CHEM	Violation C	ode Description	Deficiency Y/N
	NOV	No Deficiencies or Violations found.	Υ
RTK	A. RTK Ha	zard Communication	
	A01	An updated Chemical Inventory has not been provided to the Chemical Safety Office. Chemical inventories are required under federal, state, and local regulations. Contact the Chemical Safety Office at 1-2663 to make arrangements to provide an updated inventory for each room where chemicals are used and/or stored that are under your control. Regulatory & Institutional References: 40 CFR 355 & 372; Georgia Code 45-22-9, BOR-USG Hazardous Chemical Protection Communication Policy; MCG Policy 4.2.04.3.1; MCG Chemical Safety Guide Chapter I.B.i.	Υ
	A02	Laboratory personnel are not current on Basic Awareness Right-to-Know Training, Chemical Specific Right-to-Know Training, and/or Hazardous Waste Awareness Right-to-Know Training. Basic Right-to-Know Training must be taken at least once from the onset of employment. Chemical Specific Right-to-Know and Hazardous Waste Awareness Right-to-Know Training must be taken annually by all employees working with hazardous chemicals. Links to Board of Regents of the University System of Georgia's on-line training for each is available on the Chemical Safety Office Web page at: http://www.mcg.edu/services/ehs/chemsafe/chemsafe.htm. Regulatory & Institutional References: Georgia Code 45-22-8, MCG Policy 4.4.01.3.43, BOR-USG Hazardous Chemical Protection Communication Policy; MCG Chemical Safety Guide Chapter II.H.	Y
	A03	Laboratory personnel do not know how to read a MSDS or where they are kept for the chemicals in their lab. Laboratory personnel should be informed of the following: Hard copies of Material Safety Data Sheets [MSDS] are maintained in the Chemical Safety Office. Any employee may contact the Chemical Safety Office at 721-2663 to request a copy or go to to the Chemical Safety Office web page at: http://www.mcg.edu/services/ehs/chemsafe/MSDSLinks.htm to search for a vendor specific on-line copy. The Chemical Safety Office can provide training, upon request, in how to read, interpret, and use a MSDS. Regulatory & Insitutional References: Georgia Code 45-22-7, MCG Policy 4.4.01.3.2, BOR-USG Hazard Chemical Protection Communication Policy; MCG Chemical Safety Guide Chapter II.F.	Y
	A04	Laboratory Personnel do not know how to retrieve a Medical College of Georgia Chemical Safety Guide. Laboratory Personnel should be informed of the following: The MCG Chemical Safety Guide is available in a printable PDF format on the Chemical Safety Office web page at: http://www.mcg.edu/services/ehs/chemsafe/chemsafe.htm.	Υ
Page 1	A05	All laboratory doors are not placarded with the required emergency information and hazard warnings. All laboratory doors must have a Chemical Placard Sign posted with names and phone numbers for personnel to be contacted in the event of an emergency, NFPA hazard ratings for each room, and other hazard warning symbols as required. Principal Investigators are required to provide the necessary information to the Chemical Safety Office for production of the placards. Contact the Chemical Safety Office at 721-2663 to assist in production and posting of placards. Regulatory & Institutional References: Georgia Code 25-120-3-3 - NFPA 704; MCG Policy 4.2.04; MCG Chemical Safety Guide	Y

CHEM	Violation Code	Description	Deficiency Y/N
RTK	A. RTK Hazard	d Communication	
		Chapter III.A.1 & 2.	
