

Lab Inspection Checklist

Laboratory Name:

Inspection Guide

LABORATORY annual Office of Biological Safety inspections

This guide sheet is intended to provide an outline of items commonly cited by the Office of Biological Safety during annual inspections of labs: it does not present a comprehensive list of requirements for biosafety standard practices.

There are two parts of this inspection:

- Physically inspect your lab using the list for Self-Inspection of the Laboratory to verify the presence of items and completions of tasks
- Discuss with lab members the list for Review of the Laboratory Practices to confirm that laboratory practices are meeting the requirements of the lab's Biosafety Protocol and safe biological practices.

Questions, concerns, and requests for assistance in preparing for an inspection are welcome.

Self-Inspection of the Laboratory			
Yes	No	N/A	Laboratory Locations
			Rooms where all work with biohazardous materials and/or recombinant materials is performed are listed in the Biosafety Protocol (e.g., room location of BSC, of autoclave, etc.).
Yes	No	N/A	General Lab
			Doors are kept closed (even for BSL-1 work).
			Laboratory clutter is minimized.
			Storage of cardboard is minimized, particularly on the floor (vermin control) &/or close to the ceiling (minimize fire hazards).
			All surfaces and furniture in the lab have impermeable surfaces (e.g., are smooth, impermeable to liquids, resistant to disinfectants, and easily cleaned).
			Hand washing supplies are readily available within the lab (i.e., sink, soap, towels, trash can).
			Food and drink is never kept or consumed in the lab.
			All containers in the lab are labeled as to their contents (e.g., chemicals, reagents, water, disinfectants, etc.).

			A biological spill kit is available and readily accessible to all laboratory personnel.
			Spill/exposure/release cleanup procedures are in place and readily available to all laboratory personnel (e.g., posted on walls or placed with spill kit).
			Permissible Select Agent toxins (i.e., subthreshold SA toxins) are secured in a lockbox or locked fridge/freezer.
			Plumbed emergency shower is available, unobstructed, and signage clearly visible.
			Plumbed emergency eyewash is available, unobstructed and signage clearly visible.
			Eyewash is flushed weekly.
			Exits and corridors free from obstructions (i.e., lab aisle space are open at least 36-inches and hallways/corridors are open at least 44-inches for traffic).
Yes	No	N/A	Signage
			Laboratory Emergency Information card is up to date, posted outside of the laboratory, and reviewed annually.
			Signs on the outside of the door indicate biosafety level, agent(s), and appropriate Personal Protective Equipment (PPE) for entry (e.g., BSL-2 sign, Toxins in Use sign, etc.). Signage reviewed annually.
			All equipment used for biohazardous materials properly labeled with "biohazard" stickers (e.g., freezers used for human cell line storage, liquid nitrogen cryogenic storage containers, incubators, centrifuge, etc.).
Yes	No	N/A	Containment Equipment
			The biological safety cabinet (BSC) has been certified within the past year.
			The BSC is kept free of clutter and the front grate is kept clear.
			The chemical fume hood has been certified within the past year.
			The chemical fume hood is kept free of clutter.
Yes	No	N/A	Other Laboratory Equipment
			Centrifuges used for biohazardous materials have sealed rotors, buckets or safety cups.
			Vacuum lines located in the lab and in BSCs are protected with liquid trap.
			Vacuum lines located in the lab and in BSCs are protected with an in-line High Efficiency Particulate Air (HEPA) filter.
			An autoclave is available for use by members of the lab. Please comment if your biowaste is disinfected by a central facility.

			Autoclave efficacy is tested using biological spore strips/vials or chemical indicators on a regular basis (schedule based on usage frequency; monthly testing recommended). NOTE: Autoclave tape is NOT an effective indicator of autoclave function. A log of efficacy testing results is readily available and contains results, date and tester initials.
Review of the Laboratory Practices			
Yes	No	N/A	PPE
			PPE is readily available and worn by anyone entering the lab (including visitors). A lab coat and eye protection is the minimum required PPE to enter the lab.
			PPE is removed before exiting the laboratory.
Yes	No	N/A	Laboratory Practices
			Potential aerosol generating activity is conducted in containment, as described in the biosafety protocol (e.g., BSC, sealed centrifuge rotors/cups).
			Transport of hazardous materials between rooms and buildings is conducted in an appropriate manner (e.g., secondary containment, appropriately labeled).
Yes	No	N/A	Biohazardous Materials and Waste
			Sharps are not left out; needles are never recapped (unless the one-handed method is used).
			All sharps are disposed of properly. Sharps containers are disposed when they reach ~2/3 to 3/4 full.
			Biohazard receptacles/containers are decontaminated/disposed of appropriately & "OK to Trash" stickers are used properly (if applicable).
Yes	No	N/A	Biosafety Protocol
			All work conducted in your lab is covered in a current/approved Biosafety Protocol.
			The Biosafety Protocol is up-to-date (i.e., all grants, personnel, equipment, agents, procedures, etc.). Please add a comment to this form if an amendment is needed for any changes.
			All personnel working in the lab are familiar with the contents of the Biosafety Protocol.
Yes	No	N/A	Recordkeeping
			A log of autoclave efficacy testing results is readily available and contains results, date and tester initials.
			Flushing of eyewashes is documented.

			Inventory reports of permissible Select Agent toxins (i.e., subthreshold SA toxins) are submitted semi-annually to the UW-Madison Office of Biological Safety.
			Laboratory biosafety training is documented.
Yes	No	N/A	Training
			All personnel listed in the Biosafety Protocol have undergone the mandatory biosafety training available through Learn@UW (i.e., "Biosafety Required Training").
			If laboratory has a Bloodborne Pathogen Plan, then personnel who will have access to or handle human-derived materials and those with potential exposure must complete annual Bloodborne Pathogen training (i.e., Biosafety 102: Bloodborne Pathogens for Laboratory and Research).
			All personnel are familiar with the procedures to report potential exposure or biological release events and can locate the First Report of Biological Exposure or Release Event form online at https://ehs.wisc.edu/first-report-of-biological-exposure-or-release-event/ .
			All personnel are familiar with the location of the biological spill kit and are trained on the laboratory spill/exposure/release plans.
			All personnel listed in the Biosafety Protocol receive lab specific biosafety training as described in the biosafety protocol.
Please list any specific laboratory safety questions or training needs at this time.			
Please list any additional comments, questions regarding changes that may be needed for the Biosafety Protocol, etc.			

Some questions commonly asked during the inspection:

- How did your self-assessment go?
- Is your biosafety protocol including personnel list up to date?
- Could you tell me about the activity or material that is most hazardous in your lab?