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	☐ Waste assessment needed			
SIGNATURES				
COMPLETED L. (O')				
COMPLETED by: (Signature)	Date			
APPROVED by: (Signature of Supervisor approving Work Plan)	 Date			
	10/8/2019			
Department Safety Contact (Signature) 10/8/2019 Date				