	A06	The Georgia Department of Labor Right-to-Know Poster is not displayed. All areas must post the Georgia Department of Labor (DOL) Right-to-Know Poster. For copies of the poster contact the Chemical Safety Office at 721-2663. Regulatory & Institutional References: Georgia Department of Labor Laws Section 300-3-19, BOR-USG Hazard Chemical Protection Communication Policy, MCG Policy 4.2.01.	Y
	A07	Hazard warning signs or labels are not placed where there are immediate dangers or potential risks. In addition to the Chemical Placard signs at the entrance doors, other Hazard warning signs, tags and/or labeling may be required for unusual hazards unique to your area. Contact the Chemical Safety Office 721-2663 for assistance in identification of the hazards and production of appropriate signs, tags, and/or labels specific to your area. Regulatory & Institutional References: Georgia Code Title 25 -12-3-3; MCG Policy 4.2.04; MCG Chemical Safety Guide Chapter III.A.1 & 2.	Y
cs	B. Chemical S	torage	
	B01	Chemicals are stored without regard to hazard class or compatibility. Chemicals must be segregated by hazard class and compatibility. At a minimum, Flammable/Combustibles, Oxidizers, Poisons/Toxics, Acids, Bases/Alkalines, Pyrophoric and Water Reactives, and Environmentally Hazardous chemicals should have their own designated storage areas in the laboratories. Contact the Chemical Safety Office at 721-2663 if you need assistance with hazard and compatibility segregation for storage of chemicals. Regulatory & Institutional References: Georgia Code Title 25-120-3-3; NFPA 45-7-2.3.4,; 29 CFR 1910.106(d)(7)(b)(iv); MCG Chemical Safety Guide Chapter IV.	Y
	B02	Bases/Alkalis are not properly segregated and not properly stored. Alkalis should not be stored with Acids, and should be in corrosive cabinets. In the absence of a corrosive cabinet, strong Alkalis/Base chemicals should be stored in chemical resistant secondary containers. Regulatory & Institutional References: 29 CFR 1910.1450; Georgia Code Title 25-120-3-3; NFPA 45-7-2.3&4; MCG Chemical Safety Guide Chapter IV, Section F, Part 2.	Υ
	B03	Acids, Organic and Inorganic not properly segregated or stored. Acids should be segregated into organic and inorganic groups, then by compatibility, and stored in an acid cabinet. Segregation can be by different shelves within the same cabinet, as long as there is secondary containment to prevent mixing of organic and inorganic acids, and incompatible acids. Nitric Acid must be stored separate from all other acids. Regulatory & Institutional References: Georgia Code 25-120-3-3; NFPA 45-7-2.3.4; 29 CFR 1910.1450; BOR-USG Design Criteria of Laboratory Furniture and Fume Hoods II.G.3; MCG Chemical Safety Guide Chapter IV. Section F.	Υ
Page 2	B04	Toxic chemicals are not properly segregated and stored.	Υ

CHEM	Violation Code	<u>Pescription</u>	Deficiency Y/N
s	B. Chemical S	Storage	
		Store chemicals known to be highly toxic (including carcinogens) in unbreakable, chemically resistant secondary containers, in ventilated areas. Toxins, carcinogens, reproductive hazards, and environmentally hazardous chemicals should be segregated from all other chemicals. Keep quantities at a minimum working level, and label storage areas with appropriate warning signs. Regulatory & Institutional References: Georgia Code 25-120-3-3; NFPA 45-7-2.3.4; 29 CFR 1910.1450; MCG Chemical Safety Guide Chapter IV, Section E.	
	B05	Oxidizers, peroxide formers, and/or time sensitive chemicals are not properly segregated, labeled, and/or not properly stored. Oxidizing agents should be stored separately from organics, dehydrating agents, reducing agents, or finely devided metals. Segregate oxidizers from all other chemicals and place in chemical resistant secondary containment. Some chemicals decompose into peroxides or other hazardous substances. These are either heat/pressure/shock sensitive or toxic (e.q. chloroform). Date all time sensitive chemicals according to EH&S SOP 005 and dispose of upon reaching the date of expiration. Regulatory & Institutional References: NFPA 45-7-2.3.5; NFPA 45-10-3.2; 29 CFR 1910.1450; MCG Chemical Safety Guide Chapter IV.D; EH&S SOP 005.	Y
	B06	Water Reactive and pyrophoric chemicals are not properly stored. Store materials that react with water away from possible contact with water. Water reactive chemicals should be dessicated. Pyrophoric chemicals will ignite spontaneously in air and therefore should be stored under inert conditions. Contact the Chemical Safety Office at 721-2663 for guidance in storage of Water Reactive and Pyrophoric Chemicals. Regulatory & Institutional References: NFPA 45-7-2.3.5; NFPA 45-10-3.2; NFPA 45-7-2.1.2; 29 CFR 1910.106(d)(7)(b)(iv); 29 CFR 1910.1450; MCG Chemical Safety Guide Chapter IV, Section D.	Y
