UNIVERSITY OF ROCHESTER ENVIRONMENTAL HEALTH & SAFETY

| Policy No.: FS037 | Approved by: Mark Cavanaugh | | |
|---|---------------------------------|--|--|
| Title: Fire Blanket Annual Inspections | Date: 6/30/2022 | | |
| Revision No.: 2 | Page 1 of 2 | | |
| Prepared by: Justin Carlson | Reviewed 6/30/22 – No changes. | | |
| EH&S Department Use Only: X Yes No | UR Website: X Public Restricted | | |

I. PURPOSE

This procedure establishes the steps required to inspect fire blankets annually.

II. PERSONNEL AFFECTED

Fire Safety Specialist Fire Safety Inspector II

III.DEFINITIONS – N/A

IV. RESPONSIBILITIES – N/A

V. PROCEDURES

- 1. Reference the blanket location on the inspection form (Appendix A)
- 2. Verify the blanket is unobstructed and visible.
- 3. Open the blanket container and remove the blanket.
- 4. Physically inspect that the blanket is in the container and in good shape for use (example: no holes, burn marks, frayed ends).
- 5. Inspect the container is not damaged or obstructed.
- 6. If there are no problems with the blanket or the container, indicate on the inspection form that the blanket passes inspection.
- 7. For hospital inspections, indicate on the annual inspection sticker located on the exterior of the blanket container (interior container door for operating room blankets) the year, date and initials of the inspector.
- 8. Complete a work order for any deficiencies noted.

VI. REFERENCES – N/A

VII. APPENDICES

Fire Blanket Inspection (Appendix A)

Located in i:fire/Blank Forms/Inspection Forms/Fire Blanket Inspection

VIII. REVISION HISTORY

| Date | Revision No. | Description |
|-----------|--------------|---|
| 7/6/2012 | New | Initial development of policy |
| 6/21/2016 | 1 | Review document; add Fire Safety Inspector II |
| 6/5/2019 | 2 | Triennial update |
| 6/30/2022 | NA | Triennial update – no changes. |

UNIVERSITY OF ROCHESTER ENVIRONMENTAL HEALTH & SAFETY

| Policy No.: FS037 | Approved by: Mark Cavanaugh | |
|---|---------------------------------|--|
| Title: Fire Blanket Annual Inspections | Date: 6/30/2022 | |
| Revision No.: 2 | Page 2 of 2 | |
| Prepared by: Justin Carlson | Reviewed 6/30/22 – No changes. | |
| EH&S Department Use Only: X Yes No | UR Website: X Public Restricted | |

Appendix A:

| Appendix A: | | | | | | |
|-------------|----------------|-----------|----------|--|--|--|
| Location | Date Inspected | Pass/Fail | Comments | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |