

ALFRED UNIVERSITY Site-Specific Process SOP

A copy of the completed SOP must be filed with EH&S Coordinator, 117A Myers Hall X 2190.

Process Experiment Equipment

Lab Location/Div: _____

Process/Exp/Equip Name _____

Associated Hazards:

- Cryogenic hazards Compressed gas hazards Electrical hazard
 High temperature Crush/Pinch hazards Radiation hazard
 Fire/explosion hazard Other(describe) _____
 Hazardous Chemical(s) used in process/experiment/equipment *if checked, check all that apply in box below*

Hazard Class(es):

- Reproductive Toxin High Acute Toxicity Carcinogen
 Flammable Corrosive Oxidizer Peroxide former
 Other(describe) _____

NFPA Rating: Flammability: ____ Reactivity: ____ Health: ____ Specific Hazard ____
Enter highest number if more than one chemical is used in process

Chemical purchase/possession requires [prior approval](#).

Quantity limited to _____

Chemical precautions _____

Chemical storage location _____

Security protocol _____

Designated area if using PHSs: N/A

Process/Experiment/Equipment shall be performed only in the following designated area:

Room# _____ Building _____

Designated area within lab (describe) _____

Security protocol _____

Authorized personnel: ONLY personnel who have fulfilled the required [training requirements](#) and have received approval from the LSF/PI are allowed to perform the process, experiment or use the equipment for which this SOP is written. Attach completed [LSF/PI Site Specific Employee Authorization Form](#) to SOP.

Other restrictions (describe) _____

Training requirements: The user must demonstrate competency and familiarity regarding the safe performance of this process. [Training](#) should include the following: *Check all that applies:*

- Review of current MSDS Review of the OSHA Lab Standard
 Review of Divisional safety manual Review of Chemical Hygiene Plan
 Site-specific training Lab Safety training (EH&S)
 Respirator training Other (describe) _____

Engineering/Ventilation/Isolation Controls: none required

To be used to reduce employees' exposure to hazardous chemicals and physical hazards.

- Chemical Fume Hood Specialty Hood (describe) _____
 Glove box Vented gas cabinet Explosion Shield
 Other (describe) _____

Personal protective equipment: All personnel are required to wear the following personal protective equipment whenever performing this process. *Check all that applies:*

- Safety glasses Chemical safety goggles Face shield
 Lab coat Rubber apron Tyvek clothing Respirator type _____
 Gloves type/use: Incidental Contact: _____ Extended Contact: _____
 Proper lab attire Other (describe) _____

Emergency Controls: First aid kit Spill kit Eyewash/Shower
 Other _____

Significant Routes of Chemical Exposures: N/A

<input type="checkbox"/> Skin/eye contact-symptoms: First aid:

<input type="checkbox"/> Ingestion - symptoms: First aid:
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<input type="checkbox"/> Inhalation – symptoms: First aid:

Emergency shutdown/Evacuation procedures:

Spills/Decontamination: N/A

Spill cleanup:

Decontamination:

Waste disposal: The authorized person using this process is responsible for the safe collection, handling and storage of chemical waste managed in accordance with all government regulations and AU policies and procedures. Provide any process specific details.