	B07	Flammable/Combustible liquids exceed the regulatory storage limits for the fire area and/or are not properly stored. Storage of Flammable and Combustible liquids for a Fire Area cannot exceed the following limits: Fire Hazard Class B building that is sprinkled, for Class I, II, IIIA [NFPA Flammable rating of 2, 3, and 4], cannot exceed 10 gallons outside of a flammable cabinet and not in safety cans, 20 gallons in UL approved safety cans, 360 gallons in safety cabinets, and not to exceed 400 gallons for all containers in a fire area including gas cylinders that contain flammable liquified gases. Fire Hazard Class C building that is sprinkled, for Class I, II, IIIA [NFPA Flammable rating of 2, 3, and 4], cannot exceed 4 gallons outside a flammable cabinet and not in safety cans, 8 gallons in UL approved safety cans, 360 in safety cabinets, and not to exceed 400 gallons for all containers in a fire area including gas cylinders that contain flammable liquified gases. Contact the Chemical Safety Office for assistance in maintaining regulatory compliance for storage of flammable/combustible liquids. Regulatory & Institutional References: 29 CFR 1910.106; Georgia Code 25-120-3-3; NFPA 30-45.4.2; MCG Policy 4.2.01	Υ
	B08	Flammable cabinet(s) door(s) are not kept closed with vent plugs in place. Vent openings in flammable cabinets should be sealed with the bungs supplied by the manufacturer of the cabinet and cabinet doors should be closed when not in use. Regulatory & Institutional References: NFPA 30-4-3.1 & 30-4.3.4; 29 CFR 1910.106; MCG Policy 4.2.01; MCG Chemical Safety Guide Chapter III.F.1.b	Υ
Page 3	B09	Flammables stored in a non-explosion proof refrigerator are not in sealed secondary container with dessicant or in a dessicator.	Υ

CHEM	Violation Code	Description	Deficiency Y/N
cs	B. Chemical S	otorage	
		Flammables stored in non-explosion proof refrigerators must be stored in a sealable secondary containers with dessicant or in a dessicator. Otherwise, it must be stored in an explosion proof refrigerator. Regulatory & Institutional References: NFPA 45-9-2.2.2; 29 CFR 1910.1450; MCG Policy 4.2.01; MCG Chemical Safety Guide Chapter IV, Section C.	
	B10	Chemicals in storage are stacked. Stacking of chemicals in storage create an unecessary safety risk. Each chemical should have its own space on a shelf or in a cabinet. Regulatory & Institutional References: MCG Chemical Safety Guide Chapter IV, Section C (3).	Y
	B11	Integrity of chemical containers are in poor condition, not closed securely, and/or not labeled properly. Chemical containers should be in good contion with labels securely attached and closed when not in use. Chemicals in manufacturer's container should be marked with Pl's name, date received/opened, and expiration date if applicable. Working solutions or Secondary Containers should be marked with the name of the chemical, name of the Pl or preparer, and date chemical is transferred to container. Expiration date is required for time sensitive materials such as peroxide formers, strong oxidizers, and picric acid. Regulatory & Institutional References: 29 CFR 1910.1450; 40 CFR 264.175(a)(b)(3); MCG Chemical Safety Guide Chapter 2, Section G(2)(a).	Y
	B12	All reagent bottles are not stored on appropriate shelves at or below eye level. Reagent bottles should be stored at or below eye level of the shortest person in the lab to prevent spills onto the individuals who will be accessing the containers. Shelves should be wall mounted with 1/2 inch lip to prevent spills. Regulatory & Institutional References: NFPA 45-9-1.5, NFPA 45-7-2.1.2; 29 CFR 1910.1450; MCG Chemical Safety Guide Chapter IV.	Y
	B13	Chemical reagents and/or hazardous working solutions are kept on center aisle shelves. All chemical reagents must be stored on wall mounted shelves with 1/2 inch lip. Only non-hazardous working solutions may be kept on center aisle shelves, which should also have 1/2 inch lip. Regulatory & Institutional References: NFPA 45-7-2.1.2; BOR Design Criteria for laboratory Furniture and Fume Hoods V.B.F; MCG Chemical Safety Guide Chapter IV & III.D.3.	Υ
	B14	Chemicals are stored near heat, ignition sources, and/or in direct sunlight Keep all chemicals away from heat and ignition sources and do not store chemical in direct sunlight. Regulatory & Institutional References: NFPA 45-9-2.3.3; 29 CFR 1910.1450; MCG Chemical Safety Guide Chapter IV, Section C.	Y
