

# Tool: PPE Hazard Assessment Form



## PPE HAZARD ASSESSMENT FORM

Use and modify this sample form to help you determine what hazards workers are exposed to and what PPE must be worn to protect them.

- If you check **YES**, determine if the hazard can be eliminated.
- If **NO**, can the method or equipment be changed to eliminate the hazard?
  - If so, consider doing it.
- If the hazard can't be eliminated, would adding a guard protect employees from the hazard, e.g., machine guards?
  - If this is the case, indicate a guard is being installed.
- In the last column, list the type of PPE the worker will be required to use.

## PERSONAL PROTECTIVE EQUIPMENT HAZARD ASSESSMENT

Facility\_\_\_\_\_ Dept.\_\_\_\_\_ Date\_\_\_\_\_

Supervisor \_\_\_\_\_ Job \_\_\_\_\_

### EYES & FACE

Hazard	Yes	No	Eliminated, Guarded?	PPE Required
Flying particles				
Molten metals				
Liquid chemicals				

<b>Acids</b>				
<b>Caustic liquids</b>				
<b>Chemical gases or vapors</b>				
<b>Light radiation</b>				
<b>Other</b>				

### Head

<b>Hazard</b>	<b>Yes</b>	<b>No</b>	<b>Eliminated, Guarded?</b>	<b>PPE Required</b>
<b>Flying objects</b>				
<b>Falling objects</b>				
<b>Work done overhead</b>				
<b>Elevated conveyors</b>				
<b>Hitting against fixed object</b>				
<b>Forklift hazards</b>				
<b>Exposed electrical conductors</b>				
<b>Other</b>				

### Feet

Hazard	Yes	No	Eliminated, Guarded?	PPE Required
Flying objects				
Rolling objects				
Objects piercing sole				
Electrical hazards				
Wet, slippery or hot surfaces				
Chemical exposure				
Environmental				
Other				

### Hands

Hazard	Yes	No	Eliminated, Guarded?	PPE Required
Skin absorption				
Cuts or lacerations				
Abrasions				
Punctures				
Chemical burns				

Thermal burns				
Temperature extremes				
Other				

### Respiratory

Hazard	Yes	No	Eliminated, Guarded?	PPE Required
Dusts				
Fogs				
Fumes				
Mists				
Smokes				
Sprays				
Vapors				
Other				

### Torso

Hazard	Yes	No	Eliminated, Guarded?	PPE Required
Hot metals				

<b>Cuts</b>				
<b>Acids</b>				
<b>Radiation</b>				
<b>Other</b>				
<b>Comments:</b>				

### Certification

This hazard assessment has been performed to determine the required type of PPE for each affected worker.

The assessment includes:

- Walk-through survey
- Specific job analysis
- Review of accident statistics
- Review of safety equipment selection guideline materials
- Selection of appropriate required PPE

Assessment Certified by (Supervisor) \_\_\_\_\_ Date \_\_\_\_\_