

**ABSL-3 FACILITY SELF-INSPECTION FORM**
**Date of Survey:** \_\_\_\_\_ **Conducted By:** \_\_\_\_\_

Building: \_\_\_\_\_ Room Number: \_\_\_\_\_ Department: \_\_\_\_\_

Principal Investigator: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Responsible Person (*other than PI*): \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

- **Completion of annual self-inspections will assist us with maintaining compliance with CDC, NIH, EPA and OSHA regulations.**
- **All forms or guidelines are available on the EHSO website: [www.ehso.emory.edu](http://www.ehso.emory.edu).**

**Instructions:**

- Complete this form manually while inspecting the work area.
- If a section does not apply, check N/A for that section.
- Inspection records must be maintained for one year or until the next inspection is conducted.
- **PI's completing their self inspection should not complete gray highlighted items.** Line items highlighted in gray are to be completed by EHSO or DAR staff. This form will not only be used for self inspection, but also for EHSO validation.

Item #	Item <i>Underlined numbers are hyperlinked to relevant information</i>	Yes	No	CTI	N/A	Comments <i>CTI = Corrected at Time of Inspection</i>
<b>SECTION A: RESEARCH SAFETY / BIOSAFETY</b>						
* <i>These questions are based on the Animal Biosafety Level 3 section of <u>Biosafety in Microbiological and Biomedical Laboratories, 5<sup>th</sup> Edition, pages 75-85.</u></i>						
<b>1.0</b>	<b>WORK PRACTICES</b>					
1.1	Access to the animal facility is limited or restricted at the discretion of the laboratory or animal facility director.					
1.2	Personnel wash their hands after handling cultures and animals, after removing gloves and before leaving the animal facility.					
1.3	Eating, drinking, smoking, handling contact lenses, applying cosmetics and storing food for human use are not permitted in animal rooms. Persons who wear contact lenses in animal rooms should also wear goggles or a face shield.					
1.4	All procedures are carefully performed to minimize the creation of aerosols.					
1.5	Work surfaces are decontaminated after use or after any spill of viable materials.					

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1.6	Doors to animal rooms open inward are self-closing and are kept closed when experimental animals are present.					
1.7	All wastes from the animal room are appropriately decontaminated, preferably by autoclaving, before disposal.					
1.8	Infected animal carcasses are incinerated after being transported from the animal room in leak proof, covered containers.					
1.9	An insect and rodent control program is in effect.					
1.10	The laboratory director or other responsible person restricts access to the animal room to personnel who have been advised of the potential hazard and who need to enter the room for program or service purposes when infected animals are present.					
1.11	The laboratory director or other responsible person establishes policies and procedures whereby only persons who have been advised of the potential hazard and meet any specific requirements (e.g., for immunization) may enter the animal room.					
1.12	When the infectious agent(s) in use in the animal room requires special entry provisions (e.g., the need for immunizations and respirators) a hazard warning sign, incorporating the universal biohazard symbol, is posted on the access door to the animal room. The hazard warning sign identifies the infectious agent(s) in use, lists the name and telephone number of the animal facility supervisor or other responsible person(s) and indicates the special requirement(s) for entering the animal room.					
1.13	Baseline serum samples from all personnel working in the facility and other at-risk personnel should be collected and stored. Additional serum samples may be collected periodically and stored. The serum surveillance program must take into account the availability of methods for the assessment of antibody to the agent(s) of concern. The program should provide for the testing of serum samples at each collection interval and the communication of results to the participants.					
1.14	A biosafety manual is prepared or adopted. Personnel are advised of special hazards and are required to read and to follow instructions on practices and procedures.					
1.15	Laboratory personnel receive appropriate training on the potential hazards associated with the work involved, the necessary precautions to prevent exposures and the exposure evaluation procedures. Personnel receive annual updates or additional training as necessary for procedural or policy changes.					
1.16	A high degree of precaution must always be taken with any contaminated sharp items, including needles and syringes, slides, pipettes, capillary tubes and scalpels. Needles and syringes or other sharp instruments are restricted in the animal facility for use only when there is no alternative, such as for parenteral injection, blood collection or					

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	aspiration of fluids from laboratory animals and diaphragm potties. Plasticware should be substituted for glassware whenever possible.					
1.17	Only needle-locking syringes or disposable syringe-needle units (i.e., needle is integral to the syringe) are used for injection or aspiration of infectious materials. Used disposable needles must not be bent, sheared, broken, recapped, removed from disposable syringes or otherwise manipulated by hand before disposal; rather, they must be carefully placed in conveniently located puncture-resistant containers used for sharps disposal. Non-disposable sharps must be placed in a hard-walled container, preferably containing a suitable disinfectant, for transport to a processing area for decontamination, preferably by autoclaving.					
1.18	Syringes which re-sheath the needle, needle-less systems and other safe devices should be used when appropriate.					
1.19	Broken glassware must not be handled directly by hand, but must be removed by mechanical means such as a brush and dustpan, tongs or forceps. Containers of contaminated needles, sharp equipment and broken glass should be decontaminated before disposal, according to any local, state or federal regulations.					
1.20	Cultures, tissues, or specimens of body fluids are placed in a container that prevents leakage during collection, handling, processing, storage, transport or shipping.					
1.21	Cages are autoclaved or thoroughly decontaminated before bedding is removed or before they are cleaned and washed. Equipment and work surfaces should be decontaminated with an appropriate disinfectant on a routine basis, after work with infectious materials is finished, and especially after overt spills, splashes or other contamination by infectious materials. Contaminated equipment must be decontaminated according to any local, state or federal regulations before it is sent for repair or maintenance or packaged for transport in accordance with applicable local, state or federal regulations, before removal from the facility.					
1.22	Spills and accidents which result in overt exposures to infectious materials are immediately reported to the laboratory director, EHSO and Employee Health Services via the People soft reporting system. Link to <a href="#">People Soft Reporting</a>					
1.23	Medical evaluation, surveillance, and treatment are provided as appropriate and written records are maintained.					
1.24	Animals not involved in the work being performed are not permitted in the lab (i.e., pets).					
<b>Hazard Communication</b>						
1.25	All chemicals are labeled with the chemical name and associated hazards (i.e., flammable, toxic, oxidizer, etc.)					

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1.26	All chemical containers are in English and are legible.					
1.27	All personnel know how to access Safety Data Sheets and they are accessible 24/7.					
<b>2.0</b>	<b>SAFETY EQUIPMENT (PRIMARY BARRIERS AND PERSONAL PROTECTIVE EQUIPMENT)</b>					
2.1	Personal protective equipment is used for all activities involving manipulations of infectious materials or infected animals.					
2.2	Wrap-around or solid front gowns or uniforms are worn by personnel entering the animal room ( <i>front-button laboratory coats are unsuitable</i> ). Protective gowns should be appropriately contained until decontamination or disposal.					
2.3	Personnel wear gloves when handling infected animals. Gloves are removed aseptically and autoclaved with other animal room wastes before disposal.					
2.4	Appropriate face/eye and respiratory protection is worn by all personnel entering animal rooms housing nonhuman primates.					
2.5	Boots, shoe covers, or other protective footwear, and disinfectant footbaths are available and used when indicated.					
2.6	Physical containment devices and equipment appropriate for the animal species are used for all procedures and manipulations of infectious materials or infected animals.					
2.7	The risk of infectious aerosols from infected animals or their bedding also can be reduced if animals are housed in partial containment caging systems, such as open cages placed in ventilated enclosures (e.g., laminar flow cabinets), solid wall and bottom cages covered with filter bonnets or other equivalent primary containment systems.					
<b>3.0</b>	<b>LABORATORY FACILITIES (SECONDARY BARRIERS)</b>					
3.1	The animal facility is designed and constructed to facilitate cleaning and housekeeping, and is separated from areas which are open to unrestricted personnel traffic within the building. Passage through two sets of doors is the basic requirement for entry into the animal room from access corridors or other contiguous areas. Physical separation of the animal room from access corridors or other activities may also be provided by a double-doored clothes change room (showers may be included), airlock or other access facility which requires passage through two sets of doors before entering the animal room.					
3.2	The interior surfaces of walls, floors and ceilings are water resistant so that they may be easily cleaned. Penetrations in these surfaces are sealed or capable of being sealed to facilitate fumigation or space decontamination.					
3.3	A foot, elbow, or automatically operated hand washing sink is provided in each animal room near the exit door.					
3.4	If vacuum service (i.e., central or local) is provided, each service connection should be fitted with liquid disinfectant traps and a HEPA filter.					

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3.5	If floor drains are provided, they are protected with liquid traps that are always filled with water or disinfectant.					
3.6	Windows in the animal room are non-operating and sealed.					
3.7	An autoclave for decontaminating wastes is available, preferably within the animal facility. Materials are transferred to the autoclave in a covered leak proof container whose outer surface has been decontaminated.					
3.8	A non-recirculating ventilation system is provided. The supply and exhaust components of the system are balanced to provide for directional flow of air into the animal room. The exhaust air is discharged directly to the outside and clear of occupied areas and air intakes. Exhaust air from the room can be discharged without filtration or other treatment. Personnel must periodically validate that proper directional airflow is maintained.					
3.9	The HEPA filtered exhaust air from Class I or Class II biological safety cabinets or other primary containment devices is discharged directly to the outside or through the building exhaust system. Exhaust air from these primary containment devices may be recirculated within the animal room if the device is tested and certified at least every 12 months. If the HEPA filtered exhaust air from Class I or Class II biological safety cabinets is discharged to the outside through the building exhaust system, it is connected to this system in a manner (e.g., thimble unit connection) that avoids any interference with the performance of either the cabinet or building exhaust system.					