	B15	Hazardous Chemicals are stored on the floor and/or under the sink. It is preferable not to store hazardous chemicals on the floor, whether you place them under a work bench or not. However, if you must store larger containers of chemicals on the floor under work benches, then those chemicals must be placed in secondary	Y

IEM	Violation Code	Description	Deficiency Y/N
	B. Chemical S	torage	
		containment to prevent leaks or spills and segregated by hazard class and compatibility. Hazardous chemicals should never be stored under a sink. Only common household cleaning supplies can be store under sinks. Regulatory & Institutional References: 29 CFR 1910.106(d)(5)(i); EPA Document # 233-B-00-001; 40 CFR 262.105; Federal Register Tuesday Sept. 28,1999	
	B16	Old, outdated, expired, and/or two or more open containers of the same chemicals are present in the laboratory. Old, outdated, expired, and/or two or more open containers of the same chemical will attract an EPA/EPD inspector's attention and possibly generate a regulatory citation. This is especially true for chemicals that may decompose over time to create an explosion hazard, or that are temperature sensitive, shock sensitive, or water reactive. If you have chemicals that meet these descriptions, you should consider turning them in for disposal. The only exception may be unique dyes or stains that you may use only on rare occasions for special/unique procedures - for these keep the containers free of dust and make sure that the labels are kept in tact and securely attached to the container. Any chemical that you are not using or do not intend to use, contact Chemical Safety at 721-2663 to turn it in for exchange or disposal. Regulatory & Institutional References: 40 CFR 260, 261, 262; MCG Chemical Safety Guide Chapter III.D.3	Y
	B17	Gas cylinders are free standing, unrestrained or not properly restrained, and/or not properly segregated. Compressed gas cylinders must be securely restrained at all times, whether empty or full, in use or not in use. Incompatible gases must be stored by hazard class in separate areas, even when the cylinder is empty. Separate the incompatible cylinders by a distance of at least 20 feet, or a five foot firewall with a fire rating of 1/2 hour. All cylinders not in use and/or not attached to a regulator must be capped. Oxidizing gases must be stored at least 20 feet from flammable gases. Contact Facilities Management at 721-2434 to request a work order for installation of gas cylinder restraints. If you have problems determining where to place your gas cylinders, contact the Chemical Safety Office at 721-2663. Regulatory & Institutional References: 29 CFR 1926.350; NFPA 45 8; MCG Policy 4.3.02; MCG Chemical Safety Guide Chapter IV.J	Y
	B18	The number of compressed gas cylinders secured together with one restraining devise exceeds the allowable limits. No more than 5 compressed gas cylinders may be restrained using one restraining device or chain. You may not store spare gas cylinders in a laboratory unit, with the exception that you are allowed one spare for each single cylinder connected to a regulator to deliver gas to laboratory operation for use. The spare must be secured along side the cylinder in use. If the number of cylinders restrained exceeds the limit of 5, additional restraint systems must be installed to maintain the limit of 5 per restraining device. Contact Facilities Management at 721-2434 to have gas cylinder restraints installed as needed. Regulatory & Institutional References: 29 CFR 1910.1450; NFPA 45 8; MCG Policy 4.3.02; MCG Chemical Safety Guide Chapter IV.J	Y
	B19	Compressed gas cylinders are not clearly marked to identify contents. All compressed gas cylinders must be clearly marked to identify the contents. Cylinders that are color coded by vendors do not constitute "clearly marked." All chemical containers, including cylinders, must be labeled with the contents, hazard warnings, and manufacturer/vendor contact information. Regulatory & Institutional References: 29 CFR 1910.1450; 40 CFR 262.105; MCG Policy 4.3.02.4.9; MCG Chemical Safety Guide Chapter IV.J	Y

CHEM	Violation Code	Description	Deficiency Y/N
cs	B. Chemical S	Storage	
