**Standard Operating Procedure (SOP) Template: Chemical**

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| **SOP Title:** |
| **Principal Investigator / Supervisor:** |
| **Date Enacted:** |
| **Step-By-Step Protocol:**  *supporting pictures/schematics may be helpful to include**Example:**Step 1. Don appropriate PPE which includes x, y, and z.**Step 2. Ensure the fume hood is turned on.**Step 3. Verify proper fume hood performance.* *Step 4. Stage the fume hood with the following equipment and materials: x, y, z, etc.**.**.**.**Step 15. Appropriately manage chemical waste.**Step 16. Remove chemicals from the fume hood and clean the work surface.* *Step 17. Doff and appropriately store/dispose of PPE.**Step 18. Wash hands before leaving the lab.*  |
| **Risk Identification:** *select all that apply*

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| **Chemical Hazards** | **Process Factors** |
| [ ]  Corrosive | [ ]  Radionuclide |
| [ ]  Flammable | [ ]  Laser |
| [ ]  Oxidizer | [ ]  Heat |
| [ ]  Toxic  | [ ]  Cold |
| [ ]  Carcinogen / Mutagen | [ ]  High voltage |
| [ ]  Water-Reactive |  |
| [ ]  Pyrophoric |  |
| [ ]  Explosive |  |
| [ ]  Other. Please describe: | [ ]  Other. Please describe: |

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| **Engineering Controls:** *select all that apply*

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| [ ]  Fume hood | [ ]  Cages/Isolators/Growth Chambers |
| [ ]  Glovebox (inert atmosphere) | [ ]  Safety needles |
| [ ]  Handwashing sink | [ ]  Mechanical aspirators  |
| [ ]  Other. Please describe:  |

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| **Safety Training:** *select all that apply*

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| [ ]  [EH&S Laboratory Safety Training (annual)](https://www.ehs.msstate.edu/focus-areas/chemical-hygiene/training) |
| [ ]  [EH&S Hazardous Waste Training (annual)](https://www.ehs.msstate.edu/focus-areas/hazardous-waste/training) |
| [ ]  [Other EH&S Training(s)](https://www.ehs.msstate.edu/training). Please describe:  |
| [ ]  Principal Investigator / Supervisor Provided Safety Training;  |
| [ ]  Other training. Please describe:  |

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| **Personal Protective Equipment (PPE):** *select all that apply*

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| **Body PPE** | **Hand PPE** |
| [ ]  Long pants | [ ]  Disposable gloves. Material:  |
| [ ]  Polyester lab coat / gown  | [ ]  Reusable chemical resistant gloves |
| [ ]  Disposable lab coat / gown  | [ ]  Puncture resistant gloves |
| [ ]  Coverall  | [ ]  Cold resistant gloves |
| [ ]  Chemical-resistant coat / gown / apron | [ ]  Heat resistant gloves |
|  |
| **Eye/Respiratory PPE** | **Foot PPE** |
| [ ]  Safety glasses / goggles  | [ ]  Full-coverage shoes |
| [ ]  Face shield  | [ ]  Shoe covers |
| [ ]  Surgical / dust mask | [ ]  Fluid-impervious boots |
| [ ]  Tight-fitting respirator (e.g. N95) |  |
| [ ]  Half- / Full-face respirator |  |
| [ ]  Powered air purifying respirator (PAPR) |  |
| [ ]  Other. Please describe:  |

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| **Emergency Procedures:** *select all that apply*

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| [ ]  [Chemical spill responses](https://www.ehs.msstate.edu/sites/www.ehs.msstate.edu/files/2024-11/Chemical%20Spill%20Guidance.pdf) handled in accordance with EH&S Guidance |
| [ ]  Injuries responded to in accordance with [EH&S Guidance](https://www.ehs.msstate.edu/sites/www.ehs.msstate.edu/files/2024-06/240627_MSU%20Chemical%20Hygiene%20Plan%202024.pdf) and [reported to OCRM](https://www.ocrm.msstate.edu/reporting/workplace-injury).  |

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**Acknowledgement:**

I attest that I understand and will adhere to the precautions outlined in this SOP.

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| **First & Last Name (print)** | **Date (MM/DD/YYYY)** | **Signature** |
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