotation \square Energized electrical permit and work plan			
☐ Fall protection work plan ☐ Frequent Rest Breaks ☐ Hot Work Permit ☐ Lab/Department specific procedures			
☐ Lead work plan ☐ Lockout ☐ Notice of laboratory equipment decontamination			
□ Other			
☐ Engineering Controls			
☐ Additional ventilation ☐ Building system shutdown ☐ Electrical shutdown ☐ Electrical disconnect			
☐ Enclosure ☐ Noise controls ☐ Temporary lighting ☐ Traffic control plan			
☐ Other			

SA	FEGUARDS (continued)		
П	Emergency		
	☐ Identify means of emergency communication (radio/cell phone/land line) ☐ Location of First Aid Kit		
	☐ Location of Fire Extinguisher ☐ Location of Emergency Exit(s)		
	☐ Barricades ☐ Pedestrian traffic control ☐ Secure Access/Check-in ☐ Signs ☐ Vehicular traffic control		
	☐ Other		
	Comments on other control/corrective actions:		
_			
PE	RSONAL PROTECTIVE EQUIPMENT		
_	Note: PPE covered by a hazard specific Work Plan/Permit does not need to be listed here.		
Ш	Body		
	☐ Arc rated ☐ Coverall ☐ FR clothing ☐ High Visibility Vests ☐ Tyvek —		
	Other		
	Eye		
	☐ Impact goggle/glasses ☐ Dust goggles ☐ Chemical goggles		
	□ Other		
	Face		
	\square Chemical splash face shield \square Impact face shield \square UV/Heat face shield/hood		
	□ Other		
☐ Foot			
	☐ Shoe covers ☐ Steel/Composite toe ☐ Metatarsal Guard ☐ Puncture Resistant ☐ Substantial footwear		
	☐ Electrical Hazard ☐ Other		
	Hand		
	☐ Butyl rubber ☐ Cotton gloves ☐ Chemically resistant gloves (indicate types) ☐ Dipped cotton gloves		
	☐ Electrically rated gloves ☐ Leather gloves ☐ Nitrile ☐ Silver shield ☐ Vinyl		
	☐ Other		
Ц	Hearing Protection		
	☐ Earplugs ☐ Earmuffs		
	Head		
	☐ Arc rated hood ☐ Hardhat		
	□ Other		

PERSONAL PROTECTIVE EQUIPMENT (continued)					
☐ Respiratory					
☐ Dust mask ☐ Full face, negative pressure ☐ Half face, negative pressure ☐ PAPR					
□ Other					
☐ Cartridges: ☐ Purple (HEPA) ☐ Yellow (Organic vapor) ☐ Purple/Yellow combination					
☐ Contact EH&S for correct cartridge					
☐ Other					
☐ Training					
☐ Asbestos Awareness	☐ Hoist/Lift & Crane Training				
☐ Asbestos 8-hour for specific material	☐ Hoist/Lift Training (NON-Crane)				
☐ Back Protection	☐ Ladder Safety				
☐ Blood Borne Pathogen	☐ Lead Awareness				
☐ Confined Space Awareness	☐ Lead Worker				
☐ Confined Space Entry	☐ Lockout Safety				
☐ Fall Prevention	☐ Mobile Elevating Work Platform				
☐ First Aid/CPR	□ NFPA 70E				
☐ Forklift Safety	☐ Respiratory Protection				
☐ Hearing Conservation	☐ Scaffold Safety				
☐ Other					
WASTE DISPOSAL					
\square No hazardous waste generated \square Hazardous waste generated \square Waste assessment needed					
SIGNATURES					
COMPLETED by: (Signature) Date					
APPROVED by: (Signature of Supervisor approving Work Plan) Date					
Department Safety Contact (Signature) Date					