

Personal Protective Equipment (PPE) Assessment



Task Description: Arc Welding (MIG or Stick)

Department: Theatre

Completed by (Name, Department): Tom Swetz Theatre Department

Date: 08/24/2025

Hazard	Engineering/Administrative Controls	PPE Required
<p>Physical <input type="checkbox"/> N/A</p> <p><input type="checkbox"/> Cuts/Abrasions</p> <p><input checked="" type="checkbox"/> Dust</p> <p><input checked="" type="checkbox"/> Electricity</p> <p><input checked="" type="checkbox"/> Flying Particles</p> <p><input checked="" type="checkbox"/> Heat/Sparks</p> <p><input type="checkbox"/> Loud Noises</p> <p><input checked="" type="checkbox"/> Struck by Objects</p> <p><input checked="" type="checkbox"/> Other: <u> Ultraviolet Radiation </u></p>	<p>Engineering Controls</p> <ul style="list-style-type: none"> - Ensure local ventilation is on and working before work begins. - Always use the dedicated welding table. - Ground the welding machine before use. - Always place a welding screen in front of the work area. - Use a chain to stow any cylinders. <p>Administrative Controls</p> <ul style="list-style-type: none"> - Follow WCSU hot work procedures for any heat, spark or flame-producing activities. - Only use welding equipment if you have been trained in safe operation by a competent employee. - Only use tools as intended by the manufacturer. - Tie up long hair. - Inspect the condition of tools prior to use. Place damaged tools out of service. - Do not weld in close proximity to any combustible materials. - Do not operate welding equipment if you are feeling fatigued or unwell. 	<ul style="list-style-type: none"> • Welding Helmet • ANSI-Rated Safety Goggles or Glasses • Welding Jacket • Leather Gloves • Standard Work Attire (Closed-toe Shoes, Long Pants, Long-sleeved Shirt) <div style="text-align: center;"> </div>
<p>Chemical <input type="checkbox"/> N/A</p> <p><input type="checkbox"/> Air/Water Sensitive Chemicals</p> <p><input checked="" type="checkbox"/> Compressed Gas – Shielding gas</p> <p><input type="checkbox"/> Corrosive Substances</p> <p><input type="checkbox"/> Flammable Liquids/Gases</p> <p><input type="checkbox"/> Radioactive Substances</p> <p><input checked="" type="checkbox"/> Toxic/Irritant Substances</p> <p><input type="checkbox"/> Other: _____</p>		
<p>Biological <input checked="" type="checkbox"/> N/A</p> <p><input type="checkbox"/> Air-borne Pathogens</p> <p><input type="checkbox"/> Biological Sharps</p> <p><input type="checkbox"/> Blood and Bodily Fluids</p> <p><input type="checkbox"/> Mold</p> <p><input type="checkbox"/> Sewage</p> <p><input type="checkbox"/> Other: _____</p>		