

Biosafety Level 2 Laboratory Audit

PI: _____

Date: _____

Rm/Building: _____

Materials: _____

Auditor: _____

	Satisfactory	Needs Improvement	N/A
Standard Microbiological Practices			
1. The laboratory supervisor enforces the institutional policies that control safety in and access to the laboratory.			
2. All persons entering the laboratory are advised of the potential hazards and meet specific entry/exit requirements.			
3. Annual lab specific training, updates or additional training when procedural or policy changes occur is documented.			
4. All personnel are provided information regarding immune competence and susceptibility to infectious agents.			
5. A Lab Safety Plan supplemented with biosafety level 2 information is complete.			
6. Biosafety Level 2 guide in the Lab Safety Plan is present.			
7. A method for decontaminating all biological waste is available (e.g. autoclave, chemical disinfection, incineration, or approved service).			
8. Personnel are trained on proper procedures to clean up a spill of potentially infectious materials.			
9. Personnel are trained on proper procedures of exposure incidents.			
10. Sign with the lab's Biosafety Level, the supervisor's or other responsible personnel's name and telephone number.			
11. Persons wash their hands after working with potentially hazardous materials and before leaving the laboratory.			
12. Hands are washed after removing gloves after working with potentially hazardous material and before leaving the lab.			
13. Eating, drinking, and storing food for human consumption is not permitted.			
14. Food is stored outside of the lab.			
15. Handling contact lenses and applying cosmetics is not permitted.			
16. Mouth pipetting is not permitted.			
17. Mechanical pipets are present.			
18. A Sharps Disposal Container is present.			
19. Sharps are disposed of in an appropriate Sharps Disposal Container.			
20. Only Sharps are deposited in Sharps Disposal Containers.			
21. Needles are not bent, sheared, broken, recapped, removed from disposable syringes, or otherwise manipulated by hand before disposal unless a one-handed technique is trained and documented.			
22. Non-disposable sharps are transported in a hard walled container to be decontaminated by autoclave or other acceptable method.			
23. Plastic-ware is substituted for glassware when possible.			
24. All procedures are performed to minimize the creation of splashes and/or aerosols.			
25. Work surfaces and equipment are decontaminated with appropriate disinfectant for agents used after completion of work.			
26. Spills and splashes of potentially infectious material are decontaminated with appropriate disinfectant for agents used.			
27. Spills and splashes of potentially infectious material are decontaminated with proper concentration and contact time.			
28. Biological material is secured in labeled, leak-proof, secondary containment for transport between labs.			
29. An effective pest management program is in place.			

	Satisfactory	Needs Improvement	N/A
30. Animals and plants not associated with the work are not permitted in the laboratory.			
PPE			
1. Appropriate attire and hair restraint used.			
2. Gloves are present.			
3. Gloves are worn to protect hands from exposure to hazardous materials.			
4. Glove selection is based on an appropriate risk assessment.			
5. Gloves are not worn outside the laboratory.			
6. Change gloves when contaminated, glove integrity is compromised, or when otherwise necessary.			
7. Do not wash or reuse disposable gloves.			
8. Dispose of used gloves with other contaminated laboratory waste.			
9. Personnel are trained to safely remove gloves, minimizing contamination.			
10. Dedicated lab coats are present.			
11. Lab coats are worn.			
12. Lab coats are routinely decontaminated (i.e. autoclaved, laundered on site with bleach or by a commercial service).			
13. Eye and full face protection is present for manipulations outside a biosafety cabinet.			
14. Respirator users have received approval, training, and fit-testing from the Division of Safety and Compliance.			
Special Practices			
1. Access to the laboratory is controlled when work is being conducted.			
2. If required to offer immunizations for agents, a declination or request statement is on file and in a secure location.			
3. Biosafety cabinet is present.			
4. Biosafety cabinet is located away from doors, windows that open, and heavily traveled areas.			
5. Biosafety cabinet has an up-to-date annual certification label or report.			
6. Biosafety cabinet is routinely decontaminated with appropriate chemical disinfectant.			
7. Biosafety cabinet is free of clutter disrupting protective airflow.			
8. Gas line connected to a biosafety cabinet has a shut-off valve installed external to the cabinet.			
9. Equipment is decontaminated prior to repair, maintenance, or removal from the laboratory.			
10. An autoclave is available in the building where biohazardous "redbag" waste is generated.			
Emergency Equipment			
1. Eyewash is available.			
2. Eyewash is unobstructed.			
3. Eyewash is functional.			
4. Eyewash is activated weekly and documented.			
5. Tools (broom, dustpan, tongs, forceps) to pick up broken glass are readily available.			
Laboratory Facilities & Safety Equipment			
1. Exterior doors are self-closing.			
2. Exterior doors have locks to secure when unoccupied.			
3. Sink present for hand washing.			

	Satisfactory	Needs Improvement	N/A
4. Soap is present at hand washing sink.			
5. Paper towels are present at hand washing sink.			
6. Floor surfaces facilitate regular cleaning and decontamination.			
7. Carpet or rugs are not present.			
8. Bench tops are non-porous.			
9. Laboratory furniture can support anticipated loads and uses.			
10. Chairs are covered with non-porous material.			
11. Exterior laboratory windows are fitted with screens or cannot be opened.			
12. Illumination is adequate for all activities and avoids reflections and glare that could impede vision.			
13. A leak-proof, lidded, and labeled biohazard container is present.			
14. Biohazard container is properly labeled.			
15. Biohazard container is lidded when not in use.			
16. Vacuum lines are protected with traps/overflows.			
17. Vacuum traps/overflows contain an appropriate amount of chemical disinfectant.			
18. Vacuum traps/overflows are placed in secondary containment if outside the BSC.			
19. Vacuum source is appropriately protected from aerosols (e.g. in-line HEPA filter).			
20. Safety cups or o-ringed tubes are present and used to centrifuge potentially infectious material.			
Human Materials			
1. PI has offered the employees the Hepatitis B vaccination series at no cost.			
2. Signed declination or request statements for Hepatitis B are on file and in a secure location.			
3. A current Exposure Control Plan is present.			
Biotoxins			
1. An inventory is in place for risk group 2 toxins.			
2. A "Toxins in Use-Authorized Personnel Only" sign is present.			
3. A "Toxin in Use-Authorized Personnel Only" sign is posted when work is ongoing.			
4. Environmental controls such as a fume hood, biosafety cabinet, or glove box are used to manipulate dry toxin.			
5. Specific toxin training has been completed and documented.			
Risk Group 2 Material Storage			
1. Samples are stored in a secure location.			
2. Samples are properly labeled.			
3. Doors are signed with an international biohazard symbol.			
4. Risk Group 2 material is segregated from other materials.			
5. Risk Group 2 material are labeled or coded for content.			
6. Risk Group 2 material display the international biohazard symbol.			
7. Frozen samples are stored in tubes/vials/containers with gaskets or other appropriate seal.			
8. Sample tubes/vials are decontaminated prior to storage.			
9. An inventory mechanism is in place.			