

COVID-19

Room Entry Requirements

PI Name: _____ Room # _____

Social Distancing Occupancy Limit: _____



Face Covering



Safety Glasses



Face Shield



Gloves



Sanitize

- By day
- By shift
- By use

Safety is a community responsibility.

Questions or concerns?

Contact EH&S at (858) 534-3660 <http://blink.ucsd.edu/go/safetyconcern>

Report noncompliance anonymously to

the UC Whistleblower Hotline: (800) 403-4744 or www.UniversityofCalifornia.edu/Hotline

COVID-19

Example

Room Entry Requirements

PI Name: John Doe Room # 211

Social Distancing Occupancy Limit: 4



Face Covering



Surgical mask



Safety Glasses



Face Shield



Gloves



Sanitize

- By day
- By shift
- By use

Specify the type of face covering, eg: cloth face mask, surgical mask, N-95...

Safety is a community responsibility.

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