

The University of Texas at Austin Laser Safety Program

Form UTLaser2

Laboratory Laser Survey

Yes-No-N/A

**1. Labels and Signs**

Is the correct warning label affixed to the laser? \_\_\_\_\_

Are signs posted clearly near the laser \_\_\_\_\_

Is the room posted? \_\_\_\_\_

Is a label, sign, or warning posted near the aperture? \_\_\_\_\_

Is a label or warning posted near an interlock? \_\_\_\_\_

**2. Engineering Controls**

Does each laser have a keyswitch or code? \_\_\_\_\_

Is appropriate Safety eyewear provided and present? \_\_\_\_\_

Is the eyewear permanently and prominently labeled  
for optical density and wavelength? \_\_\_\_\_

Do Safety Covers have interlocks? \_\_\_\_\_

Are latches or interlocks provided to restrict access  
to the Controlled Area? \_\_\_\_\_

Are all warning devices functioning within design  
specifications? \_\_\_\_\_

Are any items in or near beam paths which could cause  
specular reflections? \_\_\_\_\_

Is a physical barrier present at the Controlled Area entry? \_\_\_\_\_

**3. Procedural Controls**

Is each laser registered properly? \_\_\_\_\_

Is a Laser Safety Supervisor present? \_\_\_\_\_

Is access to the Controlled Area restricted? \_\_\_\_\_

Does each person have required training? \_\_\_\_\_

Is the SOP for the laser present at the control? \_\_\_\_\_

Are curtains in place and used (If required)? \_\_\_\_\_

Is documentation available? \_\_\_\_\_