

This checklist is designed to meet the minimum requirements outlined in the Canadian Biosafety Standard (CBS) 2^{nd} Edition and the safe work practices described in the U of L Code of Practice. Section A: Contact Information **Last Name:** First Name: Phone: Dept: **Building:** Room: **Section B: Inspection** Date: **Biosafety Officer: Section C: Laboratory Physical and Design Requirements** (See Chapter 3 CBS) Yes No **Comments** 1. Containment zones to be separated from public and administrative areas by a locked 2. Dedicated work area for paper/computer work is segregated from the laboratory work areas. 3. Space to be provided for the storage of PPE in use. 4. Aisles and exits are free from obstruction. no tripping or slippery hazard present. 5. If windows are present, they are equipped with screens or sealed shut. 6. Biohazard warning signage (including the international biohazard warning symbol, containment level, name and telephone number[s] of contact person, and entry requirements) to be posted at the containment zone point(s) of entry. 7. Where unique hazards exist, project specific signage to be posted at the point(s) of entry. 8. Surfaces and interior coatings, including, but not limited to, floors, ceilings, walls, doors, frames, casework, benchtops, and furniture, to be cleanable, non-absorbent, and resistant to scratches, stains, moisture, chemicals, heat, impact, repeated decontamination. Floors to be slip-resistant in accordance with function.



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28. Are there traffic patterns from areas of low contamination to areas of higher	27				
contamination to areas of higher					
	28.	•			
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		Yes	No	Comments
29.	Work surfaces to be cleaned and			
	decontaminated with a disinfectant			
	effective against the pathogen(s) in use, or a			
	neutralizing chemical effective against the			
	toxin(s) in use, at a frequency to minimize			
	the potential of exposure to infectious			
	material or toxins.			
30.	Verification of the integrity of primary			
	containment devices to be performed			
	routinely, as described in SOPs.			
31.	Good microbiological laboratory practices			
	to be employed.			
32.	Containers of pathogens, toxins, or other			
	regulated infectious material stored outside			
	the containment zone are labelled, and			
	ileac-proof, impact resistant, and kept			
	either in locked storage equipment.			
	Training and Regulatory Records			
33.	All personnel have received training			
	relevant to the Biosafety Manual and			
	laboratory standard operating procedures.			
34.	All personnel have received training on the			
	potential hazards associated with the work			
	involved, and on the necessary precautions			
	to prevent potential exposure.			
	(documentation and sign off by employee &			
	lab supervisor)			
35.	All personnel have received training on the			
	primary equipment used in the lab.			
36.	All people working in the containment area			
	have been trained in the biosecurity plan.			
37.	Lab personnel have access to PSDS and			
	MSDS for their work.			
38.	Are all new staff and students supervised by			
	authorized personnel when working with			
	infectious material and toxins until they			
	have fulfilled the training requirements?			
39.	Authorized workers participate in refresher			
	training.			
40.	Authorized workers review emergency			
	response procedures on an annual basis.			
41.	Personnel are trained in all			
	decontamination SOP specific laboratory			
	activities.			
42.	Lab personnel aware of maintaining			
	Biological Inventory Records. Is there			
	someone assigned to update records?			
	Entry and Exit of Personnel and Material			
43.	Laboratory doors are to be kept closed.			
	Laboratory address are to be kept closed.		1	



		Yes	No	Comment
44.	Access is limited to authorized personnel.			
45.	Caretakers and building maintenance do not enter laboratory unless trained and authorized.			
46.	Entry requirements must be posted on entry, "Authorized Workers Only"			
47.	Personal clothing to be stored separated from dedicated PPE.			
48.	Personal belonging to be kept separate form areas of infectious materials or toxins are handled.			
49.	Personnel to doff PPE in manner that minimizes contamination of skin and hair			
50.	All PPE must be removed and hands washed before exiting laboratory.			
	Personal Protective Equipment			
51.	Personnel (including visitors, trainees and all others) are wearing protective laboratory clothing & foot wear when working in the laboratory.			
52.	Gloves are worn for all procedures that might involve direct skin contact with biohazardous material.			
53.	Gloves must be removed and hand washed before exiting laboratory.			
54.	Lab coats are only worn in the laboratory and are removed before exiting lab.			
55.	Face protection is available and used when risk of splashes or flying objects.			
56.	All users of respirators have received training on use and fit tested. Biological Safety Cabinets			
57.	Biological Safety Cabinets are certified annually, after repair or relocation. (certification posted)			
58.	Personnel working in a Biosafety Cabinet are trained in its correct use and have a good understanding of the different types of cabinets and uses.			
59.	BSCs are located away from high traffic areas, doors and air supplies			
60.	UV light is not recommended as an effective decontamination process.			
61.	Follow BCS safe practices and procedures when using.			
62.	No open flames in BSC.			1



Waste is not stored in BSC. Decontamination and Waste Handling Effective products are available and used for the decontamination of equipment, samples, surfaces and spills of infectious materials. All gross contamination to be removed prior to decontamination of surfaces and equipment.						
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to decontamination of surfaces and						
All contaminated materials are decontaminated before disposal.						
Is there an autoclave in the containment zone? Is there an SOP for transfer of waste from lab to autoclave?						
Autoclave efficiency is monitored with biological indicators. Monitoring must be documented.						
An autoclave logbook must be maintained.						
Biohazard autoclave bags are available.						
All solid biological waste is placed in biohazard autoclave bags and autoclaved.						
Contaminated liquids to be decontaminated prior to release to sanitary sewers.						
Sharps to be discarded in containers that are leak-proof, puncture-resistant, and fitted with lids, or specially constructed for the disposal of sharps waste.						
Primary containment devices to be						
All clothing and personal protective equipment (PPE) to be decontaminated (i.e. autoclave lab coats).						
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failure, fire, and other emergencies are written and easily accessible.						
All spills, accidents or exposures to infectious materials are documented and reported to the laboratory supervisor and the Biosafety Officer.						
An Emergency Plan is available to all laboratory personnel. This includes items such as emergency procedures, emergency numbers.						
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Section E: Actions Required Resulting from Inspection									
#	Required Action	Priority	Action Taken		Completed				
1.									
2.									
3.									
Signatures									
Completed by:			Title:		·				
Signature: Pho		Phone #:		Date:					

Principle Investigators: Please complete the above shaded sections and return to the Biosafety Officer within 30 days of receiving the inspection report.

Priority A: action required immediately Priority B: action required within 2 weeks Priority C: action required within 30 days