

STANDARD OPERATING PROCEDURE

Procedure:	General staff and external contractors in PC2 laboratories
School/Department:	School of Molecular Bioscience
SOP prepared by:	Peter Kerr, Markus Hofer
Version:	SMB048.2

Section 1 - Personal Protective Equipment (PPE)

1. Lab coat or gown
2. Latex or nitrile Gloves
3. Closed shoes
4. Safety Glasses may be required
5. Disposable floor cover (if kneeling/sitting on floor is required)

Section 2 – Potential Hazards + Safety precautions

1. Hazards specific to the individual laboratories must be inquired from the room custodian
2. Workers must be aware of any pre-existing relevant health conditions, and inform their supervisor of these (e.g. pregnancy, chronic infections or medication as these would make the worker much more susceptible to infection). Access to PC2 laboratories may not be permitted in these cases.
3. Workers with pre-existing medical conditions (e.g. allergy, immunocompromised state, chemical sensitivity) and workers who are pregnant or expecting pregnancy must consult with their supervisor AND medical specialist AND the university's WHS services before performing this procedure. If there are any serious concerns expressed by any of these individuals, this task must not be performed.

Section 3 – Procedure

NOTE: The details in this SOP must be discussed with external contractors of general staff by the room custodian or their delegate prior to commencing work. Wherever possible, hazards should be removed from the work area.

1. Work **must not** be conducted unless authorization to do so has been obtained from the room custodian. In the case of an emergency, work may be performed without authorization. In this case, the custodian must be informed as soon as possible (see contact details at doors).
2. Any work that requires opening, switching off or moving of equipment must be discussed with the custodian first. **Do not** open or reach inside the biosafety cabinets or incubators, water baths, centrifuges or other equipment without prior permission by the room custodian.
3. The laboratory must be locked if nobody is working in it. Swipe card access to laboratories **must not** be given to unauthorised people. Violation of this rule will result in the immediate cancellation of access to all persons involved.
4. Do not store reference documents/papers/books on the benches.
5. No eating or drinking in the lab. Avoid contact of hands with your face.
6. Do not use portable music players/iPads/phones or earphones.
7. All material and equipment to be removed from the lab must be decontaminated unless transported to another PC2 facility. Appropriate containers must be used for transport of material and equipment to the autoclave area.
8. Avoid generating airborne dust. Dust equipment off using a wet (80% ethanol) paper towel. Do not use dry paper towel or blow off dust. If airborne dust is generated (e.g. removing ceiling tiles, drilling) instruments must be covered and dust removed when finished. Contact the custodian prior to covering instruments to avoid overheating.
9. **Animal houses:** Anyone entering a PC2 laboratory **must not** enter an animal house for the next 24 hours until permission has been obtained by the room custodian and/or Laboratory Animal Services.

Waste Disposal

1. All waste has to be inactivated prior to disposal.

2. **Solid waste:** All solid waste (including packaging material and boxes) has to be collected in double-bagged autoclave bags inside metal bins. Full bags or bags containing infectious material must be closed. Full bins must be closed, labelled on the outside with fresh autoclave tape and with: "PC2 BIOLOGICAL HAZARD WASTE" and transported as soon as possible (i.e. at the end of the day) to the cage in the autoclave area on level 2. Do not overfill waste bags and do not discard liquid waste in waste bags.

Section 4 – Disposal / Spills / Incidents

If a spill occurs, the room custodian must be contacted immediately. Contact details of the lab custodian are located at the entry point of each laboratory.

Section 5 – Repairs / Certification / Validation

Section 6 – Relevant safety data sheets

Section 7 - References

1. SOPs for use of biosafety cabinet (SMB005), biohazard spills (SMB004), handling toxic chemicals (SMB034) and working with flammables (SMB013).
2. SOPs and PSDS for individual pathogens used in this facility.
3. All references are kept in the "SOP & NLRD" folder.

SOP Consultation, Training and Approval

Print names and enter signatures and dates to certify that the persons named in this section have been consulted/trained in relation to the development and implementation of this Standard Operating Procedure. WHS Representative (WHS Committee) certifies that consultation has taken place.

Position	Name	Signature	Date
Supervisor			
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Name Authorising (Printed): DIANNE FISHER.....

Signature:  **Date:** 30/3/2015

WHS Committee Representative Name (Printed): MARKUS HOFER.....

Signature:  **Date:** 30/3/2015