

SAFETY & ENVIRONMENTAL QUESTIONNAIRE

Principal Investigator/Customer: _____

Bldg./Room _____ FME Work Order Number: _____

FME Project Manager: _____

1. Will people occupy the space? Yes ___ how many? ___ No ___
2. Will compressed gases be used in laboratory operations? Yes ___ No ___
If yes, which gases? _____
Where will the cylinders be located _____
3. Will flammable liquids be used in laboratory operations? Yes ___ No ___
If yes, <60 gallons may be stored in flammable storage cabinet. >60 gallons require flammable storage room.
4. Will chemicals, reagents be stored in the space? Yes ___ No ___
 - a) Shelf Yes ___ No ___
 - b) Corrosive Cabinet Yes ___ No ___
 - c) Oxidizer Cabinet Yes ___ No ___
 - d) Flammable Storage Cabinet Yes ___ No ___
 - e) Chemical Store Room Yes ___ No ___
 - f) Flammable Storage Room Yes ___ No ___
5. Will other materials be stored in space? Yes ___ No ___
 - a) Shelving Yes ___ No ___
 - b) Dedicated storeroom Yes ___ No ___
 - c) Common area Yes ___ No ___
6. Is any Biological Agent (cultures, rDNA, RNA, etc) or biological toxin to be used in this laboratory?
Yes ___ No ___ (If yes answer the following questions)
 - a) Is agent or material a potential human or animal pathogen or toxin?
Yes ___ No ___
 1. If Yes does the work have a current Pathogen Registration (SEPP Pathogen Registration # _____)
 2. If No contact SEPP for appropriate forms
 - b) Will the project include work with rDNA or RNA?
Yes ___ No ___
 1. If Yes does the work have a current rDNA Registration (IBC rDNA Registration # _____)
 2. If No contact SEPP for appropriate forms
 - c) If the biological agent is a potential pathogen what is the mode(s) of transmission (aerosol route, direct contact, or other) _____.
 - d) Is antibiotic resistance expressed? Yes ___ No ___ other markers? _____
 - e) Is a toxin produced? Yes ___ No ___ Will you work with the toxin? Yes ___ No ___ If yes, does toxin have an LD₅₀ more than 100 nanograms per kilogram body weight?
Yes ___ No ___

- f) Largest volume used is: ____ liters. Usual volume used is ____ liters.
- g) Will the work involve the use of human or animal tissues?
Please specify. _____
- h) Will the organism be inactivated prior to disposal? Yes ____ No ____
Specify methods: Heat ____ Chemical ____ Radiation ____ Other ____
- i) Do you anticipate the need for a dedicated autoclave? Yes ____ No ____
- j) Will you culture the organism? Yes ____ No ____
Specify amount _____
- k) Do you concentrate the organism? Yes ____ No ____
Specify methods: Centrifugation ____ Precipitation ____ Filtration ____
Other ____
7. What facility and practice biosafety level is necessary to perform the proposed work?

8. Will animals be used in the proposed research? Yes ____ No ____
9. Is there any possibility that you will generate chemical waste?
Yes _____ No _____
- If yes, what is the largest quantity of waste that may be generated in one week:
- a. Flammable solvents: number of 5-gallon carboys _____ number of 1-gallon carboys _____
- b. Chlorinated solvents: number of 5-gallon carboys _____ number of 1-gallon carboys _____
- c. Phenol/chloroform mixtures:
Number of 1-gallon carboys _____
- d. Other chemical wastes > 1 gallon per week: number of containers _____
10. Ordinary trash: number of 30-gallon metal trash cans _____
11. Recyclables: number of blue bins _____
12. Is there any possibility that you will generate medical waste?
Yes _____ No _____
- If yes, Medical waste: number of biomedical waste boxes _____
number of tall trashcans _____
13. Do you plan to generate ordinary trash (paper, garbage, etc.)?
Yes _____ No _____
- If yes, Ordinary trash: number of 30-gallon metal trash cans _____
14. Do you plan to generate recyclable materials (paper, aluminum, glass, etc.)?
Yes _____ No _____
- If yes, Recyclable: number of blue bins _____

15. Will there be a dark room: Yes _____ No _____
If yes, will the processing be automated _____ or manual _____?
If automated, is there space for a silver recovery unit? Yes ____ No ____
16. Will you need outdoor storage of supplies or equipment that could release pollutants to storm water? Yes _____ No _____
17. Will you need emergency power? Yes _____ No _____
18. For new construction projects, has the DHHS Categorical Exclusion Criteria Checklist been completed? Yes _____ No _____ N/A _____
19. For new construction projects, has the NIH Environmental Assessment Criteria checklist been completed? Yes _____ No _____ N/A _____
20. Will X-Ray Units be utilized? Yes _____ No _____
21. Will Electron Microscope(s) be utilized? Yes _____ No _____
22. Is there a possibility that you will use radioactive material?
Yes _____ No _____
23. Is there a possibility of "human/medical use" involving radioactive material?
Yes _____ No _____
24. If you answered "yes" to questions 22 and/or 23 please complete the following:
- a) Which isotopes will be utilized? List: _____
 - b) List **mCi** amounts per experiment to be used **for each isotope** listed above.

 - c) List all radiological protocols (separate sheet may be utilized).

 - d) List equipment containing "sealed sources" if applicable.

 - e) Will iodinations be performed? Yes _____ No _____
25. Is there any possibility that you will generate radioactive waste? Yes _____
No _____
- If yes, what is the largest quantity of waste that may be generated in one week:
- a. Dry radioactive waste: number of 30-gallon containers _____
 - b. Liquid radioactive waste - half-life < 15 days: number of 5-gallon carboys _____
 - c. Liquid radioactive waste – half-life 15-100 days: number of 5-gallon carboys _____
 - d. Liquid radioactive waste – half-life > 100 days: number of 5-gallon carboys _____
 - e. Liquid scintillation vials: number of vial flats _____

26. Is there any possibility that you will generate mixed waste (regulated chemical waste that contains detectable radioactivity)? Yes _____ No _____

If yes, mixed waste: number of 1-gallon carboys _____