*Containment requirements of Queen’s University policies, in accordance with recommendations of the “Canadian Biosafety Standard”, 2nd Edition, 2015, published by the Public Health Agency of Canada (PHAC).*

* ***This checklist is to be used for additional biohazard containment level 1 labs after a full checklist has been filled out for the main CL1 lab (or CL2 lab). Using this short form avoids repetition of questions about procedures and training that are likely the same for all labs supervised by one Principal Investigator. If there are differences please indicate them on the form.***
* ***Question numbering is not sequential because numbering from the full length form is retained.***
* ***Answer each question prior to the inspection by ticking N/A, Yes or No, and present the completed form to the inspectors when they arrive.***

Investigator: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Secondary Biohazard Contact: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Person completing self-audit:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Building & Room # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Biohazard Containment Level \_\_\_\_\_\_

**Biohazard Committee Inspector**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Biohazard Committee member follow-up:** ­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Inspection Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Comments** for the attention of the lab and/or the University Biosafety Officer: \_\_\_\_\_**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**Abbreviations: N/A**, not applicable**, Yes,** compliance; **No**, compliance lacking; **VI**, Inspectors Verified at Inspection; CBS requirement number from Canadian Biosafety Standard, 2nd Edition.

| **Item #** |  | | | **Item** | **Compliance** | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **N/A** | | **Yes** | **No** | **VI** |
| 1. **Biohazardous Material Information** | | | | | | | | | |
| 1.1 | |  | **What are the biohazardous materials used in this lab?**  **General types of material (as listed on biohazard sign) : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | |  |  |  |  |
| 1. **Signage** | | | | | | | | | |
| 2.1 |  | | | Biosafety warning sign posted on laboratory door indicates containment level. |  | |  |  |  |
| 2.2 |  | | | Sign has current contact information for the supervisor and other responsible person (usually the secondary biohazard contact). |  | |  |  |  |
| 2.3 |  | | | Sign lists types of biohazardous material (eg. RG1 bacteria (cloning strains only), RG1 bacteria (opportunistic infection risk), RG1 viruses (host range insects)). |  | |  |  |  |
| Comment re signage: | | | | | | | | | |
| 1. **General Lab Facilities and Procedures** | | | | | | | | | |
| 3.3 |  | | | Door to the laboratory kept closed. |  | |  |  |  |
| 3.4 |  | | | Lab kept clean and tidy. No cardboard boxes on the floor. |  | |  |  |  |
| 3.5 |  | | | Visual inspections of the **containment zone** to be conducted in order to identify faults and/or deterioration; when found, corrective actions to be taken. Lab benches, floor, equipment, etc. are in good condition, with surfaces and caulking intact, so that they can be readily decontaminated. |  | |  |  |  |
| 3.7 |  | | | * Emergency Plan posted in the laboratory is current (updated and reposted annually at the time of annual retraining) * familiar to all personnel * includes site specific information on spill clean-up, fire, and where applicable, BSC failure, animal escape, etc. |  | |  |  |  |
|  | |  |  |  |
|  | |  |  |  |
| 3.8 |  | | | Eyewash in accordance with containment zone activities (or, depending on the hazard, eyewash in hall within 10 seconds access and no more than one door); access not obstructed; tested weekly and card initialled. |  | |  |  |  |
| 3.9 |  | | | Safety shower in accordance with containment zone activities within 10 seconds access time and through no more than one door. |  | |  |  |  |
| 3.10 |  | | | Sink identified for hand washing has soap and paper towels; if lab has more than one sink and if feasible then dedicate sink near lab exit for hand washing only; **if hand washing sink is not near the exit** then a sign must be posted near the exit to remind personnel to wash their hands. |  | |  |  |  |
| 3.13 |  | | | Paperwork and computers kept separate from biohazardous materials work areas. If the “desk” is on a bench beside where work with biohazards is done, without a change in the height to separate the desk area, then there is a line of tape on the bench to indicate the clean area. |  | |  |  |  |
| 3.19 |  | | | Vacuum aspiration equipment is protected with a **HEPA filter** as per SOP-Biosafety-01. |  | |  |  |  |
| 3.20 |  | | | Biohazard bags are supported in solid containers that have a biohazard symbol. |  | |  |  |  |
| Comment re lab facilities and procedures: | | | | | | | | | |
| 1. **Biological Safety Cabinet (BSC)** | | | | | | | | | |
| 4.1 |  | | | Aware of SOP-Biosafety-03 Biological Safety Cabinets. |  | |  |  |  |
| 4.2 |  | | | Intake and rear grilles are clear of obstructions. BSC is not overcrowded and only equipment and supplies needed immediately for the work being done are in the BSC. |  | |  |  |  |
| 4.3 |  | | | Work surfaces and under front grill are clean and free of visible biological residue. |  | |  |  |  |
| 4.4 |  | | | Bunsen burners and/or open flames are not used in biological safety cabinets. Open flames are not permitted inside BSCs; consider an alternative, such as an electrical bacticinerator. |  | |  |  |  |
| 4.8 |  | | | If the risk group 1 material is known to be an opportunistic pathogen and if the BSC is not in an area that makes informing all those accessing the area feasible (e.g. in a corridor), then BSCs to be certified upon initial installation, every few years, and after repairs, modification, or relocation that might dislodge the HEPA filter.  **Date of the last BSC certification:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |  | |  |  |  |
| Comment re BSC: | | | | | | | | | |
| 1. **Personal Protective Equipment** | | | | | | | | | |
| 5.2 |  | | | Lab coat stored separately from street clothing and not on top of each other on hooks. |  | |  |  |  |
| 5.6 |  | | | Suitable eye and face protection when required (check availability of goggles &/or face shield). |  | |  |  |  |
| Comment re PPE: | | | | | | | | | |
| 1. **Storage, Decontamination and Disposal** | | | | | | | | | |
| 6.2 |  | | | Decontamination to be performed 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. . (Disinfectant available in this lab?) |  | |  |  |  |
| 6.9 |  | | | Bench coat (paper backed with plastic) may be used to contain hazardous material. If used it is changed regularly & not taped to benches. |  | |  |  |  |
| 6.10 |  | | | Contaminated sharps are placed in an approved labelled puncture-proof disposable container for decontamination. (container in this lab?) |  | |  |  |  |
| Comment re storage, decontamination & disposal: | | | | | | | | | |
| 1. **Training** | | | | | | | | | |
| Comment if different for work in this lab compared to the full length form: | | | | | | | | | |