ACCESS/POLICY
☐ F ESR/SAF
☐ F Signs and Placards
☐ F Lead Experimenter
☐ F Experimental Floor

Locate and discuss contents, requirements and expectations for experimental and/or assembly work.
Locate and discuss all posted signs and placards (Hazard Info Placard, contact info, PPE)
Lead Experimenter must ensure that safety, training, and reporting requirements are completed.
No access to the experimental floor from the lab unless authorized (GERT).

EMERGENCIES
☐ F Contact List
☐ F Emergencies
☐ F Eye wash/shower
☐ F Spill Station

Locate and discuss how and when to contact a Floor Coordinator (x5046), the Control Room (x2550), Support Lab Staff and ESH.
Discuss emergency response and accountability responsibilities. Locate assembly, shelter-in-place areas, exits, and fire alarm/pull boxes.
Locate eye wash/shower.
Locate spill control station.

GENERAL SAFETY
☐ F User Authorization
☐ F Activity Cards
☐ F Security
☐ R Food/drinks
☐ A Chemicals
☐ A Computer Use
☐ R Moving/Modifying Equip
☐ A Hotplates
☐ A Cleaning Glassware
☐ E Lifting
☐ F Electrical Work
☐ A Cryogen Use
☐ A Gas
☐ A Comp Air/N2 Supplies

User is authorized to operate ONLY the equipment the user has been trained on - review operation and hazards.
Fill out an activity card if you’re leaving your equipment unattended. It must be clearly marked with name, contact info, dates and a brief description.
Always keep laboratory doors closed and locked. Do not allow “piggy backing”.
No food or drink allowed in lab.
Discuss use, labeling, storage, disposal and transportation of chemicals.
Do not install any computer software on lab computers.
Do not modify, reconfigure, move, borrow or rearrange any equipment without first consulting with lab CSM.
Do not leave hot plates unattended when energized unless usage case is authorized by the CSM or ESR/SAF.
Users are responsible for washing/rinsing (DI water)/drying all glassware used. Return glassware to the cabinet clean and dry. Do not remove glassware from the lab. Discuss use, replenishment and disposition.
If lifting objects <30 lbs, keep weight close to the body (between shoulders and knees); If lifting objects =/>30 lbs, use lifting and/or mechanical aids or two-person lifts.
No work on exposed electrical components without appropriate procedures and electrical training. Equipment must be EEI inspected BEFORE energized.
For cryogen/cryostat use, discuss fill operations, ODH, demonstrate use, wear PPE (eye and skin protection).
Show location, operations, use, storage of gas (including cabinets if any), emergency response actions.
Show location of taps. N2 taps must not be left open without flow control. Max N2 flow 20 SCFM, pressure of 30 psi.

WASTES
☐ F Hazardous waste
☐ F Waste Location

Do not generate hazardous wastes without consulting with lab staff (CSM).
Show relevant waste collection area and discuss proper disposal (sharps, razor blades, pipette tips, broken glass, hazardous waste & the Satellite Accumulation Area/SAA).

CLOSE OUT
☐ F Housekeeping
☐ F Samples (Store/Ship)

All equipment, glassware, chemicals, waste are cleaned up, put away and/or properly disposed of. Shutdown all equipment after use and checkout with staff.
Discuss with lab staff whether to store samples or ship back to home institution and confirm before leaving.
Instructions to Trainer: SAF or ESR #

(1) Provide training for each checkbox to each lab user. If a checkbox does not apply, cross out that line or write N/A. User must be listed on the SAF and/or ESR. Complete information below. Training is valid for 2 years for this lab only. (2) Send completed forms to NSLS-II Training, Building 745, immediately after all users listed on the SAF (who plan to use this lab) have been trained. Training will be entered in the user's training history.

Instructions to User:

Ensure that your name and life number are correct. Sign below that you understand and agree to comply with the instructions provided to you in this training.

Trainer: Place √ next to your name:

☐ Ali, Christine
☐ Byrnes, James
☐ Farquhar, Erik
☐ Hollmers, Ryan
☐ Soares, Alexei
☐ Stojanoff, Vivian

Print User Name | Life # | User Signature | Date | Trainer's Signature | Training Entered
---|---|---|---|---|---

[A] Applicable to this lab  [E] Determined by ESH  [F] Facility requirement for ALL labs  [R] Required for all labs