**SECTION B: RECORDING AND REPORTING OCCUPATIONAL INJURIES / ILLNESSES**

<b>1.0</b>	<b>RECORDKEEPING FORMS AND RECORDING CRITERIA</b>					
1.1	The "OSHA Job Safety and Health: It's the Law" poster informing employees of the protections of the Occupational Safety and Health Act is posted in a conspicuous location where employees can see it.					
1.2	The "OSHA 300 Form" Log of Work-Related Injuries and Illnesses is posted in a conspicuous location where employees can see it from February 1 to April 30 of the year following the year covered by the form.					

**SECTION C: OCCUPATIONAL SAFETY AND HEALTH STANDARDS**

<b>1.0</b>	<b>WALKING WORKING SURFACES</b>					
<b>Housekeeping</b>						
1.1	All areas are clean and orderly.					
1.2	Floors are free of protruding nails, splinters, holes and loose boards.					
1.3	Materials are stored safely on racks, pallets, shelves, etc. and are no closer than 18" from the ceiling					
<b>Floor, Floor Openings, Platforms, and Passageways</b>						
1.4	All holes and openings in the floor are properly covered or guarded.					

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1.5	Every open-sided floor or platform 4 feet or more above an adjacent floor or ground level is guarded by a standard railing.					
<b>Fixed Industrial Stairs</b>						
1.6	Fixed industrial stairs are in good repair and are uniform from top to bottom.					
1.7	Fixed stairs have a minimum width of 22 inches.					
1.8	Stairs have at least 7 feet of overhead clearance.					
1.9	Fixed stairs are slip resistant.					
1.10	Standard railings are provided on stairways having four or more risers.					
<b>Portable Ladders</b>						
1.11	All portable ladders are free of sharp edges and splinters and are maintained in good condition.					
1.12	Ladder rungs and steps are free of grease and oil.					
1.13	Ladder rungs are uniformly spaced at no more than 12 inches apart.					
1.14	Stepladders are equipped with a metal spreader or locking device to securely hold the front and back sections in open positions.					
1.15	Personnel are documenting annual portable ladder inspections on the stickers affixed to each ladder.					
<b>2.0</b>	<b>EXIT ROUTES, EMERGENCY ACTION PLANS / FIRE PREVENTION PLANS</b>					
<b>Emergency Action Plans / Fire Prevention Plans</b>						
2.1	Written emergency action plans are kept in the workplace and available for employees to review.					
2.2	'Just In Time' Emergency Guides are posted on all external doors <a href="#">Just In Time Emergency Guide</a> .					
2.3	Exit signs are visible from any location, and point to the quickest exit from the building.					
2.4	Doors, passageways, and stairways that are not exits are marked "NOT AN EXIT".					
<b>Fire Safety</b>						
2.5	The correct type of fire extinguisher is available for the class of fire possible in the area.					
2.6	The annual inspection of the fire extinguisher was completed by the outside contractor.					
2.7	Fire extinguishers are clearly identified, unobstructed, and tagged showing monthly inspection.					
2.8	Storage is 18" from the ceiling so that the spray from the sprinkler heads is not obstructed when in use.					
2.9	Fire doors are operating properly and are not propped open.					
2.10	Fire alarm pull-stations are unobstructed.					
<b>Egress</b>						
2.11	The route of egress from the area is not impeded (i.e. 36" of clearance).					
2.12	Evacuation routes are displayed in the hallway and all personnel are familiar with them ( <i>they are generally located by the elevators</i> ).					
2.13	Exit doors open in the direction of travel.					

