

Personal Protective Equipment Assessment Worksheet

Employer:	Location:
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Workplace/Department Assessed/Evaluated:	Date:
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Hazard(s) Assessed/Evaluated By:

Topic Description	Yes	No	Required Personal Protective Equipment
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Eye Hazards

Frontal and side impact			
Electrical arc			
Molten metal			
Chemical splash			
Injurious light/heat radiation			
Suspended particles			
Extreme hot/cold splash			
Other			

Face Hazards

Projectile impact			
Chemical splash			
Hot/cold splash			
Electrical arc			
Injurious heat radiation			
Other			

Personal Protective Equipment Assessment Worksheet *(continued)*

Topic Description	Yes	No	Required Personal Protective Equipment
Foot Hazards			
Falling objects			
Rolling objects			
Electrical contact			
Sole puncture			
Other			
Hand Hazards			
Skin absorption			
Severe abrasions			
Severe lacerations			
Chemical burns			
Thermal burns			
Extreme cold			
Puncture			
Other			
Head Hazards			
Bump contact			
Overhead falling objects			
Side flying projectiles			
Electrical contact			

Personal Protective Equipment Assessment Worksheet *(continued)*

Topic Description	Yes	No	Required Personal Protective Equipment
Hoods			
Hair enclosures			
Other			
Special Electrical Hazards			
Insulating blanket			
Hood			
Line hose			
Barrier			
Matting			
Cover			
Gloves			
Sleeves			
Other			
Fall Hazards			
Safety belts			
Lanyards			
Safety harness			
Lifelines			
Other			