

UNIVERSITY OF TOLEDO

SUBJECT: FIRE EXTINGUISHER LOCATION, PLACEMENT,
TESTING AND MAINTENANCE

Procedure No: LS-08-005

PROCEDURE STATEMENT

All clinical area fire extinguishers shall be inspected upon initial placement, checked monthly, serviced annually, as required for interval maintenance, and as required or as needed for hydrostatic testing.

PURPOSE OF PROCEDURE

To assure that all extinguishers are working properly.

PROCEDURE

All fire extinguishers are placed in accordance with applicable building codes upon construction of the building, office or addition. When an area is remodeled, Environmental Health & Radiation Safety personnel check the area during environmental safety rounds to ensure that no additional extinguishers are needed. If one is, a work order is generated with Facilities Maintenance.

All fire extinguishers shall be inspected, on a monthly basis, for the following:

1. Location in designated place and readily accessible
2. Visibility or means of indicating location of the extinguisher is not obstructed.
3. That the seal and pin are in place.
4. If the extinguisher has a pressure gauge, that it reads in the normal or green zone. Fullness should be determined by weighing or hefting.
5. If there is no pressure gauge, an alternative indicator shall be used (e.g. weighting).
4. That there are no signs of physical damage, corrosion, leakage or clogged nozzle.
5. Proper condition of tires, wheels, carriage, hose and nozzle are met on wheeled units (for wheeled units only)
6. That the fire extinguisher is the appropriate type for the fire hazard at that location.
7. That operating instruction on nameplate are legible and facing outward.
8. That the inspection tag is in place and has the proper inspection date on it.
9. Hazardous Materials Identification Systems (HMIS) label in place.
10. If the fire extinguisher is equipped with a bar code, scan with a reader for electronic documentation.

If all of the above items are in place the inspector will scan the barcode tag. If any extinguisher does not meet the above criteria, then the inspector will do one of the following:

1. If the seal and/or pin is not in place, check the gauge to make sure the extinguisher is fully charged. If it is, reseal it if on Main Campus. If on Health Science Campus, remove for service and replace with a back-up extinguisher.
2. If the pressure gauge shows below normal pressure, remove the extinguisher for service and replace it with a back-up extinguisher.
3. If the Inspection Tag has been removed, replace the extinguisher with a back-up extinguisher. Then date and initial the tag.

When all extinguishers for the assigned area have been checked, the inspector will record the necessary information in the fire extinguisher record in Facility Support Building, Suite 1000; Environmental Health and Radiation Safety office and Plant Operations on MC.

EHRHS on HSC and Plant Operations on MC shall assure that all clinical area fire extinguishers are inspected monthly and serviced on an annual basis to ensure that they are in working order in their respective areas.

The following items will be evaluated during an inspection of fixed fire suppression systems:

1. The location is in its designated place.
2. No obstruction to access or visibility.
3. Pressure gauge reading or indicator in operable range.
4. Fullness determined by weight or hefting.
5. Good condition of tires, wheels, carriage, hose, and nozzle for wheeled extinguishers – no broken components.
6. Indicator for nonrechargeable extinguishers using push-to-test pressure gauge.
7. The unit is within the 6-month service life by a certified technician.

Facilities Staff shall also perform monthly inspections of the fire egress and exit signs on the HSC campus clinical areas and document them on an area by area basis utilizing an electronic barcode system.

Records of testing and inspection shall be kept in Facility Support Building, Suite 1000, Environmental Health and Radiation Safety office on HSC and Plant Operations on MC.

Source: EHRHS Department

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