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2.14	Exits, aisles and stairways are free of obstruction.					
<b>3.0</b>	<b>OCCUPATIONAL HEALTH AND ENVIRONMENTAL CONTROL</b>					
<b>Noise</b>						
3.1	Noise monitoring has been conducted in high noise areas.					
3.2	High noise areas have been identified and hazard signs are posted.					
3.3	Hearing protectors are being worn in required areas.					
3.4	Audiometric testing is conducted annually for employees exposed to noise at levels in excess of the exposure limits.					
3.5	The <i>Noise</i> standard is posted in the workplace.					
<b>4.0</b>	<b>HAZARDOUS MATERIALS</b>					
<b>Compressed Gases</b>						
4.1	Compressed gas cylinders have safety pressure relief valves installed.					
4.2	Compressed gas cylinders are capped when not in use or connected for use.					
4.3	Each gas cylinder is legibly marked with the name of the cylinder contents.					
4.4	Gas cylinders are secured to a stationary surface by a chain link or strap to prevent movement.					
4.5	Gas cylinders are tagged as empty or full.					
4.6	Gas cylinders are stored upright.					
4.7	Gas cylinders are protected from high heat sources.					
4.8	Cylinders are in good condition (free of corrosion, distortion, cracks or other visible defects).					
<b>Flammable and Combustible Liquids</b>						
4.9	Chemical containers are in good condition (i.e. completely intact and clean on the outside).					
4.10	Chemicals are stored by compatibility (i.e. flammables and oxidizers are separated; acids and bases are separated, etc).					
4.11	Flammables are stored away from ignition sources.					
4.12	Flammables stored are in an approved flammable liquids cabinet. ( <i>Contact EHSO with questions</i> ).					
4.13	Volume of flammable liquids outside the cabinet does not exceed 16 liters/100 ft of lab space.					
4.14	Aerosol cans are kept away from heat and ignition sources.					
<b>5.0</b>	<b>PERSONAL PROTECTIVE EQUIPMENT (PPE)</b>					
5.1	PPE is available and used when needed.					
5.2	PPE is maintained and stored properly.					
5.3	PPE hazard assessments have been performed.					
5.4	Employees are trained in the selection, use and maintenance of PPE.					
5.5	Gloves are worn to prevent skin contact with contaminated, infectious and hazardous materials and when handling animals.					
5.6	Safety glasses with side protection meeting ANSI Z87.1 are available and worn when there is danger of flying particles.					
5.7	Goggles are available and used when there is potential for splashes and spatters.					

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5.8	Face shields are available and used as secondary protection when needed.					
5.9	Protective laboratory coats, gowns or uniforms are required to prevent contamination of personal clothing.					
5.10	All personnel are provided appropriate foot protection where there is a risk of foot injuries.					
5.11	Electrical protective equipment (including insulating blankets, matting, covers, gloves and sleeves) is provided when needed.					
<b>Respirator</b>						
5.12	Personnel using respirators are enrolled in an appropriately constituted respiratory protection program. <a href="#">Respirator Protection Program</a>					
5.13	Do employees wear any of the following types of respirators? <input type="checkbox"/> Disposable particulate (N-95, N-99, etc.). <input type="checkbox"/> Cartridge respirator (half or full face). <input type="checkbox"/> Powered air purifying respirator (PAPR).					
5.14	If personnel are wearing respirators voluntarily, they have read and understand 'Information for Employees Using Respirators When not Required Under Standard', Appendix D (refer to <a href="http://www.ehso.emory.edu">www.ehso.emory.edu</a> ).					
5.15	Medical clearance for respirator use is renewed annually.					
5.16	Fit testing / training is renewing annually.					
5.17	Elastomeric respirators are regularly cleaned, disinfected, inspected and stored appropriately.					
<b>6.0</b>	<b>GENERAL ENVIRONMENTAL CONTROLS</b>					
<b>Sanitation</b>						
6.1	Where the presence of rodents, insects, and vermin are detected, an effective extermination program is in place.					
<b>Permit Required Confined Spaces – completed by EHSO</b>						
6.2	The workplace has been evaluated to determine if any spaces are permit-required confined spaces. <i>(EHSO USE ONLY)</i>					
6.3	Confined Space Permits are completed and signed by Entry Supervisor each time employees enter a permit required confined space. <i>(EHSO USE ONLY)</i>					
6.4	Employees are informed, by the posting of signs or any other effective means, of the existence, location and the danger posed by the permit spaces. <i>(EHSO USE ONLY)</i>					
6.5	Permit required confined spaces is continuously monitored as long as there is someone inside of the space. <i>(EHSO USE ONLY)</i>					
6.6	The air inside permit required confined spaces is continuously monitored as long as there is someone inside of the space. <i>(EHSO USE ONLY)</i>					
6.7	Affected employees are provided confined space training annually. <i>(EHSO USE ONLY)</i>					
<b>Lockout / Tagout – completed by EHSO</b>						
6.8	There are written procedures for locking out or tagging out					