	B20	Pressurized cryogenic container(s) relief valve(s), venting devices, and/or gauges are not appropriate or properly functional. All cryogenic containers are inspected for appropriate gauges, relief valves, and venting devices to ensure that the systems do not pose a safety risk. Contact the Chemical Safety Office at 721-2663 for consultation in correcting any problems with these containers. Regulatory & Institutional References: 29 CFR 1910.1450; NFPA 30 & 45; EH&S SOP Liquid Nitrogen Safety; MCG Chemical Safety Guide Chapter IV.I	Y
	B21	Dewars are not properly labeled with contents, and/or do not have proper venting. Dewars must have proper venting to avoid quick and violent pressure changes when cryofluid vaporizes. All cryogenic containers must be labeled with contents, including those used for transporting the liquids. Use only approved cryogenic apparatus for containment and/or transport of cryogenic liquids. Regulatory & Institutional References: 29 CFR 1910.1450; 40 CFR 262.105; EH&S SOP Liquid Nitrogen Safety; MCG Policy 4.3.02.4.9; MCG Chemical Safety Guide Chapter IV.I	Y
GLS	C. General La	boratory Safety	
	C01	First aid supplies are not available. First aid kits should be available and maintained for treatment of minor injuries or for short-term emergency treatment before getting medical assistance. Kits must conform to Medical College of Georgia standards. Regulatory & Institutional References: 29 CFR 1910.1450; 40 CFR 262.105; MCG Chemical Safety Guide Chapter III.B.4	Υ
	C02	The room aisles, hallways, stairways, and/or pathways are cluttered, blocking travel and creating tripping hazards. Room aisles, hallways, and stairways should always be clear, clutter free, and provide unobstructed access to emergency exits, emergency equipment and utility controls. Hallways and stairways may not be used for storage areas and should be kept clear. Clearance in emergency exit pathways should be maintained at 28 or 36 inchs, depending upon the building. Contact the Fire Safety Office at 721-2918 for assistance in meeting the requirement for your building. Regulatory & Institutional References: NFPA 101 7.3.4.1; NFPA 101 7.1.3.2.3; 40 CFR 262.105; 29 CFR 1910.145; MCG Policy 3.0.10; MCG Chemical Safety Guide Chapter III.D.1	Y
	C03	Floors have oil, grease, liquids, broken and uneven surfaces, tripping hazards or sharp objects. Floors must be dry and clear of all clutter and debris at all times. All spills are to be cleaned up immediately from work areas and floors. Lab areas and aisles are to be kept clean and uncluttered, providing access to exits, emergency equipment, and utility controls. Regulatory & Institutional References: NFPA 30 & 45; 40 CFR 262.105; 29 CFR 1910.1450; MCG Chemical Safety Guide Chapter III.D.1	Υ
	C04	Evidence of smoking, drinking, application of cosmetics, and/or eating are in the lab. Eating, drinking, gum chewing and cosmetic application (i.e., hand cream) are not permitted in the laboratory. Food shall not be eaten or stored in places where chemicals are being used or stored. Employee break or lunchrooms should be identified within the department or located outside of the laboratory. Smoking is not permitted in any building at MCG.	Y

CHEM	Violation Code	<u>Description</u>	Deficiency Y/N
GLS	C. General La	aboratory Safety	
		Regulatory & Institutional References: 29 CFR 1910.141(g); 29 CFR 1910.1450; MCG Chemical Safety Guide Chapter III.C.1	
	C05	Chemical spill supplies are not available and readily accessible. Chemical spill, supplies should be available to control a spill of 1 gallon or less. Spill supplies needed are based on chemical hazards present in your laboratory. All laboratory personnel should be informed of the location for spill supplies in their lab. For additional information contact the Chemical Safety Office at 721-2663. Regulatory & Institutional References: 29 CFR 1910.1450; 40 CFR 262; MCG Chemical Safety Guide Chapter IV.H.2	Y
	C06	Laboratory trash is not properly segregated and/or in appropriate containers. (Examples: sharps, chemical waste, biological waste, radiological waste, broken glass, etc.] General non-hazardous trash should be segregated from all hazardous wastes. All hazardous waste must be segregated and placed in appropriately marked containers, stored in designated locations, and disposed in accordance with regulatory requirements. Contact Chemical Safety Office at 721-2663 for assistance in management of hazardous waste generated in the laboratory. Regulatory & Institutional References: 40 CFR 262.105(a)(9); MCG Chemical Safety Guide Chapter V.C & D	Y
