Laboratory Biosafety Level 1 Inspection Report (01/2023)

Oklahoma State University
Institutional Biosafety Committee
209 Scott Hall
Stillwater, OK 74078

Lab Director:	Inspected By:	
Lab Location (Bldg./Rm Nos.):	Department:	Inspection Type: ☐Initial ☐5 yr. Renewal
Lab Safety Officer:	College/Dept. Safety Officer:	Inspection Date:

Materials used/stored in facility (check all applicable categories):		**Potential hosts:**
☐Recombinant DNA	☐Parasitic	☐Humans:
☐Bacterial	☐Toxin	☐Animals:
☐Viral	☐Other:	☐Plants:
☐Fungal		

Biosafety Level 1 (BSL-1): Suitable for work involving well-characterized agents not known to consistently cause disease in immunocompetent adult humans and that present minimal potential hazard to laboratory personnel and the environment. Work is typically performed on open bench tops using standard microbiological practices. Laboratory personnel receive specific training in the procedures conducted in the laboratory and are supervised by a scientist with training in microbiology or a related science.

BSL	AGENTS	PRACTICES	SAFETY EQUIPMENT	FACILITIES
1	Not known to consistently cause disease in immunocompetent adult humans.	Standard microbiological practices as indicated below.	**Primary Barriers:** Special containment equipment is not required but may be used as determined by appropriate risk assessment. **PPE:** Lab coats, gloves, face protection as needed	Special facility design is not required but may be used as determined by appropriate risk assessment.

IBC Disposition:
☐Approved for Work at:.....☐BSL-1
☐Provisionally Approved for Work at: .....☐BSL-1

Comments:

IBC Chair Signature:	Date:	Biological Safety Officer Signature:	Date:

INSPECTION CHECKLIST					
Verbal Inspection		**YES**	**NO**	**N/A**	**Comments**
1.01	Laboratory doors are kept shut when experiments are in progress and are locked after hours.				
1.02	All personnel are provided information regarding immune competence and susceptibility to infectious agents. Immunocompromised individuals are encouraged to self-identify for appropriate counseling and guidance.				
1.03	Laboratory personnel receive appropriate training regarding their duties, potential hazards, manipulations of infectious agents, necessary precautions to minimize exposures, and hazard/exposure evaluation procedures (e.g., physical hazards, splashes, aerosolization).				
1.04	Personnel receive annual updates and additional training when equipment, procedures, or policies change.				
1.05	All persons entering the facility are advised of the potential hazards, are instructed on the appropriate safeguards, and read and follow instructions on practices and procedures.				
1.06	Protective laboratory coats, gowns, or uniforms are worn to prevent contamination of personal clothing.				
1.07	Long hair is restrained so that it cannot contact hands, specimens, containers, or equipment.				
1.08	Protective eyewear is worn by personnel when conducting procedures that have the potential to create splashes and sprays of microorganisms or other hazardous materials.				
1.09	Eye/face protection is disposed of with other contaminated laboratory waste or decontaminated after use.				
1.10	Gloves are worn if hands are at risk of contact with infectious/recombinant materials, infected animals, or contaminated surfaces/equipment.				
1.11	PPE, including gloves, is not worn outside the laboratory.				
1.12	PPE, including gloves, is changed when contaminated, when integrity is compromised, or when work w/ infectious/recombinant material is completed				
1.13	Disposable PPE, including gloves, is not reused and is disposed of with other contaminated laboratory waste.				
1.14	Gloves and other PPE are removed in a manner that minimizes personal contamination and transfer of infections/recombinant materials outside of the areas where infectious materials and/or animals are housed or manipulated.				
1.15	Personnel wash hands after working with infectious or recombinant materials and before leaving the laboratory.				
1.16	Eating, drinking, smoking, handling contact lenses, applying cosmetics, and storing food for human consumption are not permitted in laboratory areas.				
1.17	Mouth pipetting is prohibited. Mechanical pipetting devices are used.				
1.18	Policies for the safe handling of sharps and broken glassware are developed, implemented, and followed.				
1.19	Whenever practical, improved engineering and work practice controls have been adopted to reduce the risk of sharps injuries.				
1.20	Plasticware is substituted for glassware whenever possible.				
1.21	Use of needles and syringes or other sharp instruments is restricted to situations where there is no alternative.				
1.22	Uncapping of needles is performed in such a manner to reduce the potential for recoil causing an accidental needlestick.				

