

LABORATORY/WORKSHOP PLAN

Standard Operating Procedures (SOP)

Supervisor of Laboratory/Workshop

Department

Name and Function of Lab/Project/Workshop

Building and Room No. (attach floor plan)

Type of Hazards (mechanical, electrical, chemical,
biological or radiation)

Applicable safety regulations, codes and/or standards, if known (e.g. N.B. Occupational Health & Safety Regulations, A.N.S.I. Standard #, etc.):

Operational licence/internal permit acquired (if required); specify status of:

Operation procedures (titles and locations of manuals – attach separate page, if necessary):

General description of lab/industrial equipment (include special manufacturer requirements on separate page, if necessary):

Specialized storage requirements: No Yes (if yes, please explain)

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Control measures taken (e.g. warning signs, security measures, engineering controls, etc.):

Safety devices required (e.g. machine guards, personal protective equipment, etc.):

Methods for waste control and disposal (refer to Policy No. 7827, 7827A):

Have the following measures been undertaken:

- | | Yes | No | |
|----|--------------------------|--------------------------|---|
| 1. | <input type="checkbox"/> | <input type="checkbox"/> | Introductory safety seminar including WHMIS (Workplace Hazardous Materials Information System) training. |
| 2. | <input type="checkbox"/> | <input type="checkbox"/> | M.S.D.S. (Material Safety Data Sheets) readily accessible 24 hours. |
| 3. | <input type="checkbox"/> | <input type="checkbox"/> | Identification/labeling of all hazardous materials using WHMIS labels. |
| 4. | <input type="checkbox"/> | <input type="checkbox"/> | Inventory records for hazardous materials available. |
| 5. | <input type="checkbox"/> | <input type="checkbox"/> | Procedures for obtaining emergency assistance posted in lab/workshop. |
| 6. | <input type="checkbox"/> | <input type="checkbox"/> | Procedures established for reporting incidents/accidents. |
| 7. | <input type="checkbox"/> | <input type="checkbox"/> | Plan established for eventual decommissioning of lab and disposal of any hazardous materials and equipment. |

If answered "No" for any of above, identify and explain by number:

Submitted by _____

Date _____