APPENDIX B

EQUIPMENT/PHYSICAL HAZARD SOP GENERAL FORMAT

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| 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 |