	C07	Laboratory equipment, apparatus, and glassware not free of defects and/or damaged. Careful handling and storage procedures should be used to avoid damaging laboratory equipment, apparatus, and glassware. Damaged laboratory equipment and apparatus should be properly repaired. Chipped, cracked or broken glassware should be discarded in appropriate waste containers. Regulatory & Institutional References: 29 CFR 1910.1450; 40 CFR 262.105; MCG Policy 4.4.01; MCG Chemical Safety Guide Chapter III.H.1	Y
	C08	Benches, floors, and fume hoods are soiled with chemical residue or spills. Chemical Spills are to be cleaned up immediately from work areas and floors. Any spills or accumulations of chemicals on work surfaces, on floors and in fumehoods shall be removed daily, using techniques that minimize residual surface contamination. Regulatory & Institutional References: 29 CFR 1910.141(a)(3)(g)(3); 40 CFR 262.105; MCG Chemical Safety Guide Chapter III(c)D.1	Υ
	C09	Safety showers, eyewash stations, fire extinguishers, breaker boxes, and emergency shut-off valves are blocked and/or not easily accessible. Areas beneath Safety showers cannot be used for storage and should be kept clear at all times. Eyewash stations, fire extinguishers, breaker boxes, and emergency shut-off valves must be kept unblocked and easily accessible at all times. Regulatory & Institutional References: 40 CFR 262; NFPA 10; NFPA 30 & 45; Chemical Safety Guide Chapter III.B.6	Y
	C10	Safety Showers and Eyewash Stations are not inspected at least annually. Safety showers and eyewash stations must be inspected at least annually. Environmental Health & Occupational Safety (EHOS) inspects all safety showers and eyewash stations on an annual basis and in some cases every three months. Deficiencies noted during the inspection should be corrected as soon as possible. For inspection information contact EHOS at 721-2663. Contact	Υ

CHEM	Violation Code	Description	Deficiency Y/N
GLS	C. General Lab	poratory Safety	
		Facilities Management at 721-2434 to correct any deficiencies in the function of eyewash stations and safety showers. Regulatory & Institutional References: 40 CFR 262; NFPA 30 & 45; MCG Chemical Safety Guide Chapter III.B.3.b	
	C11	Laboratory fume hoods are not inspected and certified for use at least annually to ensure that they are functioning properly. Environmental Health & Occupational Safety (EHOS) performs inspection and certification of fumehoods on an annual basis. All laboratory fume hoods must be inspected and certified when installed or repaired, and at least annually thereafter to ensure that they are functioning properly. Contact EHOS at 721-2663 for insection and certification of new fume hoods and assistance in correcting deficiences or problems associated with the operating functions of fume hoods. Regulatory & Institutional References: 29 CFR 1910.120; MCG Chemical Safety Guide Chapter III.B.3	Y
	C12	Laboratory fume hoods are cluttered and/or used for storage purposes. Laboratory fume hoods should not be used for storage of equipment or chemicals. Items in the hood should remain at a minimum. Only equipment and materials necessary to the procedure being performed should be in the fume hood. Equipment, chemicals, and all other materials not necessary to the procedure being performed should be removed and stored elsewhere. Regulatory & Institutional References: OSH Section 30.8(2&3), 30.9, & 30.10; MCG Chemical Safety Guide Chapter IV.B	Y
	C13	Laboratory fume hood sashes have obstructed movement and are not kept closed when not in use. Fume hood sashes should always maintain unobstructed movement. Items such as chemicals or equipment should not be placed in the path of the sash. Fume hood sashes should be closed when not in use. Regulatory & Institutional References: 29 CFR 1910.1450; NFPA 45.6.8.3; MCG Chemical Safety Guide Chapter IV.B	Υ
	C14	Perchloric acid is used in other than a perchloric acid fumehood. Because of its potential to form shock sensitive crystals in the ducting systems, Perchloric Acid should only be used in a Perchloric Acid Hood. For assistance in locating a Perchloric Acid Hood you may use for such procedures, which is closest to your laboratory, contact the Chemical Safety Office at 721-2663. Regulatory & Institutional References: EH&S SOP 005; MCG Chemical Safety Guide Chapter IV D & F	Y
	C15	Refrigerators have missing labels for designated uses. Laboratory refrigerators should be labeled for designated use Example: "No Food - Chemical Storage Only" "Biohazards w/biohazard symbol" "Radioactive Materials w/radiation symbol" For appropriate labeling and specific requirements contact Chemical Safety, Biological Safety, or Radiation Safety at 721-2663. Regulatory & Institutional References: 29 CFR 1910.1450; MCG Chemical Safety Guide Chapter III.A	Υ
