Environmental Health and Safety

The Department of Environmental Health and Safety is required to collect information regarding the use of “OSHA Regulated Chemicals”.

Please check the boxes below for each chemical you use in your laboratory and fill out the “USE QUESTIONNAIRE” for each chemical on the list you use. The information will be used to determine if there is an exposure probability and to determine if air monitoring is required.

PLEASE CHECK BELOW, WHICH REGULATED CHEMICALS ARE USED IN YOUR LAB. IF YOUR LAB DOES NOT UTILIZE ANY OF THESE CHEMICALS CHECK THE “DO NOT USE” BOX.

<table>
<thead>
<tr>
<th>Chemical</th>
<th>Chemical</th>
</tr>
</thead>
<tbody>
<tr>
<td>4-Nitrophenyl</td>
<td>Vinyl Chloride</td>
</tr>
<tr>
<td>Alpha-Naphthylamine</td>
<td>Inorganic Arsenic</td>
</tr>
<tr>
<td>Methyl Chloromethyl ether</td>
<td>Lead</td>
</tr>
<tr>
<td>3,3’-Dichlorobenzidine</td>
<td>Cadmium</td>
</tr>
<tr>
<td>Bis-Chloromethyl ether</td>
<td>Benzene</td>
</tr>
<tr>
<td>Beta-Naphthaloylamine</td>
<td>1,2-Dibromo-3-Chloropropane</td>
</tr>
<tr>
<td>Benzidine</td>
<td>Acrylonitrile</td>
</tr>
<tr>
<td>4-Aminodiphenyl</td>
<td>Ethylene Oxide</td>
</tr>
<tr>
<td>Ethylenimine</td>
<td>Formaldehyde</td>
</tr>
<tr>
<td>Beta-Propiolactone</td>
<td>Methylendianiline</td>
</tr>
<tr>
<td>2-Acetylaminochloro-sulfonate</td>
<td>1,3-Butadiene</td>
</tr>
<tr>
<td>4-Dimethylaminoazo-benzene</td>
<td>Methylene Chloride</td>
</tr>
<tr>
<td>N-Nitrosodimethylamine</td>
<td>Chromium (VI)</td>
</tr>
</tbody>
</table>

☐ OUR LAB DOES NOT USE REGULATED CHEMICALS

PI Name: __________________________________________

Location (Building/Room #): __________________________________________

Phone: __________________________________________

E-mail: __________________________________________

DEPT: __________________________________________

PLEASE MAIL THE COMPLETED FORM TO:
DEPARTMENT OF ENVIRONMENTAL HEALTH AND SAFETY,
SERVICE BUILDING, FIRST FLOOR, LC: 7227

OR FAX TO 368-2236.

PLEASE COMPLETE ALL INFORMATION!

Date Revised: 04/06/2012
REGULATED CHEMICAL-USE QUESTIONNAIRE
(Please fill out one form for each regulated chemical you use)

PI Name: __________________________________________________________

Lab Location: Building ______________________ Room ________________
Phone: ___________________________ Department: ______________________

Regulated Chemical in Use: ___________________________________________

1. Please estimate you frequency of use of the regulated chemical in any quantity. (circle one):

Frequently (Daily to weekly) Occasionally (Monthly) Rarely <12 times/year

2. What concentration of this solution is used in your lab?

______________________________________________________________

3. Frequency of chemical hood use with regulated chemical usage. (circle one)

Always Sometimes Never

4. If you answered “never” or “sometimes” to #3, please describe briefly the circumstances which prevent chemical hood use at all times.

______________________________________________________________

______________________________________________________________

5. Estimate in ml the amount of regulated chemical used in your lab per week (choose one):

0-10 ml 11-100 ml >100 ml

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