

**Complete and return copies by April 29, 2005, to:**

- College Dean and**
- OEHS, 1314 Kinnear Road, Rm. 210, CAMPUS**

**Department Summary Form  
Lab Standard Survey**

**Date:** \_\_\_\_\_

Department: \_\_\_\_\_

Department Chair: \_\_\_\_\_

Department Chemical Hygiene Officer or  
Chemical Hygiene Committee Chair: \_\_\_\_\_

1. Number (head count) of faculty with affected laboratories \_\_\_\_\_
2. Number of faculty who have received Lab Standard Training at OSU?  
Answered Yes to #1 Faculty And Principal Investigator Lab Standard Survey Form \_\_\_\_\_
3. Number of laboratory rooms:  
Sum of #3 Faculty and Principal Investigator Lab Standard Survey Form \_\_\_\_\_
4. Number of faculty research groups with completed Chemical Hygiene Plans?  
Answered Yes to #4 Faculty and Principal Investigator Lab Standard Survey Form \_\_\_\_\_
5. Number (head count) of affected lab employees (exclude faculty)?  
Sum of #5 Faculty and Principal Investigator Lab Standard Survey Form \_\_\_\_\_
6. Number (head count) of affected lab employees (exclude faculty) who have received  
Lab Standard Training at OSU?  
Sum of #6 Faculty and Principal Investigator Lab Standard Survey Form \_\_\_\_\_
7. Who provides Lab Standard training for your faculty?  
\_\_\_\_\_  
\_\_\_\_\_
8. Who provides Lab Standard training for your lab employees?  
\_\_\_\_\_  
\_\_\_\_\_
9. Number of lab related injuries or illnesses in 2004?  
Sum of # 8 Faculty and Principal Investigator Lab Standard Survey Form \_\_\_\_\_
10. Number of lost workdays due to lab related injuries or illnesses in 2004?  
Sum of # 9 Faculty and Principal Investigator Lab Standard Survey Form \_\_\_\_\_
11. Number of faculty conducting research with biohazards? \_\_\_\_\_  
Answered Yes to #10 Faculty and Principal Investigator Lab Standard Survey Form \_\_\_\_\_