

Requirements for Faculty with Labs

List of Sections for All Laboratories:

Training
 Documentation and Notifications
 Personal Protective Equipment (PPE)
 Hazardous Waste

List of Speciality Lab Requirements:

Biohazards
 Rad Materials/Rad Producing Machines
 Lasers

Requirements for ALL labs with Hazards

| Action | Requirement | Frequency | Resources |
|--|--|--|---|
| Training | | | |
| Complete Training Matrix | Training requirements for personnel are established by regulatory agencies based on exposure to hazard or tasks that are conducted. CHP Section 7.2 | Review Annually | Training Needs Assessment Training Needs Assessment Instructions |
| Provide lab specific training on physical, chemical and mechanical hazards to lab personnel as defined by the department Local Safety Plan. Inform all personnel that safety and health are of highest priorities. | OSHA Laboratory Safety Standard requires lab personnel receive training on specific hazards in lab. Training must be documented. Documentation should have description of training, trainee names and date of training. CHP Section 7.1.4 | Initially, then any time significant changes are made to material use and/or experimentation but at least annually | Sample Training Documentation Template |
| Work with Department Contact to ensure that all lab personnel are assigned General Lab Parts 1, 2 and 3 and Fire Extinguisher training prior to commencement of lab work. Subsequent years Lab Safety Refresher must be completed. | OSHA Laboratory Safety Standard requires lab personnel receive training on PPE, emergency notification and response, access to medical records, and chemical and physical hazards. CHP Section 7.0 | Review Annually | complyND |

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| Documentation and Notifications | | | |
| Complete an Emergency Laboratory Contact Information Sign for each lab. Post outside the lab on or near all entry doors. | CHP Section 6.5 | Initially and Update the information on the signs as changes occur in the lab. | Emergency Contact Sign |
| Review unattended operations with lab personnel and instruct them to complete an unattended operation card and post on or near all entry doors. | CHP Section 12 | Any new unattended operation. | Unattended Operation Card |
| Assign the designated area(s) for use with select agents and/or carcinogens and/or reproductive hazards in his/her laboratory as appropriate. | CHP Section 20.4.7 | Initially when select agent and/or carcinogens and/or reproductive hazards are procured. This can be the entire lab or a specific location or ante room. | List of Select Agents Reproductive Hazards |
| Report injuries of volunteers, high schoolers and undergraduates who are not employees to Department Safety Coordinator per Department Safety Plan. | CHP 6.3 | As soon as possible report injury involving non-employees to the department Safety Coordinator. | |
| Complete a First Report of Injury and submit to RMS. | CHP Section 26.1.2 | Within 48 hours of notification of an injury to an employee in the laboratory. An employee is any paid (Salary or stipend) personnel injured while in the laboratory. | First Report of Injury |

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| Notify RMS and Utilities and Maintenance when structural changes in the laboratory are made. | CHP Section 4.2.8 | Prior to the structural change to ensure that safety of lab is maintained with alteration. | |
| Complete Risk Assessment Tool | Required to evaluate the potential hazards associated with the work to ensure safe practices are developed. Risk should be re-evaluated annually or any time significant changes are made to material use and/or the experiment. This tool evaluates risk associated with: inhalation, injection, ingestion, and skin absorption exposure routes, hazardous materials, physical hazards, equipment hazards, electrical hazards and thermal hazards. CHP Section 5.0 | Re-evaluate annually or any time significant changes are made to material use and/or the experiment. | Risk Assessment Tool Risk Assessment Tool Instructions |
| Personal Protective Equipment (PPE) | | | |
| Complete PPE Hazard Assessment | Required by The Occupational Safety and Health Administration (OSHA) to identify hazards and how to control those hazards. CHP Section 8.3 | Annually | PPE Assessment PPE Hazard Assessment Instructions Task Based PPE Hazard Assessment Templates Hierarchy of Controls Chart |
| Provide required PPE to lab personnel. | CHP Section 8.3.2 | Initial and when replacements are needed. | |

| Action | Requirement | Frequency | Resources |
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| Handling of Hazardous Waste | | | |
| Labeling when in Storage | Waste containers must be labeled with the words Hazardous Waste and a description of the constituents (e.g. Hazardous Waste Mixed Acids) | Ongoing - Whenever waste is first added to container. | |
| Containers must be closed | All containers must be closed unless directly adding waste. Unless lab is using an ecofunnel, funnels must be removed after each filling of the container. | Ongoing | |
| Chemical Discard Online Form | Must be completed and attached to the waste container prior to RMS pickup. | When the waste is ready to be picked up by RMS. | Online Waste Forms |
| Containers for waste | RMS provides containers for solid waste and solvents. | | Call 1-9144 for waste pickups or containers. |
| Develop a Lab Specific biosafety Manual. Faculty can adopt the University's manual and add specific SOPs, emergency contact and emergency procedures or can develop their own. | Biosafety Manual Section 10.2 | Initial and update when changes occur in the lab that include change of biohazardous agent, emergency procedures, personnel contact information. | University Biosafety Manual |
| Require all lab personnel to complete Biosafety Training Require BBP training working with human blood, tissues, cells, other BBP. | Biosafety Manual Section 11 | Initially and annually thereafter. | Complete training in complyND (web Link) |
| Fund vaccinations, testing and/or baseline serum samples as needed. | Biosafety Manual Section 4.6 | initial and on-going as required | |
| Follow emergency plans for Faculty and/or personal exposures as set by the IBC. | Biosafety Manual Section 10.2 | initial and on-going as required | |