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	every machine that has a potential for stored or residual energy. <i>(EHSO USE ONLY)</i>					
6.9	Locks, tags, chains, or other hardware are provided for isolating, securing or blocking of machines or equipment form energy sources. <i>(EHSO USE ONLY)</i>					
6.10	All equipment capable of movement is de-energized or disengaged, and blocked or locked-out during cleaning, servicing, adjusting or setting up operations. <i>(EHSO USE ONLY)</i>					
6.11	Authorized employees are provided with individually keyed locks. <i>(EHSO USE ONLY)</i>					
6.12	Affected employees receive LOTO training annually. <i>(EHSO USE ONLY)</i>					
<b>7.0</b>	<b>MEDICAL AND FIRST AID</b>					
7.1	First aid supplies are readily available.					
7.2	Employees seek medical attention for injuries at Employee Health Services and Emory University Hospital (Oxford Campus should seek care at Newton Medical Center Emergency Department and Yerkes Field Station at the nearest emergency room).					
<b>Eyewashes and Showers</b>						
7.3	Eyewashes and showers are provided where corrosive materials are used.					
7.4	Employees are instructed in the location and proper use of emergency showers and eyewashes.					
7.5	The eyewash is free of obstruction.					
7.6	A double-ocular hands free eyewash is available where needed.					
7.7	There is an Emergency Eyewash sign near the eyewash.					
7.8	The eyewash protective caps are in place.					
7.9	Emergency eyewash / shower is capable of delivering flushing water to the eye affected area for 15 minutes.					
7.10	The eyewash / shower is tested and documented monthly by personnel.					
<b>Powered Industrial Trucks</b>						
7.11	Permanent aisles / passageways where powered industrial trucks are in use inside buildings are marked.					
7.12	Clearance signs to warn of clearance limits are provided.					
7.13	Powered industrial trucks have a label indicating approval for their intended use for fire safety purposes by the testing laboratory.					
7.14	Overhead protection is provided on rider lift trucks.					
7.15	Each powered industrial truck has a warning device that can be clearly heard above the normal noise in the operating area.					
7.16	Only trained personnel are allowed to operate powered industrial trucks.					
7.17	An evaluation of each powered industrial truck operator's performance is conducted at least once every three years.					
<b>8.0</b>	<b>ELECTRICAL SAFETY</b>					
8.1	Electrical cords are appropriate for the equipment.					

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8.2	Electrical outlets are not overloaded.					
8.3	Cords are secured properly and do not pose a trip hazard.					
8.4	Electrical cords are not damaged or frayed.					
8.5	Electrical cords are only used for temporary electrical service.					
8.6	Extension cords are only used for temporary electrical service.					
8.7	Extension cords and outlets are kept away from potential flammable liquids.					
8.8	Protective covers, plugs, or plates are in place over boxes, receptacles, and switches.					
8.9	There is a 36" access clearance around electrical / circuit breaker panels.					
<b>9.0</b>	<b>TOXIC AND HAZARDOUS SUBSTANCES</b>					
<b>Air Contaminants</b>						
9.1	An Industrial Hygiene risk assessment has been conducted for labs where hazardous chemicals are used in the work area.					
<b>Isoflurane</b>						
9.2	Employees who are exposed to isoflurane in their routine job function have been monitored for isoflurane.					
<b>Formaldehyde</b>						
9.3	Employees who are exposed to formaldehyde in their routine job function have been monitored for formaldehyde.					
<b>SECTION D: ENVIRONMENTAL COMPLIANCE</b>						
<b>1.0</b>	<b>CHEMICAL AND WASTE MANAGEMENT</b>					
<b>General Chemical and Waste Management</b>						
1.1	Regulated wastes are stored in appropriate locations.					
1.2	All chemicals and regulated waste containers are kept closed except when in use.					
1.3	Chemicals and regulated wastes are stored in a manner which would prevent a release to the environment (i.e., secondary containment is used when appropriate; chemicals are stored away from floor drains, etc.).					
<b>Chemical Waste</b>						
1.4	All unwanted, obsolete, or waste chemicals are labeled as 'waste' and disposed of through EHSO.					
1.5	No chemicals are poured down the drain or storm sewer.					
1.6	No chemical waste is evaporated.					
1.7	Waste or unwanted non-returnable gases (aerosol cans, small propane or MAPP gas tanks) are disposed of through EHSO.					
<b>Ballasts</b>						
1.8	Suspect PCB ballasts are disposed of through EHSO.					
1.9	Non-PCB ballasts are disposed of through metals recycling or regular trash.					
<b>Batteries</b>						
1.10	Used batteries (all types except for alkaline) are labeled or in a container labeled "Used Batteries" and the date the first battery was removed from service.					

