

**UW LABORATORY-SPECIFIC SAFETY TRAINING RECORD**

**Employee Name:**

**Start Date:**

**PI /Supervisor Name:**

**Lab location:**

**Chemical Hygiene Plan Trainings**

Note: PIs, CHOs and any staff in a supervisory role are required to complete Laboratory Safety Compliance and Laboratory Safety Practices trainings. Document with EH&S trainings.

Chemical Hygiene Plan Component	Done	Date
Orientation to the content and location of the: <ul style="list-style-type: none"> <li>• UW Laboratory Safety Manual</li> <li>• Lab-specific Standard Operating Procedures (SOPs)</li> <li>• Emergency contact numbers, including after-hours emergency contacts</li> <li>• Other lab-specific information, including work policies</li> </ul>	<input type="checkbox"/> YES	
Methods for finding exposure limits	<input type="checkbox"/> YES	
Location of Material Safety Data Sheets/Safety Data Sheets (MSDSs/SDSs) and other safety references	<input type="checkbox"/> YES	
The hazards of the workplace and how to detect the presence or release of hazardous chemicals and the basic signs and symptoms of chemical overexposure	<input type="checkbox"/> YES	
Requirements for Personal Protective Equipment (PPE) and how to select, don, remove, and maintain supplies	<input type="checkbox"/> YES	
Chemical storage practices in the laboratory	<input type="checkbox"/> YES	
Proper containment and disposal of all laboratory waste	<input type="checkbox"/> YES	
Location of laboratory emergency equipment: emergency showers, eyewashes, first aid kits, spill kits, fire extinguishers, etc.	<input type="checkbox"/> YES	
How to respond to spills, exposures, and other emergencies and report them in OARS	<input type="checkbox"/> YES	



**Chemical Safety Trainings**

Note: All laboratory personnel, including students, are required to complete Managing Lab Chemicals training, including refresher training every three years. Document with EH&S trainings.

Is training for use of specific chemicals completed and documented on lab SOPs?  YES  NO

List chemical trainings below that are not documented on SOPs

Name of Chemical	Policies and Practices Reviewed	Date
	<input type="checkbox"/> YES	
	<input type="checkbox"/> YES	
	<input type="checkbox"/> YES	
	<input type="checkbox"/> YES	
	<input type="checkbox"/> YES	
	<input type="checkbox"/> YES	
	<input type="checkbox"/> YES	
	<input type="checkbox"/> YES	

**Equipment Safety Trainings**

Is training for use of specific equipment completed and documented on lab SOPs?  YES  NO

List specific equipment trainings below that are not documented on SOPs

Name of Equipment	Policies and Practices Reviewed	Date
	<input type="checkbox"/> YES	
	<input type="checkbox"/> YES	
	<input type="checkbox"/> YES	
	<input type="checkbox"/> YES	
	<input type="checkbox"/> YES	
	<input type="checkbox"/> YES	
	<input type="checkbox"/> YES	
	<input type="checkbox"/> YES	



**Laboratory-specific Procedure Trainings**

Is training for specific procedures completed and documented on lab SOPs?  YES  NO

List specific procedure trainings below that are not documented on SOPs

Name of Procedure	Policies and Practices Reviewed	Date
	<input type="checkbox"/> YES	
	<input type="checkbox"/> YES	
	<input type="checkbox"/> YES	
	<input type="checkbox"/> YES	
	<input type="checkbox"/> YES	

**Additional Laboratory-specific Trainings (confined spaces, lockout/tagout, HIPAA, human subjects protections, etc.)**

**Note:** trainings required for work and conducted by departments/entities outside of EH&S or UW can also be listed here

Is additional training for hazards or practices not listed in the previous sections completed and documented on lab SOPs?  YES  NO

List specific procedure trainings below that are not documented on SOPs

Name of Training	Policies and Practices Reviewed	Date
	<input type="checkbox"/> YES	
	<input type="checkbox"/> YES	
	<input type="checkbox"/> YES	
	<input type="checkbox"/> YES	
	<input type="checkbox"/> YES	

*\*After initial trainings have been completed, have the new employee sign and date this form and save it in your laboratory training records. Update as new trainings are completed.*

**Employee Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_



