Department Name: _________________________________________________
Implementation Coordinator: ______________________________________

Place a checkmark (✓) by those engineering controls that your department uses to protect employees. In the blanks that follow, write a brief description and the location where employees can find the control device.

Handwashing (water or alternate) facilities
- Description: __________________________
- Location: __________________________

Needle Safety Devices
- Description: __________________________
- Location: __________________________

Sharps Containers
- Description: __________________________
- Location: __________________________

Splash guards
- Description: __________________________
- Location: __________________________

Resuscitation masks
- Description: __________________________
- Location: __________________________

Biosafety cabinets
- Description: __________________________
- Location: __________________________