APPENDIX B

EQUIPMENT/PHYSICAL HAZARD SOP GENERAL FORMAT

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Equipment/Physical Hazard SOP | | | | | |
| **Equipment Name:**  **Principal Department & Location:**  **Other Information:** | | | |  | |
| Identified Health and Physical Safety Hazards: | | | | | |
| Respiratory/Nuisance Dust Hazards  Flying Debris/Eye Hazards  Chemical Splash Hazards  Cut/Laceration Hazards  Point of Operation/Nip/Pinch Hazards | | | Rotating Parts/Entanglement Hazards  Noise Hazards  Electrical Hazards  Other (describe): | | |
| Hazard Control Strategies: | | | | | |
| **Primary Engineering Controls:**  Guarding/Shielding | Describe: | | | | |
| **Other Engineering Controls**  Ventilation  Interlocks  Other: | Describe: | | | | |
| **Administrative Controls:**  Training  Signage  Other | Describe: | | | | |
| **PPE (check all that apply):**  Safety glasses  Chemical goggles  Face Shield  Apron/Lab Coat  Gloves/Hand Protection  Ear plugs/muffs  Other: | Describe: | | | | |
| **Emergency Controls:**  Chemical Spill Kit  First Aid Kit  Communications  Fire Extinguisher  Emergency Shower/Eye Wash  Emergency Power Kill Switch | | | | | |
| SOP Completed By: | | | | | |
|  | |  | | |  |
| Name | | Signature | | | Date |