HWM	D. Hazardous	Waste Management	
Page 8	D01	Hazardous Chemical Waste containers are not properly labeled. Hazardous chemical waste containers must be labeled with the following information: the words: "Hazardous Waste", name of the chemical components [legible, in English, and no abbreviations or formulas], Percentage of each component in the container, building and room number, Principal Investigator's name, accumulation start date, and hazard warnings such as: Flammable,	Y

Medical College of Georgia

IEM	Violation Code	Description	Deficiency Y/N
М	D. Hazardous	Waste Management	
		Toxic, Carcinogen, Corrosive Acid, Corrosive Alkaline, or NFPA Diamond with hazard ratings for Health, Fire, Reactivity, and Special Hazards. Contact the Chemical Safety Office for Hazardous Waste container labels at 721-2663. Regulatory & Institutional References: 40 CFR 262.34; 29 CFR 1910.1030(g)(A); EPA Document # 233-B-00-001 Environmental Management Guide for Small Laboratories; MCG Chemical Safety Guide Chapter V.E.2	
	D02	Hazardous chemical waste is not stored in a designated area and segregated according to compatibility. Hazardous waste should be stored in a designated area within the laboratory, and segregated by hazard class and compatibility to prevent accidental reactions, and the Satellite Accumulation Area (SAA) is at or near the point of generation Regulatory & Insitutional References: 40 CFR 262.34; MCG Chemical Safety Guide Chapter V.A, C, & D	Y
	D03	Hazardous chemical waste containers are not appropriate for contents, integrity of the container is not sufficient to prevent leaks or spills, and/or containers are not kept closed when not in use. Hazardous waste containers must be compatible with the waste collected. Integrity of the container must provide for safe storage, and secure transport of the hazards contained. Do not use containers over 2.5 gallons or 10 Liters as waste containers without prior consultation with the Chemical Safety Office - containers larger than this are difficult to handle, difficult to transport safely and pose an unnecessary risk to hazardous waste handlers. Hazardous waste containers must be kept closed unless material is being added to the container. Regulatory & Institutional References: 40 CFR 262; 29 CFR 1910.1450; MCG Chemical Safety Guide for Laboratories Chapter V.E.1	Y
	D04	Hazardous waste accumulated in the laboratory area exceeds the allowed quantity limits and/or the regulatory time limit. Hazardous waste accumulated in the laboratory may not exceed 55 gallons total, nor more than 1 quart acutely hazardous waste. All full containers of hazardous waste must be tagged for disposal and removed from the laboratory by the next Wednesday. Hazardous waste containers, even when they are not completely full, may not remain in the laboratory for more than 1 year from the date accumulation starts. Contact Chemical Safety Office to have containers picked up before the 1 year deadline is exceeded. Chemical Safety Office picks up wastes every Wednesday from all requesting laboratories. Call 721-2663 to request a pick up. Regulatory & Institutional References: 40 CFR 262; MCG Chemical Safety Guide Chapter V.C	Υ
	D05	Hazardous/Chemical Waste is not handled nor stored in a manner to prevent rupture or leakage. If your designated area for collection of hazardous waste containers is anywhere on your lab floor, you must use secondary containment to prevent the materials from leaking or spilling onto the floor. Regulatory & Institutional References: 29 CFR 1910.1450; 40 CFR 262; MCG Chemical Safety Guide Chapter V.C,D&E	Y
	D06	Hazardous Waste is being disposed of by impermissable methods. No hazardous waste may be disposed of by means of evaporation, improper neutralization, nor drain disposal. 40 CFR.262.10, 262.11(d); GA EPD 391-11-08.	Y

PPE D. Personal Protection Equipment

Page 9

CHEM	Violation Cod	e Description	Deficiency Y/N
PPE	D. Personal Protection Equipment		
