**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*   |  |  | | --- | --- | | **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: | |
| **Engineering Controls:** *select all that apply*   |  |  | | --- | --- | | Fume hood | Cages/Isolators/Growth Chambers | | Glovebox (inert atmosphere) | Safety needles | | Handwashing sink | Mechanical aspirators | | Other. Please describe: | | |
| **Safety Training:** *select all that apply*   |  | | --- | | [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: | |
| **Personal Protective Equipment (PPE):** *select all that apply*   |  |  | | --- | --- | | **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: | | |
| **Emergency Procedures:** *select all that apply*   |  | | --- | | [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). | |

**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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