

**Colorado State University
Biosafety Office
Outreach Visit for BSL1 or BSL2 Labs
Revised 2020**

| | |
|--|-------------------------------------|
| Principal Investigator: | Date: |
| Lab Manager/Secondary Contact: | Department: |
| Auditor(s): | Building and Room: |
| Agent/Arthropod/Research Description: | Biosafety Level: 1 () 2 () |
| List Individuals working in lab: | |

| Activity Description | Yes | No | N/A | Comments: |
|---|-----|----|-----|--|
| Biosafety Resources and Documentation | | | | http://osp.od.nih.gov/office-biotechnology-activities/biosafety/nih-guidelines http://www.cdc.gov/biosafety/publications/bmbl5/index.htm |
| rDNA Research Non-applicable () IBC protocols Agent Approval Request Form(s), all current Project Approval Request Form(s), all current | | | | Exempt () Nonexempt () |
| 1. Inspection Program | | | | |
| a. Who does Biosafety/Operations communicate with on Biosafety and other laboratory issues? | | | | |
| b. Do lab personnel conduct self-inspections of the lab area? If yes, how often? | | | | |
| 2. Inventory and Risks | | | | |
| a. Is there a current inventory of all biohazards? | | | | |
| b. Are individuals aware of risks associated with work in the lab? | | | | |
| c. Are there appropriate controls in place to minimize/eliminate the risks identified? | | | | |
| 3. Biosafety Manual | | | | |
| a. Is there a Biosafety Manual accessible (may be in digital format) in the lab area and are all lab | | | | |

For Questions, Comments, Or Concerns, please contact:
Bso_biosafety@Mail.colostate.edu

| | | | | |
|--|--|--|--|---|
| personnel familiar with the location and content? | | | | |
| b. Are the Standard Operating Procedures (SOPs) for laboratory tasks available within the lab? | | | | |
| 4. Posting/Labeling | | | | |
| a. Are Biohazard/ Caution signs posted on all entrances to the micro lab? | | | | |
| b. Does the Caution sign indicate the biosafety level? | | | | |
| c. Are Biological materials properly labeled? | | | | |
| d. Are MSDS's accessible for all biologicals used? | | | | |
| e. Are biological waste container(s) labeled? | | | | |
| 5. Occupational Health & Safety | | | | |
| a. Bloodborne Pathogens (human blood, body fluids, or tissues) | | | | http://www.osha.gov/pls/oshaweb/owadisp.show_document?p_table=INTEPRETATIONS&p_id=21010 |
| i. Does the lab process or handle human blood or body fluids? | | | | |
| ii. Does the lab culture human cell lines (primary or established)? | | | | |
| iii. Does the lab culture clinical samples from humans (e.g., throat cultures, skin swabs)? | | | | |
| iv. Do you know where to find the Exposure Control Plan (ECP) for Bloodborne Pathogens? | | | | |
| v. Have lab personnel working with human materials been offered the Hepatitis B vaccine? | | | | |
| vi. Are other vaccines, serologies, or medical services required for your personnel? | | | | |
| b. Medical Surveillance | | | | |
| i. Are all lab workers enrolled in the CSU Occupational Health program? | | | | |
| c. Accident/Incident Investigation and Reporting | | | | |
| i. Do you know the process for reporting and investigating injuries/illnesses? | | | | |
| 6. Sharps | | | | |
| i. Are needles or other sharps used? If yes, are they discarded into leak-proof puncture resistant containers? | | | | |
| ii. Are lab personnel familiar with and do they follow with the Sharps policy? | | | | |
| iii. Does the lab address the safe handling and disposal of needles and sharps? | | | | |

For Questions, Comments, Or Concerns, please contact:
Bso_biosafety@Mail.colostate.edu

| | | | | |
|---|--|--|--|----------------------------|
| iv. Is plasticware substituted for glass whenever possible? | | | | |
| v. Is there a broken glass container available? | | | | |
| vi. Is broken glassware handled with tongs, brush and dustpan? | | | | |
| 7. Training | | | | |
| a. Have lab employees taken all the required training (e.g. BSL1/BSL2 online training, BBP and Unit 2 BSC)? | | | | |
| b. Are employees trained on specific tasks in the lab? | | | | |
| c. Is all training current? | | | | |
| d. Is training documented? | | | | |
| 8. Engineering Controls | | | | |
| a. Does the lab contain a sink for hand washing? | | | | |
| b. Are mechanical pipettors available? | | | | |
| c. Centrifuge/Microcentrifuge | | | | |
| i. Are O-rings and other seals inspected and replaced when needed? | | | | |
| ii. Is there a cleaning schedule? | | | | |
| d. Biosafety Cabinets/Laminar Flow/Fume Hoods | | | | |
| i. All procedures that may generate aerosols are conducted in primary containment? | | | | |
| ii. How many biosafety cabinets are in lab? | | | | Cert. Dates: |
| 1. Type of biosafety cabinet: | | | | |
| 2. Are any hazardous chemicals, volatile solvents, or radioactive materials used in the BSC? | | | | |
| 3. Are BSCs located away from laboratory doors or other sources of airflow disruptions? | | | | |
| 4. Are the front or back grills of the BSCs blocked or covered? | | | | |
| 5. Are BSCs installed directly opposite one another? | | | | Cert. Dates: |
| iii. Are cabinets/hoods cleaned? | | | | Daily Weekly Monthly |
| iv. Do you share BSCs with other labs? | | | | Who? |
| e. Autoclave | | | | |
| 1. Are personnel trained? How? | | | | |
| 2. Is all biological waste properly decontaminated before disposal? | | | | |
| 3. Are autoclave test strips included in every load (to demonstrate attaining 121°C)? | | | | |

