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| **Research Laboratory Exposure Control Plan Checklist** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Section 1: General Laboratory Information** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. **Name of Principal Investigator(s) or Supervisor(s):** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **PI/Supervisor Signature**  **Date:** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2. **Department/Lab/Center:** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 3. **Office and Phone Number:** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 4. **Laboratory Room Numbers where human materials are used and/or stored:** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 5. **Please List COUHES Approval Number if applicable:** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 6. **Accepted for the EHS Office’s Biosafety Program:**  **Date:** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Section II: Do you have a Biological Research Registration? Yes: No:** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **If No, please provide a brief Description of the Project(s)** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **Section III: Occupational Exposure** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **1. Human Materials Used in This Laboratory (Check all that apply)** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Established human cell lines | | | | | | | |  | | | | Human blood, serum, plasma, blood products, or components | | | | | | | | | | | | | | |
|  | Primary human cells or cell lines | | | | | | | |  | | | | Human bodily fluids, including feces, urine, & saliva | | | | | | | | | | | | | | |
|  | Unfixed human tissues or organs | | | | | | | |  | | | | Human cells, tissues, or organs containing HIV, HBV, HCV or other bloodborne pathogens (i.e. malaria parasite containing human blood) | | | | | | | | | | | | | | |
|  | Human embryonic stem cells (hES) | | | | | | | |  | | | | Human Induced Pluripotent Cells (iPS) | | | | | | | | | | | | | | |
| **2. Job Classifications with Occupational Exposure (You can modify job classifications based on your laboratory)** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Job Classification** | | | | | | | | **All Employees Have Exposure**  (Check if everyone of this position works with human material) | | | | | | | | | | | **Some Employees Have Exposure**  (Check if only some workers in this position work with human material) | | | | | | | | |
| a. Professor | | | | | | | |  | | | | | | | | | | |  | | | | | | | | |
| b. Postdoctoral Researcher | | | | | | | |  | | | | | | | | | | |  | | | | | | | | |
| c. Laboratory Assistants | | | | | | | |  | | | | | | | | | | |  | | | | | | | | |
| d. Laboratory Technicians | | | | | | | |  | | | | | | | | | | |  | | | | | | | | |
| e. Graduate Students | | | | | | | |  | | | | | | | | | | |  | | | | | | | | |
| f. Undergraduate Students | | | | | | | |  | | | | | | | | | | |  | | | | | | | | |
| g. Research Scientist | | | | | | | |  | | | | | | | | | | |  | | | | | | | | |
| h. Other Title(s): | | | | | | | |  | | | | | | | | | | |  | | | | | | | | |
| **3. Procedures and Tasks Involving Human Blood or Other Potentially Infectious Materials (OPIMs) (Check all that apply)** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | a. Injections into humans or animals using human specimens including cell lines. | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | b. Other use of needles with human specimens including cell lines. | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | c. Preparing, dissecting, cutting, or otherwise handling human blood, tissue, or cell lines. | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | d. Pipetting, mixing, centrifuging, or vortexing human blood, fluid, tissue, or cell lines. | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | e. Handling tubes or other containers of human blood fluid, tissue or cell lines. | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | f. Cleaning up spills of human blood, other body fluids or cell lines. | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | g. Preparing or handling primary and established human cell cultures. | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | Other: *(please specify)* | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Section IV: Sharps Management** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **1. List Special Sharps Procedures Current Being Used. Not Applicable [ ]**  (If needles or sharps are not handled as part of the research, please check Not Applicable and proceed to Section V.)  For those who handle needles or sharps**, recapping needles by hand is prohibited**. | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Procedure | | | | Mechanical Devices Used | | | | | | | | | | | | | | Recap | | | | | | If recap, what method is used? | | | |
