

## ENGINEERING V KEY / CARD REQUEST

Please complete the “Laboratory Safety Fundamental Concepts” training to receive lab keys. Training Schedules can be found at: <http://map.ais.ucla.edu/go/1003938>. Submit all completed forms to Stacey Fong in 5121F Engr V. DEPOSITS: \$50 per key, \$25 per fob. For UCLA students, charges will show up as BIOENGR KEY DEP (310) 794-5072 on your BruinBill Account.

Name: \_\_\_\_\_ UID# \_\_\_\_\_

Status: \_\_\_\_\_ Grad Student \_\_\_\_\_ Ugrad Student \_\_\_\_\_ Postdoc \_\_\_\_\_ Faculty \_\_\_\_\_ Staff \_\_\_\_\_ Visiting

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

Mailing Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

Lab Safety Fundamental Training Date: \_\_\_\_\_ *(please attach certificate of completion)*

**Boelter Hall Instructional Labs Access:** All required training/forms must be submitted to **Magdalena Balonis-Sant in 2121K Engr V ([mbalonis@ucla.edu](mailto:mbalonis@ucla.edu))**. She must sign on the line below before access will be given to the instructional labs.

Signature verification that Training & Forms submitted for BH Instructional Labs: \_\_\_\_\_

| Key Check out Date | Room Number | Key # / Card # (BE use only) | Key Return Date (BE use only) | Deposit Amount Charge via BruinBill |
|--------------------|-------------|------------------------------|-------------------------------|-------------------------------------|
|                    |             |                              |                               |                                     |
|                    |             |                              |                               |                                     |
|                    |             |                              |                               |                                     |
|                    |             |                              |                               |                                     |
|                    |             |                              |                               |                                     |

| <i>For Department Use Only</i>          |  |                                   |  |
|---|--|-----------------------------------|--|
| Key Deposit Charged via Bruin Bill Acct |  | Refund Issued via Bruin Bill Acct |  |
| Invoice Number                          |  | Invoice Number                    |  |
| Sequence Number                         |  | Sequence Number                   |  |
| Charged Amount                          |  | Refund Amount                     |  |
| Date processed                          |  | Date processed                    |  |
| Processed by:                           |  | Processed by:                     |  |

*I authorize the Department of Bioengineering to charge my Bruin Bill account for the key deposits in the amount stated above. I understand that the deposits will be refunded to me once I return my key(s) and/or electronic fob. Should I lose my key(s) or fob, I will forgo my deposits.*

**Key Requester Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**PI/Faculty Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*(Must get signature from faculty before keys will be issued)*

UNIVERSITY OF CALIFORNIA  
HENRY SAMUELI SCHOOL OF ENGINEERING AND APPLIED SCIENCE  
**KEY REQUEST FORM**

Requester Name \_\_\_\_\_ EMAIL \_\_\_\_\_  
 Department \_\_\_\_\_ Building \_\_\_\_\_  
 ID Number \_\_\_\_\_ Extension \_\_\_\_\_

| STATUS                               | ROOM # | KEY # | Electronic Key Card or FOB # |
|--------------------------------------|--------|-------|------------------------------|
| _____ Faculty                        |        |       |                              |
| _____ Non-Academic Staff (Full-time) |        |       |                              |
| _____ Visiting Scholar               |        |       |                              |
| _____ Post-Doctoral                  |        |       |                              |
| _____ Graduate Student               |        |       |                              |
| _____ Student-Employee (Part-time)   |        |       |                              |
| _____ Undergraduate Researcher       |        |       |                              |
| _____ Other (Explain)                |        |       |                              |

Keys to research laboratories will only be issued after the following is completed. Person receiving keys must initial each item and sign below along with their faculty advisor.

- I have completed the **LABORATORY SAFETY ORIENTATION** course and passed the competence exam. A record of this is on file in the Training Records section of the Laboratory Safety Manual \_\_\_\_\_ Initial
- I have received the following training on **Personal Protection Equipment (PPE)** and have access to them.

|   |         |
|---|---------|
| I have been shown the laboratory and building exits in case of emergency:             | Initial |
| I have been shown the location of the fire alarms:                                    | Initial |
| I have been shown the location of the laboratory phone:                               | Initial |
| I have been shown the location of the laboratory shower AND how to use it:            | Initial |
| I have been shown the location of the laboratory eye wash AND how to use it:          | Initial |
| I have been shown the location of the laboratory fire extinguisher AND how to use it: | Initial |
| I have been shown the location of the laboratory first aid kit:                       | Initial |
| I have been given a copy and read the departmental Emergency Information sheet        | Initial |
| I have completed the Lab Safety Training (copy of my certificate is attached)         | Initial |

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

SIGNATURE (Faculty Advisor or Supervisor) \_\_\_\_\_ DATE \_\_\_\_\_  
 Print Name \_\_\_\_\_

*When this form is complete, please return to the Management Service Officer (MSO) in your department, for final approval & issuance of key(s).*

Date Key(s) returned: \_\_\_\_\_ Signature of Receiver: \_\_\_\_\_

# Research Laboratory Hazard Assessment and Personal Protective Equipment Use

All new researchers (undergraduate students, graduate students, postdoctoral scholars, and research staff) must complete this worksheet. The goals are to insure knowledge of hazards that might be encountered in the research laboratory and to insure knowledge of how Personal Protective Equipment is used to avoid injury.

