Applicant/JBK Ref No.:	Inspector:
Premise:	Date:
Principal Investigator:	Time:

Check ($\sqrt{\ }$) in the appropriate box that best describes the laboratory in which work will be performed. **Laboratory Facilities** Yes No NA **Details / Comment** Is a universal biohazard symbol for BSL 2 posted at the entrance of the laboratory? Do the sign include name, and phone number of the laboratory supervisor or other responsible personnel? 2. The design of the facility should be such that laboratory activities are separated from common areas (examples offices and pantry) Is a dedicated hand basin of the hands-free 3. operation type provided within each laboratory? 4. Is furniture in the laboratory capable of supporting anticipated loads and uses? Are spaces between benches, cabinets and 5. equipment accessible for cleaning? Are bench tops impervious to water and 6. resistant to heat, organic solvents, acids, alkalis, and other chemicals? 7 Is furniture including bench tops in the laboratory covered with a non-porous material that can be easily cleaned? .8. If windows are present, is it closed at all times? 9. Is an autoclave for pre-treatment of laboratory wastes is available in the contained facility? 10. Is an eyewash fountain is readily available in the laboratory? 11. Is an effective integrated pest management program in place and managed appropriately? 12. Are laboratory floors smooth, easy to clean and resistant to chemicals? 13. Does the ventilation in the laboratory have

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	directional air flow into the laboratory areas?				
14.	Is there a good housekeeping in the laboratory?				
В.	Safety Equipment	Yes	No	NA	Details / Comment
15.	Is there first aid kit available?				
16.	Is there a Class II biological safety cabinet in the laboratory, certified annually?				
17.	Is the BSC suitable located, away from door and air vent?				
18.	Is the BSC free of equipment or supplies that can block the air grills and disrupt proper airflow?				
19.	When lab personnel use vacuum lines with bio hazardous materials, are they protected with High Efficiency Particulate Air (HEPA) filters?				
20.	Is equipment for use or storage of bio hazardous materials (i.e. refrigerator, freezers) labelled with biohazard symbol?				
21.	Is GM/LMOs are kept separately from non GM?				
22.	Is there a fume hood for working with hazardous chemicals?				
C.	PPE (Personal Protective Equipment)	Yes	No	NA	Details / Comment
23.	Are suitable PPE available relevant to the hazard on the laboratory and used by laboratory personnel?				
24.	Are respiratory mask available for aerosol generating infectious work?				
25.	Are covered shoes/foot cover used in the lab?				
D.	Work Practices				
26.	Is there any bio hazardous materials handled in the laboratory?				
27.	Do personnel wash their hands before leaving the lab?				
28.	Are mechanical pipetting devices used?				
29.	Is there a signage available for prohibiting from eating, drinking, smoking, handling contact lenses, applying cosmetics, and storing food for human consumption in the lab?				
30.	Are work surfaces decontaminated with an effective disinfectant on completion of work				

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	especially after spills of splashes of bio hazardous materials?		
31.	Is a sharp bin available for disposal of and all syringes /needles/ sharps?		
32.	Are re-usable sharps properly cleaned and disinfected?		
33.	Is there a biological spill kit available?		
34.	Are all wastes that are contaminated with bio hazardous materials autoclaved or decontaminated?		
35.	Have all personnel been provided information about hazards and risk about their work activity?		
36.	Are laboratory wastes segregated into dedicated waste bins and labelled properly?		
37.	Are suitable chemical disinfectant used for inactivating liquid waste?		
38.	Is a medical surveillance program in place for the laboratory personnel? (example Hepatitis B vaccination)		
39.	Is there a Laboratory Biosafety Guidelines or Biosafety Manual in the laboratory?		
40.	Are the lab specific Biosafety procedures incorporated into the Laboratory biosafety Guidelines or Biosafety Manual?		
41.	Are needle-locking syringes of safety hypodermic needles used when appropriate?		
42.	Are bio hazardous materials transported in covered containers to prevent leakage?		
43.	Is there any incident/accident/laboratory exposure reporting system in place?	′	
44.	Is there an ERP in place?		
45.	Is medical follow-up obtained if appropriate?		
46.	Are animals and plants not associated with the work prohibited from the laboratory?		
47.	Are any experiments involving animals and plants carried out in the laboratory?		

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E.	Records and Documents For :	Yes	No	NA	Details / Comment
48.	Procurements and transfers of GMO/LMO				
49.	Biological material / LMO inventory				
50.	SOPS for contained use activity				
51.	Staff training and competency				
52.	Equipment maintenance				
53.	Decontamination and validation				
54.	Incident/accident/laboratory exposure				
, todis	onal comments/observations and recommendation				

Inspector's signature:

Date: