

EMPLOYEE TRAINING RECORD

TRAINING TITLE Protecting Yourself from Chemical Exposures

KEY TEACHING POINTS

KNOWLEDGE

- Know the location of MSDS.
- When using a chemical, read the label and the material safety data sheet (MSDS) to learn:
 - What health problems can result from exposure
 - What are the routes of exposure (inhaling, swallowing, skin and eye contact) are most likely with this chemical

PROTECTIVE EQUIPMENT

- Read the MSDS to see what personal protective equipment (PPE) will protect you.
- Make sure the PPE you select is in good condition and fits properly.
- Remove and dispose of PPE carefully to prevent recontamination.

GOOD HYGIENE

- Keep food, drinks, cigarettes, cosmetics, purses, bags, and street clothing out of work areas where chemicals are used.
- Wash your hands and face thoroughly after working with chemicals.
- Don't siphon chemicals using your mouth.

SAFE HANDLING

- Inspect containers regularly and report any cracks, leaks, or missing labels.
- Keep containers closed when not in use.
- Remove from the chemical's container only the amount you need for the job.
- Use required ventilation to remove chemical vapors.
- Store and use chemicals away from substances and conditions that could cause hazardous reactions.

EMERGENCY RESPONSE

- If something should spill:
 - Act fast after chemical contact.
 - Get to fresh air after inhalation.
 - Flush skin or eyes with water for a minimum of 15 minutes after contact.
 - Get medical attention after swallowing a chemical.
- Immediately contact a trained responder or supervisor.
- If necessary, take the emergency evacuation route you have been assigned.

TEST

QUESTION	ANSWERS	
	TRUE	FALSE
1 As long as you know what is in a container, a label is not required.		
2 It is OK to siphon gasoline from a tank but not other chemicals.		
3 Flush skin and/or eyes for a minimum of 15 minutes after exposure.		
4 Report all spills to your supervisor immediately		
5 Know where MSDS are located and read them before using a chemical.		
EMPLOYEE'S NAME	EMPLOYEE'S SIGNATURE	DATE
INSTRUCTOR'S NAME	INSTRUCTOR'S SIGNATURE	DATE

1. False 2. False 3. True 4. True 5. True