	E01	Appropriate Personal Protective Equipment and/or clothing is not available and/or employees do not know its use and limitations. Personal Protective Equipment (PPE) at minimum should include chemical resistant gloves, chemical splash goggles, full length lab coat, and proper footware. Open toe shoes, sandles, and clogs with open heal, should not be worn in the laboratory. Additional protection may be required, such as face sheild, chemical resistant apron, cryogenic gloves, etc., depending upon hazards associated with materials in the laboratory and the procedures being performed. PPE should be selected according to hazards and risks present in the specific laboratory. Personel should be trained in the proper selection, maintenance, and use of all PPE for the materials they are handling and operations they are performing. Contact the Chemical Safety Office 721-2663 for work site assessments, consultation on appriate PPE, and personnel training requirements for your area. Regulatory & Institutional References: 29 CFR 1910.120; Georgia Code Title 45-22; MCG Chemical Safety Guide Chapter III.B.8	Y
	E02	Standard Operating Procedures (SOP) do not include specific Personal Protection Equipment/Clothing (PPE) recommendations (hazard assessments). Each laboratory should develop Standard Operating Procedures (SOP) specific to hazards present and operations performed in the laboratory. These would include procedures for special operations and PPE recommendations. See MCG Chemical Safety Guide, Chapter 3, Section 8, paragraphs a and b for guidelines. Call the Chemical Safety Office at 721-2663 for assistance. Regulatory & Institutional References: 29 CFR 1910.120; Georgia Code Title 45-22; MCG Chemical Safety Guide Chapter III.B.8	Y
	E03	Employees who use respirators or protective masks are not registered with the EH&S Respiratory Protection program. In order to use this form of personal protection you must have a medical evaluation in order to determine if you can use this type of equipment effectively and you must be fit-tested and trained in how to use, maintain and properly store the equipment. Call EHOS 721-2663 for further details. Regulatory & Institutional References: 29 CFR 1910.120; Georgia Code Title 45-22; MCG Chemical Safety Guide Chapter III.B.8	Y
EP	E. Emergency Protection		
	F01	Fire doors between fire areas are inoperable or blocked open. The Georgia State Fire Code requires that fire doors must not be locked, or blocked open. Fire doors are designed to isolate fire in specific areas to give occupants the time necessary to evacuate the building. Do not obstruct, lock, or block open fire doors. Regulatory & Institutional References: NFPA 101.7.2.1; NFPA 101.8.2.4.3.5	Y
	F02	Emergency Response flipchart and Code 17 (Fire Plan) are not properly displayed. An Emergency Response Flipchart should be posted in all laboratories and work areas where chemicals are used or stored. A Right-to-Know Poster and a Code 17 (Fire Plan) should be posted in all areas. Contact the Chemical Safety Office at 721-2663 for assistance in getting the flipchart, poster, and fire plan to post in your area. Regulatory & Institutional References: 40 CFR 355 & 370; 29 CFR 1910.1200; MCG Policy 4.4.03; MCG Chemical Safety Guide Chapter III	Y
	F03	Storage is higher than 18 inches from the ceiling in an area with sprinkler heads. Sprinkler heads may not be obstructed from proper functioning in the event of a fire. Storage of any materials, supplies and/or equipment on shelving must be low enough to maintain 18 inch clearance from all ceilings.	Y

CHEM	Violation Code	Description	Deficiency Y/N
EP	E. Emergency	Protection	
		Regulatory & Institutional References: NFPA 13, 6; NFPA 13 8.5.6.1	
	F04	Entrance fire doors are not kept closed. Fire doors may not be chocked open. All exterior doors that open into main corridors and hallways are considered fire doors and must remain closed except when entering or exiting the area. Interior doors with automatic closers may be considered fire doors, and should also remain closed except when entering or exiting the room. For clarification on interior doors contact the Fire Safety Office at 721-2663. Regulatory & Institutional References: NFPA 101.8.2.4.3.5; NFPA 101.7.2.1	Y
DEA	H. Drug Enfor	cement Agency	
	G01	Controlled Substances, as defined by the Drug Enforcement Agency (DEA), are not kept under lock and key with limited access DEA Controlled Substances must be kept under lock and key when not in use to guard against theft and diversion of such materials. Access should be limited to the control of the Principal Investigator licensed to have the materials. Regulatory & Institutional References: 21 CFR Chapter 13, 1301.71(a): Drug Abuse Prevention and Contol Act	Υ
	G02	A logbook detailing use, as required for all DEA Controlled Substance Act, is not provided Each individual authorized to possess DEA Controlled Substances is required to maintain a logbook with detailed records and required documentation for each item under his/her control. Regulatory & Institutional References: 21 CFR Chapter 13, 1304.23(a).	Y