

Laboratory Project Hazard and Risk Assessment

Submitted by: Name of Researcher **Contact (Email & Phone)** Enter contact info. here

Supervisor: Name of Supervisor **Contact (Email & Phone)** Enter contact info. here

Building: Building **Room #:** Room Number **Date:** Click here to enter a date.

1. Laymen’s explanation of process – attach diagram or image separately:

Identify equipment used, purpose, and major steps in process. Use basic language (grade 8 or laymen’s language).

2. Primary Chemicals Required – Identify Amounts Being Handled (P – Pyrophoric, R – Reactive)

Chemical Name	Gas, Liquid or Solid	Classify Hazards					Amount used
		Toxic (Y/N)	Flammable (Y/N)	Corrosive (Y/N)	Oxidizer (Y/N)	*P or *R (Y/N)	
Chemical Name	G, L, or S	Y or N	Y or N	Y or N	Y or N	Y or N	Amount
Chemical Name	G, L, or S	Y or N	Y or N	Y or N	Y or N	Y or N	Amount
Chemical Name	G, L, or S	Y or N	Y or N	Y or N	Y or N	Y or N	Amount
Chemical Name	G, L, or S	Y or N	Y or N	Y or N	Y or N	Y or N	Amount
Chemical Name	G, L, or S	Y or N	Y or N	Y or N	Y or N	Y or N	Amount
Chemical Name	G, L, or S	Y or N	Y or N	Y or N	Y or N	Y or N	Amount
Chemical Name	G, L, or S	Y or N	Y or N	Y or N	Y or N	Y or N	Amount
Chemical Name	G, L, or S	Y or N	Y or N	Y or N	Y or N	Y or N	Amount
Chemical Name	G, L, or S	Y or N	Y or N	Y or N	Y or N	Y or N	Amount

3. Are you using nanomaterials? Y or N - If yes, complete the UW Nanomaterials Risk Assessment [Form](#).

4. Have you done a literature search for similar processes? Y or N. Note – the Safety Office will ask about this.

5. Identify potential sources of risk.

Type of process	Y/N	Indicate how you will minimize risk with these processes
Use of increased pressure, vacuum, cryogenics or compressed gases	Y or N	Indicate how you will minimize risk here

High voltage or increased temperatures	Y or N	Indicate how you will minimize risk here
Use of robotics/shop equipment or mechanical devices that require guarding	Y or N	Indicate how you will minimize risk here
Use of toxic, pyrophoric, or water reactive materials	Y or N	Indicate how you will minimize risk here

6. All medium to high risk activities require an SOP. Working with toxic materials requires emergency planning SOPs. Identify what SOPs will be created for this project in the table below.

SOP	Procedure available (Y or N)	Indicate what this SOP covers
Overall process procedure	Y or N	If no, indicate why. If yes, indicate location of SOP
Accidental release (spill or leak), and accidental exposure	Y or N	If no, indicate why. If yes, indicate location of SOP
Other	Y or N	If no, indicate why. If yes, indicate location of SOP

7. Anticipated Wastes and Disposal Methods. Please include waste disposal methods in your SOPs. Guidance can be provided by clicking [here](#) or calling ext. 35755.

Anticipated Wastes	Incompatibles	Disposal Methods
Chemical Name	Indicate incompatible substances with wastes	Indicate disposal methods
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8. Identify what training will be provided and how it is documented (*If a toxic material is used you must provide emergency-specific training for it).

Training	Training provided (Y or N)	If no, indicate why

Chemical-specific	Y or N	Describe training and how it is documented.
Equipment-specific	Y or N	Describe training and how it is documented.
Process-specific	Y or N	Describe training and how it is documented.
Emergency-specific	Y or N	Describe training and how it is documented.
Other	Y or N	Describe training and how it is documented.

9. **Process Review: The Principal Investigator or Supervisor of the Lab should review this sheet before work may proceed.**

Name of Supervisor: _____

Position: _____

Signature: _____

Date: _____