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| Report any significant problems, violations of the NIH Guidelines, or any significant research- related accidents and illnesses to the BSO/IBC (where applicable) and/or Animal Facility Director (where applicable). | Biosafety Manual Section 4.6 | When any incident occurs in the lab involving a material on an IRB, IBC or IACUC protocol. | Contact Risk Management and Safety Ph. 631-5037 Office - 636 Grace Hall |
| Work with IBC or IACUC to provide appropriate information If reporting to CDC, NIH or AAALAC. | Biosafety Manual Section 4.6 | If a reportable incident occurs. | Contact Risk Management and Safety Ph. 631-5037 Office - 636 Grace Hall |
| Arrange for Biosafety cabinet is certification. | Biosafety Manual Section 14.3.2 | Annually or when cabinet is relocated. | Quality Air PO Box 2947 Kalamazoo MI 49003-2947 Ph. 269/327-3055 Fax 269/327-6241 www.qairservice.com |
| Radioactive Materials or Radiation Producing Machines | | | |
| Submit an application directly to the Radiation Control Committee to | Radiation Manual Page 14 | Prior to initial work. | Radiation Safety Manual Application for RI |
| Instruct lab personnel using radiation devices and radioactive materials in the use of safety devices and procedures. | Radiation Manual Page 13 | | |

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| Provide facilities and accept responsibility for the safe use of radioactive materials and radiation devices by individuals under their supervision. | Radiation Manual Page 13 | | |
| Limit use of radioactive devices and radioactive materials, covered in approval as a Responsible Investigator to personnel under them. | Radiation Manual Page 13 | | |
| Keep Radiation Safety Officer (RSO) and Area Radiation Safety Officer informed of new techniques, changes in operational procedures, or in the physical plant which might lead to increased personnel exposure or contamination levels. | Radiation Manual Page 13 | Any time there is a change in procedure might lead to increased personnel exposure or contamination levels | |
| Initiate orders for needed radioactive isotopes and keep records of the disposal of such materials. | Radiation Manual Page 13 | Whenever materials are purchased or disposed of | |
| Obtain and review exposure records of self and personnel under their supervision. | Radiation Manual Page 13 | Bimonthly | |
| Prepare an inventory of radioactive materials on hand | Radiation Manual Page 13 | At least annually and at other times when requested by the Radiation Safety Officer. | |

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| Notify the Area Radiation Safety Officer of his/her leave plans and also of the arrangements made for the handling of radioactive material during his/her absence whenever he/she plans to take sabbatical leave, an extended vacation, or for any reason will be unable to maintain personal supervision or fulfill his/her responsibilities for two or more weeks as contained in these regulations. These arrangements shall be made well in advance of his/her departure. | Radiation Manual Page 13 | When leaving the University permanently or on an extended absence from campus. | |
| Advise all female radiation workers of childbearing age orally and in written form of the increased risk of prenatal radiation exposure. New female employees shall be so advised before beginning work. | Radiation Manual Page 14 | initially | |
| Lasers | | | |
| Conduct inspections of the Faculty's area(s) of responsibility verifying that the requirements of this standard are met. | Laser/UV Light Sources Safety Manual Section 2.2 | Periodically | Laser/UV light Sources Safety Manual |
| | | | Laser Safety Hazard Evaluation |
| Notify RMS when purchasing, trans Class IIIB or Class IV laser or UV light source is purchased, transferred, or disposed. | Laser/UV Light Sources Safety Manual Section 2.4 | Every time purchased, transferred or disposed. | Laser Registration Form |
| Correct deficiencies noted during periodic inspections immediately. | Laser/UV Light Sources Safety Manual Section 2.3 | Immediately upon discovery. | |

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| Develop and communicate operating procedures for Class IIIB and Class IV lasers | Laser/UV Light Sources Safety Manual Section 2.5 | Initial and as procedures changes | Standard Operating Procedure Template - Lasers Under Resources |
| Fund baseline eye exams as appropriate to lab personnel. | Laser/UV Light Sources Safety Manual Section 2.4.3 | | Grossnickle Baseline Eye Exam |