NAME \_\_\_\_\_

EMAIL \_\_\_\_\_ EXTENSION \_\_\_\_\_

## STEP 1: Hazard Identification

Review potential chemical hazards and the recommended Personal Protective Equipment using the next page of this document.

Initials: \_\_\_\_\_

## STEP 2: General Training for Personal Protective Equipment

Review the PowerPoint presentation on PPE Use for Research laboratories at the EHS website: <http://ehs.ucla.edu/pub/PPE%20for%20Research%20Laboratories.ppt>

Initials: \_\_\_\_\_

## STEP 3: Lab Specific Training for Personal Protective Equipment

With the Faculty Advisor, Supervisor, or Lab Safety Officer:

Discuss what types of PPE are used in the lab.

Discuss when PPE is necessary in the lab.

Discuss how to obtain PPE for this lab.

Discuss how to wear, adjust, and use PPE for this lab.

Discuss proper care, maintenance, useful life, and disposal of the PPE for this lab.

Discuss the limitations of the PPE for this lab.

Discuss proper PPE practices including not wearing PPE outside of lab hazard areas.  
(e.g. in hallways and eating areas)

Initials: \_\_\_\_\_

## STEP 4: Documentation

Send a copy of this page to the Chemical Safety Officer in your department.

Save this sheet in the Training Records section of the Laboratory Safety Manual.

Initials: \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

SIGNATURE (Faculty Advisor or Supervisor) \_\_\_\_\_ DATE \_\_\_\_\_

## Chemical Use Hazards

| Activity  | Potential Hazards   | Recommended PPE  |
|---|---|--|
| Working with small volumes (<4 liters) of corrosive liquids.  | Eye or skin damage.   | Safety glasses or goggles<br>Light chemical-resistant gloves<br>Lab coat.  |
| Working with small volumes (<4 liters) of corrosive liquids, small to large volumes of acutely toxic corrosives, or work which creates a splash hazard. | Poisoning, increased potential<br>For eye or skin damage.   | Safety goggles<br>Heavy chemical-resistant gloves<br>Lab coat and chemical resistant<br>Apron.   |
| Working with small volumes (<4 liter) of organic solvents or flammable organic compounds.   | Skin or eye damage,<br>potential poisoning<br>through skin contact.   | Safety glasses or goggles.<br>Light chemical-resistant gloves.<br>Lab coat.  |
| Working with large volumes (>4 liter) of organic solvents, small to large volumes of very dangerous solvents, or work which creates a splash hazard.    | Major skin or eye<br>damage, potential<br>poisoning through skin<br>contact. Fire.                          | Safety goggles.<br>Heavy chemical-resistant gloves.<br>Flame-resistant lab coat<br>(e.g. Nomex).   |
| Working with toxic or hazardous chemicals (solid, liquid, or gas).  | Working with toxic or<br>hazardous chemicals (solid,<br>liquid, or gas).                                    | Safety glasses (goggles for large<br>quantities).<br>Light chemical-resistant gloves.<br>Lab coat.   |
| Working with acutely toxic or hazardous chemicals (solid, liquid, or gas).  | Increased potential for<br>eye or skin damage,<br>increased potential<br>poisoning through skin<br>contact. | Safety goggles. Heavy<br>chemical-resistant gloves.<br>Lab coat.   |
| Working with an apparatus with contents under pressure or vacuum.   | Eye or skin damage.   | Safety glasses or goggles, face<br>shield for high risk activities.<br>Chemical-resistant gloves.<br>Lab coat, chemical-resistant<br>apron for high risk activities.   |
| Working with air or water reactive chemicals.   | Severe skin and eye damage.<br>Fire.  | Work in inert atmosphere, when possi<br>Safety glasses or goggles.<br>Chemical-resistant gloves.<br>Lab coat, flame resistant lab<br>coat for high risk activities<br>(e.g. Nomex). Chemical-<br>resistant apron for high<br>risk activities.  |
| Working with potentially Explosive chemicals.   | Splash, detonation,<br>flying debris, skin and<br>eye damage, fire.   | Safety glasses, face shield,<br>and blast shield. Heavy gloves.<br>Flame-resistant lab coat<br>(e.g. Nomex).   |
| Working with low and high temperatures.   | Burns, splashes, fire.  | Safety glasses. Lab coat.<br>Thermally insulated gloves,<br>when needed.   |
| Minor chemical spill cleanup.   | Skin or eye damage,<br>respiratory damage.  | Safety glasses or goggles.<br>Chemical-resistant gloves.<br>Lab coat. Chemical-resistant<br>apron and boot/shoe covers for<br>high risk activities. Respirator<br>as needed. Consider keeping<br>Silver Shield gloves in<br>the lab spill kit. |

