國立高雄師範大學○○系/中心○○實驗室/實習工廠特定化學物質作業每日作業檢點紀錄表

檢查月份： 年 月

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 檢點項目 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 |
| 1. 警報裝置之性能是否良好 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2. 除卻危害之必要藥劑、器具是否備妥 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3. 避難梯是否設置兩處且其中一處至於室外 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 4. 避難梯是否保持通暢無阻 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 5.洗眼、沐浴、嗽口、更衣及洗衣或緊急沖淋等設備是否均已設置且隨時可用狀況 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 6. 所有特定化學物質是否有危害標示並備置安全資料表及危害性化學品清單 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 7. 是否發給每位特化作業勞工合格有效之呼吸護具、防護眼鏡、防護衣、防護手套、防護鞋及塗敷劑 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 8. 防護具是否均保持其性能及清潔 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 9.整體換氣及裝置氣罩、導管、排氣機及空氣清靜裝置腐蝕、凹凸或其他損害之狀況及程度 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 10.整體換氣裝置之排氣機是否故障 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 11.密閉設備之內面及外面有否顯著損壞、變形及腐蝕 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 12.安全閥及緊急遮斷裝置與其他安全裝置之性能是否良好 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **檢查人員** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **備註** |  |

備註：

實驗場所負責人：

單位主管：

1. 檢查結果：正常打V，異常打X，如無此項檢點項目請以”─”示之，異常時，請立即報修。
2. 檢查記錄表格請放置機械及設備旁。
3. 表格自行保存三年，副本送環安組備查。