For Questions, Comments, Or Concerns, please contact:
Bso_biosafety@Mail.colostate.edu

| | | | | |
|--|--|--|--|---|
| 4. What is used to verify decontamination? | | | | |
| 5. Are autoclave records maintained? | | | | |
| f. Is a vacuum line/vacuum pump used? | | | | |
| 1. Is there a vacuum trap? | | | | |
| 2. Is there an in-line HEPA Filter attached? | | | | |
| g. Emergency Equipment Available: | | | | |
| i. Spill Kit | | | | |
| ii. Fire Extinguisher | | | | |
| iii. Flashlight | | | | |
| iv. Soap | | | | |
| v. First aid kit | | | | |
| vi. Eyewash | | | | |
| h. Disinfectants | | | | |
| i. Disinfectants Used (circle any/all that apply) 70% Ethanol 5% Amphyl 2.5% Vesphene 409 Lysol 10%, 5%, 0.5% Bleach Neutral Q MicroChem Plus Greenshield ... | | | | |
| ii. Other disinfectants used: | | | | |
| 9. Personal Protective Equipment | | | | |
| a. Are lab coats worn? When? | | | | |
| b. Are gloves worn? When? | | | | |
| c. Are safety glasses or face shields worn when conducting procedures with the potential to create splashes of biohazards or other hazardous materials? | | | | |
| d. What other PPE is worn? When? | | | | |
| 10. Biohazard Spill Management | | | | |
| a. Are there adequately stocked and prominently labeled biohazard spill kits in the lab area? | | | | |
| b. Are contents of biohazard spill kits inspected and restocked as necessary? | | | | |
| c. Have all employees been provided with biohazard spill clean-up/disinfection training? | | | | |
| d. Are emergency numbers posted? | | | | |
| 11. Transportation of Biohazards | | | | https://www.iata.org/whatwedo/cargo/dgr/Documents/infectious-substance-classification-DGR56-en.pdf |
| a. Are infectious substances shipped on campus? | | | | |
| b. Are infectious substances shipped off campus? | | | | |
| c. Are personnel trained to ship, transport or receive infectious substances? | | | | |
| 12. Standard Microbiological Practices (was Behavioral Observations) | | | | |
| a. Is lab access controlled? By whom? | | | | |
| b. Are lab doors closed when the lab is not occupied? | | | | |
| c. Are eating, drinking, or applying of cosmetics not permitted in the lab area? | | | | |

For Questions, Comments, Or Concerns, please contact:
Bso_biosafety@Mail.colostate.edu

| | | | | |
|---|--|--|--|------------|
| d. Are any food items stored in the lab? | | | | |
| e. Is mouth pipetting prohibited, and are there pipettors available for use in the lab? | | | | |
| f. There are no animals or plants (not associated with work being performed) in the lab. | | | | |
| g. Is appropriate clothing being worn? (pants, close toed shoes) | | | | |
| h. Do all persons wash their hands after working with samples, and before leaving the lab? | | | | |
| 13.Laboratory Observations | | | | |
| a. Is lab designed to be easily cleaned (i. e. no carpet, no cloth furniture, etc.) | | | | |
| b. Is there a cleaning schedule? | | | | Frequency? |
| c. What is cleaned? | | | | |
| 14.Plant Containment | | | | |
| a. Is access to greenhouses/ growth chambers limited or restricted? | | | | |
| b. Do you have greenhouse specific training? | | | | |
| c. Are plants, seeds, and pollen non-vitalized before disposal? | | | | |
| d. Are arthropods or other motile organisms housed properly? | | | | |
| e. Do you have an effective pest management system? | | | | |
| f. Are greenhouse floors composed of gravel or other porous material? | | | | |
| g. Are there screens on the windows? | | | | |
| h. Do you have SOPs and lab practices documented? | | | | |
| 15.BSL 2P only | | | | |
| a. Is there a record of current experiments? | | | | |
| b. Is there a record or inventory of current plants, microorganisms or small animals that are brought into the greenhouse area? | | | | |
| c. Are materials containing microorganism transported in a closed non- breakable container? | | | | |
| d. If intake fans are used, are there measures to minimize ingress of arthropods? | | | | |

Additional comments:

All deficiencies designated (M) must be corrected by:

For Questions, Comments, Or Concerns, please contact:
Bso_biosafety@Mail.colostate.edu

Action Items:

Action Taken:

For Questions, Comments, Or Concerns, please contact:
Bso_biosafety@Mail.colostate.edu