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1.11	The leads / terminals on used batteries for disposal are taped with non-conductive tape.					
1.12	Used batteries are disposed of through EHSO within 6 months from the date on the battery/container.					
<b>Electronic Waste</b>						
1.13	Electronic waste is labeled as 'electronic waste for recycle' and is sent to surplus properties for recycling.					
<b>2.0</b>	<b>LAMPS AND OTHER MERCURY CONTAINING DEVICES</b>					
2.1	New and used lamps (fluorescent, halogen, metal halide, etc.) are stored in a proper container (such as the original shipping container) in a way to minimize and contain breakage. <i>(EHSO USE ONLY)</i>					
2.2	Used lamps are stored in a sturdy box or drum and the lid is secured or the box is taped shut except when removing or adding lamps. <i>(EHSO USE ONLY)</i>					
2.3	Used lamp containers are labeled as "Used Lamps" and dated with the date that the first used lamp was removed from service. <i>(EHSO USE ONLY)</i>					
2.4	Used lamps are given to EHSO for proper disposal. <i>(EHSO USE ONLY)</i>					
2.5	Used lamps are not stored for more than 6 months before being given to EHSO. <i>(EHSO USE ONLY)</i>					
2.6	In-use mercury containing devices (i.e. thermometers, etc.) are intact / not leaking.					
2.7	Removed-from-service (or unwanted) mercury containing devices are labeled with "Used Mercury-Containing Equipment" and dated when the equipment was removed from service.					
2.8	Used mercury containing equipment is disposed of through EHSO within 6 months of the date removed from service.					
2.9	Mercury spills or leaks are immediately reported to EHSO for cleanup.					
<b>3.0</b>	<b>OILS (INCLUDING FUEL AND GREASE) / SPCC – completed by EHSO</b>					
3.1	Oil containers and oil containing equipment are located away from floor drains or are protected from spilling into a drain. <i>(EHSO USE ONLY)</i>					
3.2	Used oil is stored in an appropriate container, labeled as "Used Oil", kept closed except when adding oil, and disposed of through EHSO in a timely manner. <i>(EHSO USE ONLY)</i>					
3.3	Oil rags and oil filters are labeled and disposed of through EHSO. <i>(EHSO USE ONLY)</i>					
<b>4.0</b>	<b>PESTICIDES (INCLUDES ANY CHEMICAL WITH AN EPA REGISTRATION NUMBER)</b>					
4.1	All stock pesticide containers are properly labeled with the original container label from the manufacturer.					
4.2	All pesticide service containers are labeled with the name of the product, the EPA registration number, precautionary statement and manufacturer.					
4.3	All pesticide containers are kept closed when not in use.					

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4.4	Unwanted or waste pesticides (including aerosols and empty containers) are disposed of through EHSO.					
4.5	Pesticide mixing occurs inside of secondary containment.					
4.6	Water hoses for pesticide mixing are fitted with a device to prevent back-siphoning.					
<b>5.0</b>	<b>EMERGENCY PROCEDURES / RESPONSE</b>					
5.1	Procedures are in place for spill response and notification of EHSO, Emory Police and / or other responsible groups.					
5.2	Spill response materials are appropriate for the area and are accessible.					
5.3	All spill debris / contained chemicals are disposed of through EHSO.					
<b>6.0</b>	<b>OZONE DEPLETING COMPOUNDS (CFCS) – completed by EHSO</b>					
6.1	Refrigerant manifests from contractors are maintained for a minimum of 3 years. <i>(EHSO USE ONLY)</i>					
6.2	Refrigerant certificates are maintained for all contractors. <i>(EHSO USE ONLY)</i>					
<b>7.0</b>	<b>TIER II</b>					
7.1	List all Tier II reportable chemicals and quantities below <i>EHSO USE ONLY</i> ):					

**SECTION E: RECOMBINANT DNA – NIH GUIDELINES**

- \* *The questions in this section are based on Appendix Q-II-C: Biosafety Level 3-Animals (BL3-N) in the May 2011 publication of the NIH Guidelines for Research Involving Recombinant DNA Molecules.*
- \* *This section applies to ABSL-3 facilities that are conducting recombinant DNA research.*

<b>1.0</b>	<b>ANIMAL FACILITY ACCESS</b>					
1.1	The containment area shall be locked.					
1.2	The containment area shall be patrolled or monitored at frequent intervals.					
1.3	The containment building shall be controlled and have locking access.					
1.4	The Animal Facility Director shall establish policies and procedures whereby only persons who have been advised of the potential hazard and who meet any specific entry requirements (e.g., vaccination) shall enter the laboratory or animal rooms.					
1.5	Animal room doors, gates or other closures shall be kept closed when experiments are in progress.					
<b>2.0</b>	<b>DECONTAMINATION AND INACTIVATION</b>					
2.1	The work surfaces of containment equipment shall be decontaminated when work with organisms containing recombinant DNA molecules is finished. Where feasible,					

