



Institutional Biosafety Committee

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IBC BIOSAFETY AUDIT CHECKLIST

Inspector: Inspection Date:
Building: Department:
Lab Location/Agents Used:
PI: Lab Contact:
Office: Office/Lab:
Phone #: Phone #:
Emergency Phone #: Emergency Phone #:
E-mail: E-mail:

Laboratory Biological Safety Containment Level: [] BL1 [] BL2 [] BL2-BBP

BL1 and BL2 Standard Microbiological Practices

- YES NO N/A
1. [] [] [] Lab access is limited or restricted by the Principal Investigator (PI) when work with organisms containing recombinant DNA molecules is in progress.
2. [] [] [] Whenever infectious agents or organisms containing recombinant DNA molecules are in use in the laboratory, a hazard warning sign incorporating the universal biosafety symbol is posted on the access door to the laboratory work area or in the immediate work area.
3. [] [] [] Lab has cleanable, impervious benchtops, floors, equipment and spaces between are accessible for cleaning.
4. [] [] [] Work surfaces are decontaminated before and after each procedure, and after any spills. Decontaminant is specific against the agent(s) of concern.
5. [] [] [] All contaminated liquid or solid wastes are decontaminated before disposal in accordance with the University of Colorado "Biological Laboratory Waste Management-Disposal Policy and Procedure".
6. [] [] [] Mechanical pipetting devices are used; mouth pipetting is prohibited.
7. [] [] [] Policy for the safe handling of sharps is followed. A puncture-resistant container is used for needle, syringe and sharps, decontaminated, and disposed of in accordance with the University of Colorado "Biological Laboratory Waste Management-Disposal Policy and Procedure".
8. [] [] [] Eating, drinking, smoking, and applying cosmetics are not permitted in the work area.
9. [] [] [] Persons wash their hands after handling materials involving organisms containing recombinant DNA molecules and animals, and when exiting the lab.
10. [] [] [] All procedures are performed carefully to minimize the creation of splashes or aerosols.
11. [] [] [] For good personal hygiene, facilities (e.g., hand washing sink, shower, changing room) and protective clothing and PPE (e.g., laboratory coats, gloves, eye protection, etc.) shall be provided that is appropriate for the risk of exposure to viable organisms containing recombinant DNA molecules.
12. [] [] [] Experiments of lesser biohazard potential are conducted concurrently in carefully demarcated areas of the same laboratory.
13. [] [] [] Chemicals and hazardous wastes are properly managed in accordance with EH&S requirements.
14. [] [] [] Whenever necessary, the University insect and rodent control program is utilized.
15. [] [] [] Windows are not opened unless they are fitted with fly screens.

BL2 and BL-2/BBP Special Practices

- YES NO N/A
16. [] [] [] Materials decontaminated outside the lab are transported in closed, durable, leak proof containers and disposed of in accordance with the University of Colorado "Biological Laboratory Waste Management Disposal Policy and Procedure".
17. [] [] [] Lab access is limited and restricted by the PI to authorized personnel only.

- YES NO N/A**
18. Entry to lab or animal rooms is limited only to personnel advised of all potential hazards and meet any specific entry requirements (e.g., immunization).
 19. Lab coats, gowns, smocks, or uniforms are worn while in the laboratory. Protective clothing is removed and left in the lab before exiting to non-laboratory areas.
 20. Animals not involved in the work being performed are not permitted in the lab.
 21. Gloves are worn when handling experimental animals, infectious material, and contaminated surfaces or equipment. Hands are washed following removal of gloves.
 22. All wastes from laboratories and animal rooms are appropriately decontaminated before disposal.
 23. Hypodermic needles and syringes are used only for parenteral injection and aspiration of fluids from laboratory animals and diaphragm bottles. Only needle-locking syringes or disposable syringe-needle units are used for the injection or aspiration of fluids containing organisms that contain recombinant DNA molecules. The needle and syringe are placed in a puncture-resistant container, decontaminated, and disposed in accordance with the University of Colorado *"Biological Laboratory Waste Management-Disposal Policy and Procedure"*.
 24. Lab is equipped with a brush and dustpan, tongs, or forceps to remove broken glassware so that broken glassware is not directly handled.
 25. Lab is equipped with a puncture-resistant container for broken glassware, decontaminated, and disposed of in accordance with the University of Colorado *"Biological Laboratory Waste Management-Disposal Policy and Procedure"*.
 26. Spills and accidents which result in overt exposures to organisms containing recombinant DNA molecules are immediately reported to the Institutional Biosafety Committee and a University Incident Report Form is completed. Medical evaluation, surveillance, and treatment are provided as appropriate and written records are maintained.
 27. Lab personnel have received appropriate immunizations or tests for the agents handled or potentially present in the lab (e.g., hepatitis B vaccine or TB skin testing).
 28. Based on the agent(s) handled/used in this lab, is it appropriate to collect and store baseline serum samples for lab and other at-risk personnel.
 29. Lab personnel have been advised of special hazards and are required to read and follow instructions on practices and procedures.
 30. The PI ensures that laboratory and support 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.
 31. The PI shall have an emergency plan that describes the procedures to be followed if an accident contaminates personnel or the environment.

BL2 and BL-2/BBP Containment Equipment

- YES NO N/A**
32. Biological safety cabinet (BSC) has a current, annual certification.
BSC # _____ BSC Class: _____ BSC Type: _____ Certification Date: _____
 33. BSC is used whenever procedures with a high potential for creating aerosols are conducted. These may include centrifuging, grinding, blending, vigorous shaking or mixing, sonic disruption, opening containers of materials whose internal pressures may be different from ambient pressures, intranasal inoculation of animals, and harvesting infected tissues from animals or eggs.
 34. BSC is used whenever high concentrations or large volumes of organisms containing recombinant DNA molecules are used.
 35. BSC surface wiped down with appropriate disinfectant at beginning and end of each procedure.
 36. Centrifuge is used in the open laboratory if sealed beads or centrifuge safety cups are used and cups and rotor are opened only in a BSC.
 37. Face protection (goggles, mask, face shield or other splatter guard) is used when working outside the BSC with infectious material.

BL2 and BL2-BBP Laboratory Facilities

- YES NO N/A**
38. Doors are lockable where agents are used.
 39. Lab has a sink for hand washing.
 40. An eye/face wash station is readily available.
 41. Lab has adequate lighting for all activities.
 42. An autoclave is available for decontaminating lab waste and glassware.

Autoclave Location _____ Autoclave # _____ Autoclave is in Compliance _____

COMMENTS: