



## Safety Walk-around Checklist: Physician Office Practice

Office practices must provide a safe environment for all who enter their practice including patients, family, vendors and staff. Develop a safety plan that describes how to maintain a safe environment. Include the role of the physicians and employees. Encourage physicians and employees to report unsafe or potentially hazardous conditions. Immediately remedy high risk situations.

Use this checklist to conduct walk-around inspections on a regular basis to identify potential risks. Correct identified risks.

	Yes	No
<b>Grounds and Parking Area</b>		
Snow removed on a consistent basis	<input type="checkbox"/>	<input type="checkbox"/>
Icy areas consistently treated	<input type="checkbox"/>	<input type="checkbox"/>
No uneven surfaces, potholes, cracks, debris	<input type="checkbox"/>	<input type="checkbox"/>
Adequate lighting to minimize shadows	<input type="checkbox"/>	<input type="checkbox"/>
Appropriate Signage:		
Parking	<input type="checkbox"/>	<input type="checkbox"/>
Entrances	<input type="checkbox"/>	<input type="checkbox"/>
Exits	<input type="checkbox"/>	<input type="checkbox"/>
Handicap	<input type="checkbox"/>	<input type="checkbox"/>
Other: Specify		
	<b>Yes</b>	<b>No</b>
<b>Office Setting</b>		
Equipment or obstacles in walkway	<input type="checkbox"/>	<input type="checkbox"/>
Floors clean	<input type="checkbox"/>	<input type="checkbox"/>
Wet floor signs as needed	<input type="checkbox"/>	<input type="checkbox"/>
Stairwells:		
Handrails firmly attached	<input type="checkbox"/>	<input type="checkbox"/>
Well lighted	<input type="checkbox"/>	<input type="checkbox"/>
Waiting area clean	<input type="checkbox"/>	<input type="checkbox"/>
Restroom:		
Clean	<input type="checkbox"/>	<input type="checkbox"/>
Handrail	<input type="checkbox"/>	<input type="checkbox"/>
Call bell	<input type="checkbox"/>	<input type="checkbox"/>
Signage if an unaffiliated provider shares space	<input type="checkbox"/>	<input type="checkbox"/>

Signage:		
Cover mouth	<input type="checkbox"/>	<input type="checkbox"/>
Hand hygiene for cough and colds	<input type="checkbox"/>	<input type="checkbox"/>
No Confidential information visible	<input type="checkbox"/>	<input type="checkbox"/>
Computer screens not visible	<input type="checkbox"/>	<input type="checkbox"/>
All signage: plain language, appropriate	<input type="checkbox"/>	<input type="checkbox"/>
Other:		
	<b>Yes</b>	<b>No</b>
<b>Exam Rooms</b>		
Clean	<input type="checkbox"/>	<input type="checkbox"/>
Needles and syringes locked up	<input type="checkbox"/>	<input type="checkbox"/>
Needle disposal container, appropriately mounded and not overfilled	<input type="checkbox"/>	<input type="checkbox"/>
No hazardous products accessible to patient	<input type="checkbox"/>	<input type="checkbox"/>
Personal protective equipment available	<input type="checkbox"/>	<input type="checkbox"/>
Patient chairs: no wheels, good condition	<input type="checkbox"/>	<input type="checkbox"/>
Exam table:		
Wheels lock	<input type="checkbox"/>	<input type="checkbox"/>
Cushion intact	<input type="checkbox"/>	<input type="checkbox"/>
Other:		
	<b>Yes</b>	<b>No</b>
<b>Hazardous Material: Infection Control</b>		
Hazardous material labeled and properly stored	<input type="checkbox"/>	<input type="checkbox"/>
Spill kit available	<input type="checkbox"/>	<input type="checkbox"/>
SDS available	<input type="checkbox"/>	<input type="checkbox"/>
Personal Protective Equipment (PPE) available	<input type="checkbox"/>	<input type="checkbox"/>
Sinks available for hand washing	<input type="checkbox"/>	<input type="checkbox"/>
Alcohol-based hand sanitizer available, container full	<input type="checkbox"/>	<input type="checkbox"/>
Table top sterilizer:		
Logs	<input type="checkbox"/>	<input type="checkbox"/>
Biological indicators	<input type="checkbox"/>	<input type="checkbox"/>
Chemical indicators	<input type="checkbox"/>	<input type="checkbox"/>
Other:		
	<b>Yes</b>	<b>No</b>
<b>Equipment Safety: Electrical Hazards</b>		
Office equipment properly functioning	<input type="checkbox"/>	<input type="checkbox"/>
Preventative maintenance log available and current	<input type="checkbox"/>	<input type="checkbox"/>
Out of service equipment properly stored and labeled	<input type="checkbox"/>	<input type="checkbox"/>
Oxygen cylinders upright and secured	<input type="checkbox"/>	<input type="checkbox"/>
Electrical cord safely stored	<input type="checkbox"/>	<input type="checkbox"/>

Electrical outlets have child safety plugs or are safety outlets	<input type="checkbox"/>	<input type="checkbox"/>
Extension cords not used in the practice	<input type="checkbox"/>	<input type="checkbox"/>
Other:		
	<b>Yes</b>	<b>No</b>
<b>Fire Safety</b>		
Elevators signage warning: Not to be used in a fire	<input type="checkbox"/>	<input type="checkbox"/>
Fire alarms in working order	<input type="checkbox"/>	<input type="checkbox"/>
Fire extinguishers:		
Accessible	<input type="checkbox"/>	<input type="checkbox"/>
Annual inspection	<input type="checkbox"/>	<input type="checkbox"/>
No Smoking signage in designated areas	<input type="checkbox"/>	<input type="checkbox"/>
Sprinkler system: log notes current inspection	<input type="checkbox"/>	<input type="checkbox"/>
Exits clearly marked	<input type="checkbox"/>	<input type="checkbox"/>
Emergency exit signs:		
Visible	<input type="checkbox"/>	<input type="checkbox"/>
Illuminated	<input type="checkbox"/>	<input type="checkbox"/>
Emergency lighting functional	<input type="checkbox"/>	<input type="checkbox"/>
Other:		
	<b>Yes</b>	<b>No</b>
<b>Medication Safety</b>		
Medication storage locked	<input type="checkbox"/>	<input type="checkbox"/>
Medication outdate log: monthly inspection	<input type="checkbox"/>	<input type="checkbox"/>
Outdated drugs	<input type="checkbox"/>	<input type="checkbox"/>
Medications with similar names and packaging stored separately	<input type="checkbox"/>	<input type="checkbox"/>
Medications with different routes stored separately	<input type="checkbox"/>	<input type="checkbox"/>
Hazardous chemicals stored separately from medications	<input type="checkbox"/>	<input type="checkbox"/>
Multi-dose vials labeled with use by date after opening	<input type="checkbox"/>	<input type="checkbox"/>
Refrigerator logs:		
Daily checks	<input type="checkbox"/>	<input type="checkbox"/>
Twice daily for vaccines	<input type="checkbox"/>	<input type="checkbox"/>
Vaccine log completed	<input type="checkbox"/>	<input type="checkbox"/>
Controlled substances:		
Double locked	<input type="checkbox"/>	<input type="checkbox"/>
Log current	<input type="checkbox"/>	<input type="checkbox"/>
Prescription pads secure	<input type="checkbox"/>	<input type="checkbox"/>
Other:		
	<b>Yes</b>	<b>No</b>
<b>Medical Emergencies</b>		
Emergency drug box/equipment log: monthly check	<input type="checkbox"/>	<input type="checkbox"/>

Breakaway lock on emergency drug box: intact	<input type="checkbox"/>	<input type="checkbox"/>
Staff confirms role in emergency plan	<input type="checkbox"/>	<input type="checkbox"/>
Other:		
Notes:		

Medical Mutual's "Checklists" are offered as reference information only and are not intended to establish practice standards or serve as legal advice. MMIC recommends you obtain a legal opinion from a qualified attorney for any specific application to your practice.