**New Group Member Information**

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| FIRST NAME MI |  | | LAST NAME |  | | SFSU ID# |  | SFSU EMAIL ADDRESS |

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| Date Started Work |  | Faculty/Staff Responsible Person |  | Department |

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| **Basic Safety Information** | |
|  | * Emergency Reporting: Call University Police **911** from any campus phone or **415.338.2222** from cell phones * Evacuation Alarm: Leave promptly and calmly through the nearest safe exit. Stay outside until told to return. |
|  | * Security & Access: Who may enter the lab and office areas * Review procedures for power failures, earthquakes, and responding to fires in the lab |
|  | * Show EH&S website & Review the **Chemical Hygiene & Safety Plan** and **Lab Safety and Management** web pages. |
|  | * Review basic lab safety rules from the Chemical Hygiene Plan (CHP) |
|  | * Review procedures for working after-hours or without supervision and which experiments or chemicals require pre-approval. |
|  | * Identify designated areas for food consumption & storage outside of lab |
|  | * Instruct to report leaks, spills, injuries, fume hood, or building problems to your lab group’s Responsible Person (RP) or your dept. stockroom or operations staff promptly. Report malfunctioning equipment to your RP to prevent injuries and loss of research. |

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| **Emergency Equipment: Review locations, when and how to use them.** | | | | | |
|  | * Safety shower |  | * Lab spill kit |  | * Fire alarm pull-stations |
|  | * Plumbed emergency eye wash |  | * First aid supplies |  | * Fire extinguisher |

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| **Chemical Hygiene and Lab Safety** | | | | |
|  | * Proper work attire expected of group members |  | | * Review chemical inventory and hazard classes |
|  | * Personal protective equipment (PPE) use policy and care instructions | |  | * Show location of lab’s Safety Data Sheets (SDSs) and how to look up an SDS |
|  | * Review “signs & symptoms” of over-exposure for chemicals used in the lab | |  | * Review chemical and sample container labeling requirements |
|  | * Location where certain procedures must be performed,  e.g., fume hoods, certain bench tops or rooms | |  | * Review chemical storage practices in the lab and how incompatible are segregated |
|  | * Discuss barcoding and how chemical inventory is tracked using RSS software | |  | * Discuss when to use fume hoods and biosafety cabinets and how to use them correctly |
|  | * Review the special precautions for carcinogens and other “particularly hazardous substances” | |  | * Use and storage of peroxide-forming solvents, and highly reactive chemicals requiring special handling |
|  | * Review safe handling of compressed gases and cryogens: liquid nitrogen and helium, and dry ice | |  | * Review safety practices for equipment using steam, heat, pressure, open flames, high voltage or has moving parts |
|  | * Show location of the Biosafety Program Manual (if applicable) | |  | * Biohazards: Review standard microbiological procedures |

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| **Laboratory Waste Storage and Disposal** | | | |
|  | * Hazardous waste accumulation (10 months max) |  | * Glass (uncontaminated) |
|  | * Hazardous waste labeling and filling out the tag |  | * Sharps (contaminated or not) |
|  | * Biohazardous waste (BSL-2) labeling and tag |  | * Pathology (animal parts) |
|  | * Biological waste (BSL-1) non-pathogenic |  | * Radioactive |

By my signature, I am indicating that I have had an opportunity to discuss health and safety aspects of my job with my supervisor and that I agree to abide by University and Department policies.

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| **Lab Member Signature** (required) |  | **Date of Training** (required) |  | **Supervisor Signature** (required) |