

Lash Miller Lab/Group-Specific Training Checklist

This is the trainer's guide to the lab/group-specific training review.

This checklist is to be used by lab-trainers and/or safety officer. It is a guide describing the topics to show during a walk-through of your respective lab-sites when on-boarding new students, personnel and visitors.

Laboratory designated trainers and or safety officers: using this checklist, are to ensure that incoming personnel are shown the location of the following health and safety criteria within or nearby their specific laboratories:

Emergency, Fire and Spill Response	
Located Emergency Contact Numbers and phone	
Identified local First Aiders	
Located First Aid boxes and identified contents	
Identified nearest stairwell exits	
Located Fire Alarm Pull Stations	
Located Fire Extinguishers	
Located Spill Kits and identified contents	
Located Safety Showers and reviewed certification tag	
Located and activated Eye Wash Stations	
Chemical Storage and Transport	
Identified storage for flammables and combustibles	
Identified storage for acids and bases	
Identified storage for water and air reactives	
Identified storage for oxidizers and reducers	
Identified storage for toxics	
Identified storage for gases and cryogenics	
Identified dewars for storing cryogens	
Identified oxygen sensors (if applicable)	
Located freight elevator for transporting chemicals between floors	
Identified secondary containment containers and/or cart(s) for transporting chemicals	
Logged into HECHMET to access chemical inventory	
Accessed Safety Data Sheets on HECHMET	

Fume Hoods			
Identified Fume Hood face velocity meter and ensured not lower than 76 fpm (not applicable to low-flow fume hoods)			
Identified proper sash working height			
Identified Emergency Purge button			
Located Biosafety Cabinets for Containment Level 2 laboratories			
Waste Management			
Identified waste containers for hazardous liquids			
Identified waste containers for biohazardous waste			
Identified waste containers for lightly contaminated waste			
Identified waste containers for triple rinsed glass and plastic ware			
Located waste labels			
The person identified below has completed the Laboratory/Group-Specific Training and has identified the aforementioned health and safety criteria within their laboratory.			
Trainee's Name:	Signature:	Date:	
Trainer's Name:	Signature:	Date:	
Principal Investigator's Name:	Signature:	Date:	
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Note: In the event that the Principal Investigator is not available to sign this form, he/she can assign a designate by sending an email to the DOTS (grace.flock@utoronot.ca).