

UCSF Laser Use Application

Non-Human / Non-Clinical Use

Use of Class IV and IIIB lasers at UCSF (non-human use) requires approval from the UCSF Office of Environmental Health and Safety. The responsibility for safe laser use and procedural compliance is under both the PI and the Lab Member who oversees laser safety. The lab member overseeing laser safety may have other laboratory safety responsibilities such as radiation safety. Please provide the following information for each laser.

Return the form to your EH&S DSA (Department Safety Advisor) at Box 0942.

GENERAL INFORMATION (Print)

PI _____ Dept _____

Office Phone _____ Email _____

Laser / Lab Safety Contact _____

Title/Position _____

I have read and understand the Laser Safety Manual regarding laser safety and my responsibilities as stated.

Signature _____ Date _____

LASER INFORMATION

Location _____ Type (Diode, Dye, Gas, etc.) _____

Manufacturer: _____ Model: _____

Serial # _____ Excitation Mechanism: _____

Time-dependent operating properties: (CW, pulse, mode-locked) _____

If CW, power in watts _____

If pulsed maximum capable energy (joules) _____

minimum pulse duration (sec) _____ maximum pulse frequency (per sec) _____

operating wavelengths (nm) _____

Other notes _____

Laboratory Laser Survey

Answer: Yes, No, N/A

Labels and Signs

- Is the correct warning label affixed to the laser? _____
- Are signs posted clearly near the laser? _____
- Are all accesses to the room properly posted? _____
- Is a label, sign, or warning posted near the aperture? _____
- Is a label or warning posted near an interlock? _____

Engineering Controls

- Does each laser have a key switch or entry password? _____
- Is appropriate safety eyewear provided and present? _____
- 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? _____

Procedural Controls

- Is each laser authorized? _____
- Is access to the nominal hazard zone restricted? _____
- Does each person have required training? _____
- Is the SOP for the laser present at the control? _____
- Are curtains up and used (if required)? _____
- Is documentation available? _____