

LASER HAZARD EVALUATION FORM

GENERAL INFORMATION

PRINCPAL INVESTIGATOR		LASER S	SAFETY OFFICER	
LASER / LASER SYSTEM LC	OCATION			
LASER TYPE		LASER MANUFACTUR	RER	
MODEL NO		SERIAL NO		
WAVE LENGTH / WAVE LE	ENGTH RANGE (nm	n)	MAX/AVE P	OWER (W)
PULSED yes 🗖 no 🗖	RATE (HZ)	DURA	TION (s)	POWER (J)
BEAM DIAMETER		BEAM DIVERGENC	E (mRAD)	
		LASER HAZA	RDS	
		(OD)NOMINAL HAZ)
CHEMICAL HAZARDS COOLANTS SOLVENTS GASES		OPTICAL HAZARDS DISCHARGE TUBES UV/ WELDING VISIBLE IR	0000	LASER GENERATED HAZARDS AIR CONTAMINANTS CHEMICAL FUMES METALLIC FUMES METALLIC DUSTS
OTHER				INIETALLIC DOSTS
VENTILATION PROVIDED LOCAL EXHAUS GENERAL VENTILATION OTHER		NO \square	FIRE HAZARDS IMPROPER BEAM ENCLOSURES COMBUSTIBLE MATERIALS GAS / VAPOR IGNITION ELECTRICAL CIRCUITS	
ELECTRICAL HAZARDS POWER SOURCES EXPOSED WIRING MISSING COVERS STORED ENERGY (CAPACITORS, ETC)	000 0	PROCEDURES ESTABLISHE YES NO NO		COMPRESSED GAS CYLINDERS PROPERLY STORED RESTRAINED REQUIRED SIGNAGE NO MISSING CAPS
		HAZARD CONTROL	MEASURES	
SIGNAGE REQUIRED DANGER CAUTION NOTICE		PATH COVERS	LASERS IN AREA	EYE PROTECTION (OD)
	BARRIERS	CURTAINS	OTHER PPE	
TRAINING PROVIDED BY LSO OPERATOR MANUFACTOR	ALIGNMENT PROCEDURES PRESENT YES NO		STANDARD OPERATING PROCEDURES ESTABLISHED YES NO	
COMPLETED BY:		ı	DATE:	