Verbal Inspection		YES	NO	N/A	Comments
1.23	Needles are not bent, sheared, broken, recapped, removed from disposable syringes, or otherwise manipulated by hand prior to disposal.				
1.24	Used, disposable needles and syringes are carefully placed in puncture-resistant containers used for sharps disposal immediately after use.				
1.25	Non-disposable sharps are placed in a hard-walled container for transport to a processing area for decontamination by autoclaving.				
1.26	Broken glassware is not handled directly. Instead, it is removed using a brush and dustpan, tongs, or forceps.				
1.27	All procedures are performed in a manner that minimizes the creation of splashes and/or aerosols.				
1.28	An appropriate disinfectant is used to decontaminate work surfaces after completion of work and after any spill or splash of infectious or recombinant material				
1.29	Spills involving infectious or recombinant materials are contained, decontaminated, and cleaned up by staff who are properly trained.				
1.30	Spills/accidents are immediately reported to the lab director.				
1.31	Cultures, stocks, and other infectious or recombinant materials are decontaminated using an effective method prior to disposal.				
1.32	Materials to be decontaminated outside of the immediate laboratory are placed in a durable, leak-proof container and secured for transport. For infectious materials, the outer surface of the container is disinfected prior to moving materials.				
1.33	Animals and plants not associated with the work being performed are not permitted in the laboratory.				
1.34	An insect and rodent control program is in effect.				
Visual Inspection		**YES**	**NO**	**N/A**	**Comments**
2.01	Laboratory has lockable door(s) for access control.				
2.02	The lab biosafety level, required immunizations, required PPE, required lab exit procedures, and emergency contact information is posted at all lab entrances when infectious agents are present.				
2.03	A safety manual specific to the laboratory is accessible to personnel. The manual describes the biosafety containment procedures for the materials in use. The manual contains or references protocols for emergency situations, including exposures, medical emergencies, facility malfunctions, or other potential emergencies.				
2.04	Training of lab personnel is documented.				
2.05	A spill procedure is developed and posted within the laboratory.				
2.06	The laboratory is designed to be easily cleaned. There are no carpets or rugs in the laboratory. Spaces between benches, cabinets, and equipment are accessible for cleaning.				
2.07	Lab furniture/equipment is suitable for intended use/loads.				
2.08	Bench tops are impervious to water and resistant to heat, organic solvents, acids, alkalis, and disinfectants				

Visual Inspection		YES	NO	N/A	Comments
2.09	The laboratory has a sink for handwashing.				
2.10	An eyewash station is readily available in the laboratory.				
2.11	Lab windows that open are fitted with fly screens.				
2.12	Illumination is adequate for all activities.				
2.13	Sharps containers are labeled, conveniently located, and puncture resistant.				
2.14	Effective disinfectants are available for all infectious or recombinant materials in use.				
2.15	Refrigerators/freezers containing infectious or recombinant materials are labeled with a biohazard symbol.				
2.16	All equipment that may be contaminated with infectious or recombinant material is labeled with a biohazard symbol.				
2.17	Containers used for the transport of infectious or recombinant materials has a biohazard label.				
2.18	All receptacles used for infectious or recombinant waste are labeled with a biohazard symbol.				

INSPECTION FINDINGS

Code M = Minor Deficiency Code S = Significant Deficiency

Checklist Number	Code	Deficiencies	Required Corrective Actions	Suspense