LABORATORY HAZARD SIGNAGE FORM

**STEP 1: GENERAL INFORMATION**



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| --- | --- |
| **Building Name** |  |
| **Room Number: (sub-rooms addressed separately)** |  |
| **Number of doors leading to the space** |  |
| **Is there an existing sign? (as seen in picture on left)**  |  |

**STEP 2: HAZARDS PRESENT IN THE LAB**

|  |  |  |
| --- | --- | --- |
| **Hazard Class\*** | **Description/Additional Information Required** | **Y/N** |
| **Biohazard** | *Biohazard Symbol is required for Risk Group 2 and 3. Note: Risk Group 4 is not permitted at UBC or in BC.***Risk Group: \_\_\_\_\_\_\_\_\_\_\_\_\_\_****Biosafety Approval # \_\_\_\_\_\_\_\_\_\_** |  |
| **Risk Group 1** | *For working with Biohazards from Risk Group 1***Biosafety Approval # \_\_\_\_\_\_\_\_\_\_** |  |
| **Compressed Gas Cylinders** | *Normally a gas, placed under pressure or chilled, and contained by a cylinder*  |  |
| **Corrosives** | *Materials that cause severe and permanent burns to skin and tissue and can damage clothing, metals and/or other materials*  |  |
| **Explosives** | *Materials that cause a sudden release of gas, heat and pressure (accompanied by loud noise) when subjected to a certain amount of shock, pressure, or temperature.* |  |
| **Flammable Gas** | *Gases that easily catch on fire at normal or elevated temperatures* |  |
| **Flammable Liquid** | *Liquids that have the WHMIS flammable symbol* |  |
| **Flammable** | *Solids that can undergo combustion with or without a source of ignition; if both flammable liquids and solids are present, use only the “Flammable” sticker* |  |
| **Lasers** | *Signage and registration required for Class 3B or 4. Please submit a* [*registration form*](http://www.riskmanagement.ubc.ca/health-safety/laser-safety)*.* |  |
| **Oxidizers** | *React to promote or initiate the combustion of flammable or combustible materials*  |  |
| **Radiation** | *Ionizing Radiation, that emits alpha, beta particles, positron emission, gamma rays and x-rays* **Isotope(s) used: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **Radiation Permit #: \_\_\_\_\_\_\_\_\_\_\_\_** |  |
| **Toxic Gas** | *Gases causing immediate toxic effects*  |  |
| **Toxic Substances** | *Substances that cause immediate toxic effects* |  |
| **X-Rays** | *X-ray system consisting of an x-ray source or generator. Please submit a* [*registration form*](http://rms.ubc.ca/health-safety/research-safety/radiation-safety/radiation-and-laser-safety-general-information/#What are researcher responsibilities for radiation safety?)*.* |  |

**\* For identifying some of the hazard classes, use WHMIS pictograms present on the supplier label or TDG pictograms on the shipping label.**

**STEP 3: EMERGENCY CONTACT INFORMATION:**

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| --- | --- | --- |
|  | **Principal Investigator** | **Responsible Individual** |
| **Name** |  |  |
| **Position** |  |  |
| **Office Phone Number** |  |  |
| **Emergency Phone Number** |  |  |
| **Email** |  |  |

To ensure that Emergency First Responders can obtain the appropriate hazard and contact information for a particular lab space, signs containing emergency contact information will be posted on the outer door(s) of the room. Please choose **one** of the following options:

❑ **Option #1:** The names, position titles and phone numbers of the Principal Investigator (PI) and the Responsible Individual will be displayed on the sign.

❑ **Option #2:** The position titles and phone numbers (but not the names) of the Principal Investigator (PI) and the Responsible Individual will be displayed on the sign.

❑ **Option #3:** No information about the Principal Investigator (PI) and the Responsible Individual will be displayed on the sign. Instead, the sign will display Campus Security’s phone number. The emergency contact information will be stored by RMS in a secured database and will only be disclosed by Campus Security or our Department as required for emergency purposes. ***Please note: Using this option may result in delays in retrieving accurate up-to-date information regarding hazards within the research facility.***

**STEP 4: SPECIAL INFORMATION**

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**STEP 5: ADDITIONAL PRINCIPAL INVESTIGATORS/RESPONSIBLE INDIVIDUALS IN SAME ROOM (IF REQURIED)**

|  |  |
| --- | --- |
| **Name:** | **Position:** |
| **Office Phone #:** | **Emergency Phone #:** |
| **Email:** |

|  |  |
| --- | --- |
| **Name:** | **Position:** |
| **Office Phone #:** | **Emergency Phone #:**  |
| **Email:** |

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| **Name:** | **Position:** |
| **Office Phone #:** | **Emergency Phone #:**  |
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| **Name:** | **Position:** |
| **Office Phone #:** | **Emergency Phone #:**  |
| **Email:** |

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| --- | --- |
| **Name:** | **Position:** |
| **Office Phone #:** | **Emergency Phone #:**  |
| **Email:** |

PRIVACY NOTES:

1. When filling out the Emergency Contact Information section, ensure that you have the express permission of the Principal Investigator and the Responsible Individual to collect their information for this purpose.
2. Personal information on this form is collected under the authority of section 26(c) of the *Freedom of Information and Protection of Privacy Act* and will only be disclosed as authorized under that Act. For more information about the collection of this personal information, please contact Risk Management Services, riskmanagement@rms.ubc.ca or 604-822-2029.