|  | | | |  | | | | | | | | | | | | | |  | | | | | |  | | | |
|  | | | |  | | | | | | | | | | | | | |  | | | | | |  | | | |
| **2.** [**OSHA 1910.1030**](https://www.osha.gov/SLTC/bloodbornepathogens/index.html) **requires the PI and/or Supervisor and laboratory/work area personnel who are at risk of potential exposures or injuries from contaminated needles or sharps during their work to identify, evaluate, and select effective engineering controls and work practices and must document that solicitation in the Exposure Control Plan Checklist.** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Have you and your lab/work area personnel considered and implemented commercially available effective safer medical devices (Sharps with engineered sharps injury protections) designed to eliminate or minimize occupational exposure?  **I and my lab/work area personnel have reviewed safer medical devices and:** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **[ ]** | **There are no other safer devices or safer available methods for the current procedures used in our research** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **[ ]** | **There are safer devices available. Please list which safer devices are used: .** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Section V: Equipment Decontamination** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **1. List Instructions and Schedule for Decontaminating and Maintaining Equipment** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Facility area, surface or equipment to clean and/or decontaminate | | | | Decontamination Instructions | | | | Frequency (check what applies) | | | | | | | | | | | | | | | | Disinfectants Used (**i.e. Bleach, PREempt**) | | | |
| Example: Biosafety Cabinet | | | | Wipe with Pre-Empt before and after working in biosafety cabinet | | | | X | | | Daily | | |  | | Weekly | | | |  | When Used | | | PREempt | | | |
| Biosafety Cabinet | | | |  | | | |  | | | Daily | | |  | | Weekly | | | |  | When Used | | |  | | | |
| Bench top | | | |  | | | |  | | | Daily | | |  | | Weekly | | | |  | When Used | | |  | | | |
| Other: | | | |  | | | |  | | | Daily | | |  | | Weekly | | | |  | When Used | | |  | | | |
| **2. Specify any special waste handling procedures for equipment decon, if applicable.** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **3. Do you have a piece of equipment (i.e. microscope, centrifuge, etc.) that you cannot disinfect and clean? Please identify that equipment below and provide the reason(s) why it cannot be disinfected.** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Equipment | | | Reason | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| **Section VI: Engineering Controls** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **1. List what Engineering Controls are Utilized (for example: biosafety cabinet, sharps containers, etc.)** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Person Responsible for reviewing effectiveness of these controls | | | | | | EHS Rep | | | Lab Manager | | | | | | PI/Supervisor | | | | | | | Researcher | | Other | | | |
| **[ ]** | | | **[ ]** | | | | | | **[ ]** | | | | | | | **[ ]** | | **[ ]** | | | |
| Engineering Control | | | | | Location | | | | | Schedule of Maintenance: **Examined and maintained** | | | | | | | | | | | | | | | | | |
| Example: Safety Cups | | | | | N52-443 | | | | |  | | Daily | | |  | | Weekly | | | | |  | When Used | |  | Other | |
| Biosafety cabinet | | | | |  | | | | |  | |  | | |  | |  | | | | |  |  | |  |  | |
| Sharps Container | | | | |  | | | | |  | |  | | |  | |  | | | | |  |  | |  |  | |
| Other: | | | | |  | | | | |  | |  | | |  | |  | | | | |  |  | |  |  | |
| **Section VII: Personal Protective Equipment (PPE)** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **1. List PPE used, decontamination and disposal instructions** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Person responsible for Providing PPE | | | | | | EHS Rep | | | Lab Manager | | | | | | PI/Supervisor | | | | | | | Researcher | | | Other | | |
|  | | |  | | | | | |  | | | | | | |  | | |  | | |
