



NRAO Department of Environmental Safety & Security PPE Hazard Assessment Form

Use a separate sheet for each work area
Perform a JSA/JHA to assess tasks for PPE

Site: _____ Work Area/Space: (Be specific, not entire building) _____ _____ Assessment Conducted By: _____ Assessment Date: _____	Hazards Key A. Cut B. Abrasion C. Burn D. Fall E. Impact, Falling Object F. Splash G. Puncture H. Irritating chemicals I. Bump J. Impact, Flying Particles K. Electric Shock L. Freeze M. Inhalation N. Intense light O. Entrap P. Noise Q. Slip/Trip R. Strain S. Other: _____	PPE Required Key a. Apron b. Arc Flash c. Coveralls d. Electrical protection e. Face shields f. Gloves g. Protective sleeves h. Puncture resistance i. Raingear j. Respirator k. Thermal protection l. Welding leathers m. Welding shield n. Chemical Goggles o. Ear Muffs/Plugs p. Hair net or soft cap q. Hard Hat r. Harness s. Leggings or chaps t. Safety Glasses u. Shoes / Boots v. Other: _____	Body Part Key i. Eyes ii. Face iii. Head iv. Hand/Fingers v. Foot/Toes vi. Body/Skin vii. Body/Trunk/Back viii. Lungs/Respiratory ix. Ears/Hearing x. Arms xi. Legs xii. Other: _____
Work Conducted in this Space (List ALL)	Potential Hazards	PPE Required	Body Part Affected
Example – Remove Trash	A, E, Q, R	f, u	iv, v, vii

Return the Completed Form to: ES&S Site Safety Division
Copy to: NRAO ES&S Admin Support – Diana Torres: dltorres@nrao.edu