

SAFETY QUESTIONNAIRE PROCEDURE

PURPOSE AND SCOPE

Research in the Department of Chemical Engineering requires the use of potentially dangerous equipment, materials and chemicals. The Safety Questionnaire encourages the researcher to review the hazards of the project and how one will accommodate these hazards while maintaining a safe work environment in the laboratory.

The Department Safety Committee, whose mandate is to assist in ensuring a safe work environment, requires that the Safety Questionnaire be processed in two stages: The **PRELIMINARY STAGE** and the **CERTIFICATION STAGE**.

PRELIMINARY STATE

1. Fill in all the information requested in the Safety Questionnaire. If necessary, ask the Laboratory Safety Officer for assistance. Attach a copy WHIMIS certificate.
2. Give the Safety Questionnaire to your research director for content approval and signature (Page 1). Your research director is responsible for the safety of the project.
3. Submit the Safety Questionnaire to the Lab Safety Officer. After the Lab Safety Officer has signed it, ensure that he/she enters the Preliminary Stage completion date on the Laboratory Occupancy Form.
4. Give the Safety Questionnaire to the Department Safety Coordinator, Mr. Frank Caporuscio. He will process the questionnaire through the Safety Committee.
5. When the Safety Questionnaire is returned to you, check it for comments and recommendations that you are expected to fulfill. For clarification of the comments or recommendations check with the originator.
6. Obtain Material Safety Data Sheets (MSDS) for all chemicals that you plan to use before proceeding to the Certification Stage.

CERTIFICATION STAGE

1. Ensure that you have complied with all the comments and recommendations on your Safety Questionnaire, and that your equipment has not been significantly altered since the form was completed.
2. Ensure that all is prepared to demonstrate the experimental procedure outlined in your Safety Questionnaire.
3. Arrange to have your Lab Safety Officer, a Department Safety Committee member and your research director (or his delegate) observe the demonstration. Since the research director is responsible for the safety of the project, he must be invited to observe a demonstration of the experimental procedure and equipment operation.
4. Demonstrate to them that the experimental procedure is safe. If required, make changes to the experimental procedure.
5. Ensure that the Safety Committee member and your research director sign the certification stage of the Safety Questionnaire and that the Lab Safety Officer enters the certification date on the Lab Occupancy Form.
6. Make a copy of your Safety Questionnaire and give the original to the Department Safety Coordinator, Mr. Frank Caporuscio, for filing.
7. Proceed with your experiments.

Safety Questionnaire

Researcher: _____ Status (eg. MSc I): _____

McGill ID: _____ E-Mail: _____

Laboratory: _____ Office: _____ Tel.(Home): _____

Research Director: _____ Tel. (Work): _____

Title of Research Project: _____

WHMIS Training: No ___ Yes ___ Date Completed: ___/___/___

Expected Start & End dates for experiments: ___/___/___ TO ___/___/___

Has anyone in your research group used this procedure before ? If so, please indicate who & when below:

Researcher	Approximate Date of Experiments

I certify that all the information in this safety questionnaire is true to the best of my knowledge. Another questionnaire will be submitted if there are significant changes to equipment or experimental procedures.

Researcher's Signature: _____ Date: ___/___/___

Approval Flow Sheet

Preliminary Stage

We, the undersigned, have read the questionnaire and deem the procedure ready for the certification stage under the condition that any comments or recommendations will be taken into account by the above named researcher.

Yr M D

Research Director: _____ Date: ___/___/___

Lab Safety Officer: _____ Date: ___/___/___

Safety Committee Member: _____ Date: ___/___/___

Student: _____ Date: ___/___/___

Professor: _____ Date: ___/___/___

Certification Stage

I, the undersigned, certify that a demonstration of the experimental procedure and equipment operation has been performed in my presence by the researcher, and that both appear safe.

Safety Committee Member: _____ Date: ___/___/___

Research Director: _____ Date: ___/___/___

Experimental Procedure

Briefly outline your experimental procedure and apparatus. This should include a schematic diagram. Please be sure to do this **NEATLY**, as it will be returned to you if this is not the case.

Hazards / Precautions

In the table below, check the appropriate box for each hazard class, to classify the severity of the hazard in your experimental procedure. If any box is checked other than **NONE**, list the hazard in the space below and on the other side of the page, if necessary, and describe how you propose to handle the hazard as well as the safety precautions you will take.

Hazard Class	Potential Hazard Rating		
	None	Moderate	Severe
Flammable Gases, Liquids or Solids			
Toxic and/or Corrosive Gases or Solids			
Toxic and/or Corrosive Liquids			
High or Low Temperatures			
High Pressures Or Reduced Pressures (Vacuum)			
Electromagnetic Interference or High Energy Laser			
Steam			
Radioactive Substances			
Voltages >115 V or Currents >15 amps			
Pathogenic Organisms			
High Speed Rotating Machinery			
Dangerous Chemical Reactions			
Other Hazards			

Potential Hazard Description

Hazard Handling and Safety Precautions

CONTINUE ON THE OTHER SIDE IF NECESSARY