| Personal Protective Equipment | | | | | Decontamination and Disposal Instructions | | | | | | | | | | | | | | | | | | | | | | |
| Disposable Gloves | | | | |  | | Dispose directly into biowaste box | | | | | | | | | | | | | | | | | | | |
| Laboratory Coats | | | | |  | | Contaminated lab coats are deconned with an appropriate disinfectant then bagged and sent out for laundering with a commercial vendor | | | | | | | | | | | | | | | | | | | |
|  | | Uncontaminated lab coats are placed in soiled bag and sent off for cleaning with a commercial vendor | | | | | | | | | | | | | | | | | | | |
|  | | Dispose directly into biowaste box | | | | | | | | | | | | | | | | | | | |
| Safety Glasses | | | | |  | | Disinfect with an appropriate disinfectant before reusing | | | | | | | | | | | | | | | | | | | |
|  | | Dispose directly into biowaste box | | | | | | | | | | | | | | | | | | | |
| Face Shields and Masks | | | | |  | | Disinfect with an appropriate disinfectant before reusing | | | | | | | | | | | | | | | | | | | |
|  | | Dispose directly into biowaste box | | | | | | | | | | | | | | | | | | | |
| Utility Gloves | | | | |  | | Disinfect with an appropriate disinfectant before reusing | | | | | | | | | | | | | | | | | | | |
|  | | Dispose directly into biowaste box | | | | | | | | | | | | | | | | | | | |
| Aprons | | | | |  | | Disinfect with an appropriate disinfectant before reusing | | | | | | | | | | | | | | | | | | | |
|  | | Dispose directly into biowaste box | | | | | | | | | | | | | | | | | | | |
| Other | | | | |  | | Disinfect with an appropriate disinfectant before reusing | | | | | | | | | | | | | | | | | | | |
|  | | Dispose directly into biowaste box | | | | | | | | | | | | | | | | | | | |
| **Section VIII: Spill Decontamination Procedures** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Cleaning up a spill   1. Isolate the spill 2. Cover the spill with paper towels 3. Saturate the paper towels with disinfectant. 4. Wait 10 minutes 5. Use tongs to clean up the paper towels. Paper towels go in the biowaste box (or in the sharps box if the spill contained broken glass or sharp objects). 6. Disinfect the surface again. | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| List location of spill clean-up materials | | | | | | | | | | | | |  | | | | | | | | | | | | | | |
| **Section IX: Waste Disposal Procedures** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Waste Type and handling instructions** | | | | | | | | | | | | | | | **Check all that apply** | | | | | | | | **Disinfectant(s) used (i.e. bleach, PREempt, Quatricide, Sklar, etc.)** | | | | |
| **Contaminated solid waste will be disposed into a bench top container which is emptied into the biowaste box when full or will be disposed directly into the biowaste box** | | | | | | | | | | | | | | |  | | | | | | | | **N/A** | | | | |
| **Liquids are decontaminated with an appropriate EPA-approved disinfectant before disposal in sink drain.** | | | | | | | | | | | | | | |  | | | | | | | |  | | | | |
| **Lab-ware or surfaces (i.e. benchtops) contacting human materials are decontaminated with an appropriate EPA-approved disinfectant before disposal in sink drain.** | | | | | | | | | | | | | | |  | | | | | | | |  | | | | |
| **Contaminated sharps will be collected in disposable biohazard sharps containers, which will be placed in biowaste box when full** | | | | | | | | | | | | | | |  | | | | | | | | **N/A** | | | | |
| **Autoclave** | | | | | | | | | | | | | | |  | | | | | | | | **N/A** | | | | |
| **Other (please describe):** | | | | | | | | | | | | | | |  | | | | | | | |  | | | | |
| **Section X: Potential Exposure Incident** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. Quickly secure sensitive or hazardous process (i.e. animals, open flame) 2. Immediately take care of yourself:    1. Cut/needlestick/splash to skin: wash the area with soap and water and rinse for 5-10 minutes    2. Splash to eyes, nose, or mouth, use eyewash or flush with room temperature water for 15 minutes 3. Tell your PI, supervisor, EHS representative or Lab Manager   PI/Supervisor/EHS Rep/Lab Manager’s Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  PI/Supervisor/EHS Rep/Lab Manager’s Contact Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   1. Go to MIT Medical Urgent Care(E23) for an evaluation immediately. For hours, please check the MIT Medical webpage at <https://medical.mit.edu/> or call 617-253-4481 2. Supervisor or representative must submit an incident report through Atlas (<https://atlas.mit.edu/>) 3. EHS will follow-up | | | | | | | | | | | | | | | | | | | | | | | | | | | |