# HSSEAS EMERGENCY PROCEDURES

## FIRE

- ACTIVATE a fire alarm.
- CALL 911.
- Never use an elevator during a fire evacuation.
- Evacuate down stairs.

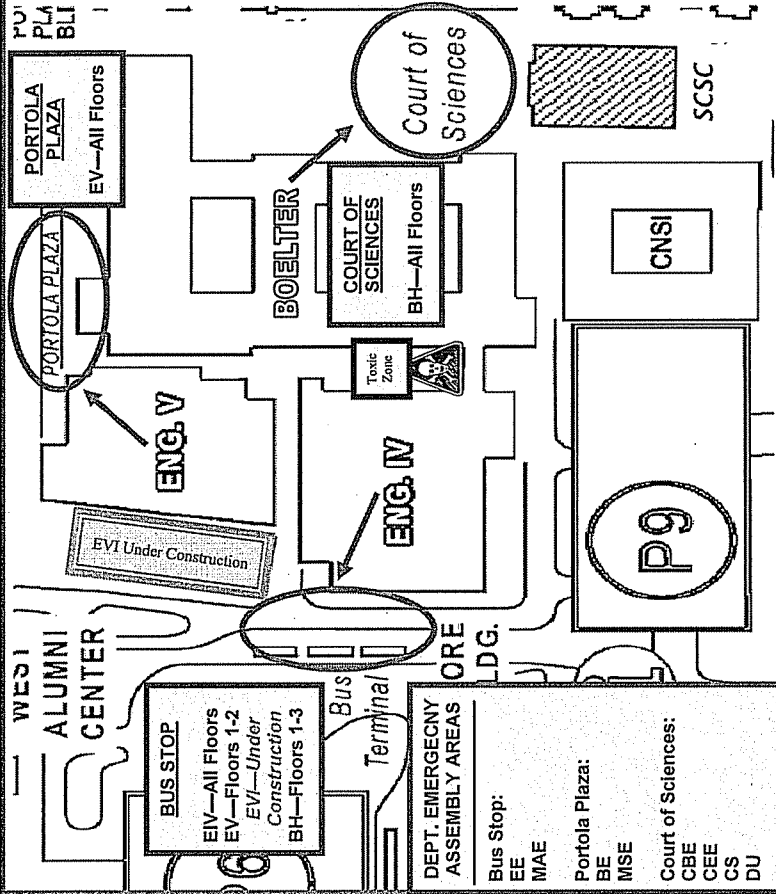
## EARTHQUAKE

- TAKE COVER under a table or desk to avoid falling objects.
- Do not attempt to evacuate from the building until it is safe to do so.
- Stay away from windows or tall cabinets that could fall.
- Move cautiously.

## POWER OUTAGE/ FAILURE

- CALL 310.825.9236 (X59236)
- If inside an elevator, press the phone button.
- Wait for instructions, be patient.

## EVACUATION



- Remain Calm
- Assist persons with disabilities
- Do not use elevators
- Take emergency supplies, rosters
- Close doors, but DO NOT LOCK THEM
- Floor wardens should lock the building or monitor any open entrances if it does not jeopardize their own safety.
- Floor wardens account for evacuating personnel
- Do not re-enter the building

## FLOODING, SPILLS, HAZARDOUS MATERIALS

- Flooding Call #36 from campus phones or 310.825.9236 (X59236).
- Major spills in the lab:
  - Call 911 or EHS&S at 310.825.9797 (x59797)
  - Identify yourself, the location/phone, material spilled and possible injuries
  - Assist injured persons. Isolate contaminated persons
  - Avoid contamination or chemical exposure of yourself and others
  - Close doors or control access to spill site
  - Communicate critical spill information to first responders
  - Follow evacuation instructions

## BOMB THREATS, SUSPICIOUS ACTIVITY

- If you receive a bomb threat call, REPORT TO POLICE:
  - Caller's gender, age, unique speech attributes.
  - Indications about where the device is, when it is set to go off, what it looks like, why it was placed.
  - If a threat was delivered, describe messenger or any suspicious persons in the area.
  - Evacuation decisions rest with UCPD or the University Administration.
  - Follow instructions precisely as evacuation may be to an alternate site.