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	plastic-backed paper toweling shall be used on nonporous work surfaces to facilitate clean-up.					
2.2	All animals shall be euthanized at the end of their experimental usefulness and the carcasses decontaminated, preferably by autoclaving, before discard of reuse.					
2.3	Needles and syringes shall be promptly placed in a puncture-resistant container and decontaminated, preferably by autoclaving, before discard or reuse.					
2.4	Special safety testing, decontamination procedures, and IBC approval shall be required to transfer agents or tissue/organ specimens from a BL3-N animal facility to a facility with a lower containment classification.					
2.5	Liquid effluent from containment equipment, sinks, biological safety cabinets, animal rooms, primary barriers, floor drains and sterilizers shall be decontaminated by heat treatment before being released into the sanitary system. The procedure used for heat decontamination of liquid wastes shall be monitored with a recording thermometer. The effectiveness of the heat decontamination process					
<b>3.0</b>	<b>SIGNS</b>					
3.1	When the animal research requires special provisions for entry (e.g., vaccination), a warning sign incorporating the universal biosafety symbol shall be posted on all access doors to the animal work area.					
3.2	The sign shall include: the agent, the animal species, the name and telephone number of the Animal Facility Director or other responsible individual and any special requirements for entering the laboratory.					
<b>4.0</b>	<b>PROTECTIVE CLOTHING</b>					
4.1	Full protective clothing that protects the individual (e.g., scrub suits, coveralls, uniforms) shall be worn in the animal area.					
4.2	Clothing shall not be worn outside the animal containment area and shall be decontaminated before laundering or disposal.					
4.3	Personnel shall be required to shower before exiting the BL3-N area and wearing of personal clothing.					
4.4	Special care shall be taken to avoid skin contamination with microorganisms containing recombinant DNA. Impervious and/or protective gloves shall be worn when handling experimental animals and when skin contact with an infectious agent is unavoidable.					
4.5	Appropriate respiratory protection shall be worn in rooms containing experimental animals and when skin contact with an infectious agent is unavoidable.					
<b>5.0</b>	<b>RECORDS</b>					
5.1	Documents regarding experimental animal use and disposal shall be maintained in a permanent record book.					
5.2	Any incident involving spills and accidents that result in environmental release or exposure of animals or laboratory					

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	workers to organisms containing recombinant DNA shall be reported immediately to the Biological Safety Office, Animal Facility Director, IBC, NIH/OBA and other appropriate authorities (if applicable). Reports to the NIH/OBA shall be sent to the Office of Biotechnology Activities, National Institutes of Health, 6705 Rockledge Drive, Suite 750, MSC 7985, Bethesda, MD 20892-7985 (20817 for non-USPS mail), 301-496-9838, 301-496-9839 (fax). Medical evaluation, surveillance and treatment shall be provided as appropriate and written records maintained. If necessary, the area shall be appropriately decontaminated.					
5.3	When appropriate and giving consideration to the agent handled, baseline serum samples shall be collected and stored for animal care and other at-risk personnel. Additional serum specimens may be collected periodically depending on the agent handled or the function of the facility.					
<b>6.0</b>	<b>TRANSFER OF MATERIALS</b>					
6.1	Biological materials removed from the animal containment laboratory in a viable or intact state shall be transferred to a non-breakable sealed primary container and then enclosed in a non-breakable sealed secondary container.					
6.2	All containers, primary and secondary, shall be disinfected before removal from the animal facility.					
6.3	Advance approval for transfer of material shall be obtained from the Animal Facility Director.					
6.4	Packages containing viable agents may be opened only in a facility having an equivalent or higher level of physical containment unless the agent is biologically inactivated or incapable of reproduction.					
6.5	Special safety testing, decontamination procedures, and IBC approval shall be required to transfer agents or tissue/organ specimens from a BL3-N animal facility to a facility with a lower containment classification.					
<b>7.0</b>	<b>OTHER</b>					
7.1	All genetically engineered neonates shall be permanently marked within 72 hours after birth, if their size permits. If their size does not permit marking, their containers should be marked. In addition, transgenic animals should contain distinct and biochemically assayable DNA sequences that allow identification of transgenic animals from among non-transgenic animals.					
7.2	Appropriate steps should be taken to prevent horizontal transmission or exposure of laboratory personnel. If the agent used as the vector is known to be transmitted by a particular route (e.g., arthropods), special attention should be given to preventing spread by that route. In the absence of specific knowledge of a particular route transmission, all potential means of horizontal transmission (e.g., arthropods, contaminated bedding or animal waste) should be prevented.					

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7.3	Eating drinking, smoking and applying cosmetics shall not be permitted in the work area.					
7.4	Individuals who handle materials and animals containing recombinant DNA molecules shall be required to wash their hands before exiting the containment area.					
7.5	Experiments involving other organisms that require containment levels lower than BL3-N may be conducted in the same area concurrently with experiments requiring BL3-N containment provided that they are conducted in accordance with BL3-N practices.					
7.6	Animal holding areas shall be cleaned at least once a day and decontaminated immediately following any spill of viable materials.					
7.7	All procedures are carefully performed to minimize the creation of aerosols.					
7.8	A double barrier shall be provided to separate male and female animals unless reproductive studies are part of the experiment or other measures are taken to avoid reproductive transmission. Reproductive incapacitation may be used.					
7.9	The containment area shall be in accordance with state and Federal laws and animal care requirements.					
7.10	All animals shall be euthanized at the end of their experimental usefulness and the carcasses decontaminated before disposal in an approved manner.					
7.11	Personnel shall be required to shower before exiting the BL3-N area and wearing of personal clothing.					
7.12	Animals of the same or different species, which are not involved in the work being performed, shall not be permitted in the animal area.					
7.13	Needles and syringes shall be used only for parenteral injection and aspiration of fluids from laboratory animals and diaphragm bottles. Only needle-locking syringes or disposable syringe needle units (i.e., needle is integral to the syringe) shall be used for the injection or aspiration of fluids containing organisms that contain recombinant DNA. Extreme caution shall be used when handling needles and syringes to avoid autoinoculation and the generation of aerosols during use and disposal. Following use, needles and syringes shall be promptly placed in a puncture-resistant container and decontaminated, preferably by autoclaving, before discard or reuse.					
7.14	A biosafety manual shall be prepared or adopted. Personnel shall be advised of special hazards and required to read and follow instructions on practices and procedures.					
7.15	Animals shall be contained within an enclosed structure (animal room or equivalent) to minimize the possibility of theft or unintentional release and avoid arthropod access. The special provision to avoid entry or escape of arthropods from the animal areas may be waived if the agent in use is not known to be transmitted by arthropods.					

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7.16	The interior walls, floors, and ceilings shall be impervious to water and resistant to acids, alkalis, organic solvents and moderate heat, to facilitate cleaning. Penetrations in these structures and surfaces (e.g., plumbing and utilities) shall be sealed.					
7.17	Windows in the animal facility shall be closed, sealed and breakage resistant (e.g., double-pane tempered glass or equivalent). The need to maintain negative pressure should be considered when constructing or renovating the animal facility.					
7.18	An autoclave, incinerator or other effective means to decontaminate animals and waste shall be available, preferably within the containment area. If feasible, a double-door autoclave is preferred and should be positioned to allow removal of material from the containment area.					
7.19	If arthropods are used in the experiment or the agent under study can be transmitted by an arthropod, the interior work area shall be appropriately screened (52 mesh). All perimeter joints and openings shall be sealed and additional arthropod control mechanisms used to minimize arthropod entry and propagation, including appropriate screening or the equivalent of access doors.					
7.20	Access doors to the containment area shall be self-closing.					
7.21	The animal area shall be separated from all other areas. Passage through two sets of doors shall be the basic requirement for entry into the animal area from access corridors or other contiguous areas. The animal containment area shall be physically separated from access corridors and other laboratories or areas by a double-door clothes change room, equipped with integral showers and airlock.					
7.22	Liquid effluent from containment equipment, sinks, biological safety cabinets, animal rooms, primary barriers, floor drains and sterilizers shall be decontaminated by heat treatment before being released into the sanitary system. The procedure used for heat decontamination of liquid wastes shall be monitored with a recording thermometer. The effectiveness of the heat decontamination process system shall be revalidated every 30 days with an indicator organism.					
7.23	An exhaust air ventilation system shall be provided. This system shall create directional airflow that draws air into the animal room through the entry area. The building exhaust, or the exhaust from primary containment units, may be used for this purpose if the exhaust air is discharged to the outside and shall be dispersed away from occupied areas and air intakes. Personnel shall verify that the direction of the airflow (into the animal room) is proper.					
7.24	If the agent is transmitted by aerosol, then the exhaust air shall pass through a high efficiency particulate air / HEPA filter.					



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7.25	Vacuum lines shall be protected with high efficiency particulate air / HEPA filters and liquid disinfectant traps.					
7.26	In lieu of open housing in the special animal room, animals held in a BL3-N area may be housed in partial containment caging systems (e.g. Horsfall units or gnotobiotic systems, or other special containment barriers). Prudent judgment must be exercised to implement this ventilation system (e.g., animal species) and its discharge location.					
7.27	Each animal area shall contain a foot, elbow or automatically operated sink for hand washing. The sink shall be located near the exit door.					
7.28	Restraining devices for animals may be required to avoid damage to the integrity of the animal containment facility.					