|  |
| --- |
|  |
| Standard Operating Procedures (SOP) for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |
|  |
|  |
| **[Pick the date]** |

|  |
| --- |
|  |

Table of Contents

[1. PROJECT SCOPE 3](#_Toc2332022)

[2. BIOLOGICAL AGENTS 3](#_Toc2332023)

[3. SAFE WORK PRACTICES 3](#_Toc2332024)

[4. EXPERIMENTAL PROCEDURES 3](#_Toc2332025)

[5. ROUTES OF TRANSMISSION 3](#_Toc2332026)

[6. PERSONAL PROTECTIVE EQUIPMENT 3](#_Toc2332027)

[7. USE OF BIOLOGICAL SAFETY CABINET 3](#_Toc2332028)

[8. SHARPS AND OTHER WASTE DISPOSAL 3](#_Toc2332029)

[9. DISINFECTION PROCEDURES 3](#_Toc2332030)

[10. Safe transport procedures from room to room/bldg. to bldg. 3](#_Toc2332031)

[11. EMERGENCY RESPONSE FOR EXPOSURES 4](#_Toc2332032)

[12. SIGNS AND SYMPTOMS OF EXPOSURE 4](#_Toc2332033)

[13. EMERGENCY RESPONSE FOR SPILLS 4](#_Toc2332034)

[14. TRAINING 4](#_Toc2332035)

[EMERGENCY CONTACTS: 4](#_Toc2332036)

## PROJECT SCOPE

* 1. Insert research summary in common terminology.

## **BIOLOGICAL AGENTS**

* 1. Laboratory strains: *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*
	2. CDC Exempt Strains: https://www.selectagents.gov/SelectAgentsandToxinsExclusions.html
	3. NIH Guidelines: <https://osp.od.nih.gov/biotechnology/nih-guidelines/>

## **SAFE WORK PRACTICES**

* 1. This laboratory follows standard microbiological practices, safety equipment and laboratory facility guidelines for BLS-1 / BSL-2 (pick one) laboratories as outlined in the CDC Biosafety in Microbiological and Biomedical Laboratories (BMBL), 5th Edition.
	2. Provide details on the safe handling procedures here.
	3. Provide details on the safe handling procedures here.

## **EXPERIMENTAL PROCEDURES**

* 1. Propagation and Storage:
	2. Insert details where materials are grown, stored and handled.
	3. Insert Assay Procedures:

## ROUTES OF TRANSMISSION

* 1. Insert specific details on routes of transmission in this section.
	2. Provide specific details.

## PERSONAL PROTECTIVE EQUIPMENT

* 1. Insert specific details on the PPE to be used in this section.
	2. Provide specific details.
	3. Provide specific details.

## USE OF BIOLOGICAL SAFETY CABINET

* 1. Insert specific details.
	2. Provide specific details.
	3. Provide specific details.

## SHARPS AND OTHER WASTE DISPOSAL

* 1. Insert specific details.
	2. Provide specific details.

## DISINFECTION PROCEDURES

* 1. Insert specific details on work areas and instruments disinfection.
	2. Include specific materials, preparation of those materials. How many days the solutions are viable.
	3. Provide specific details on use of any autoclaves.

## Safe transport procedures from room to room/bldg. to bldg.

* 1. Insert specific details on transport procedures. Include specifics on transport containers.
	2. Provide specific details.
	3. Provide specific details.

## EMERGENCY RESPONSE FOR EXPOSURES

* 1. <INSERT NAME OF PI> will be notified immediately of any possible exposures.
	2. NSU Public Safety will be notified by calling 2-8999.
	3. The NSU Biosafety Officer will be notified by calling 2-8847.

## SIGNS AND SYMPTOMS OF EXPOSURE

* 1. Insert specific details, include any medical considerations including the availability of vaccinations.
	2. Provide specific details.

## EMERGENCY RESPONSE FOR SPILLS

* 1. Culture volumes will not exceed <insert>mL.
	2. Any spills must be reported to <INSERT NAME OF PI> . <INSERT NAME OF PI> will certify proper cleanup.
	3. In the case of a spill, absorbent paper will be gently placed on top of the spill to soak up the majority of the culture. 10% bleach or 70% ethanol will be used to disinfect the spill area for with contact time of no less than 10 minutes undisturbed. The area will be cleaned, and materials will be handled as biohazardous waste. The area will be cleaned with disinfectant for a final cleaning.
	4. For cultures spilled on personnel or clothing: Skin will be disinfected with 70% ethanol. Contaminated clothing items will be placed into a biohazard waste bag and autoclaved prior to washing.
	5. Spills outside of a biosafety cabinet will be reported to an EHS Biosafety Officer.

## TRAINING

* 1. Insert specific details on training provided and required in this section.
	2. Provide specific details
	3. Provide specific details

## EMERGENCY CONTACTS:

<INSERT NAME OF PI> 954-262-xxxx

NSU Public Safety 954-262-8999

Office Facilities Management/Environmental Health and Safety 954-262-8847