

**INFECTIOUS AGENT  
BSL-2 STANDARD OPERATING PROCEDURES**

PI Name: \_\_\_\_\_

Laboratory Location (Bldg & Room No.): \_\_\_\_\_

Agent(s): \_\_\_\_\_

Hazard(s): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date: \_\_\_\_\_

PI's Signature: \_\_\_\_\_

**NOTE: Your signature indicates verification that your laboratory is in compliance with the following SOPs.**

1. The following appropriate immunizations or tests for the agents handled or potentially present in the laboratory (e.g., hepatitis B vaccine or TB skin testing) have been offered to laboratory and appropriate support personnel (if N/A, state so and explain why it is N/A): \_\_\_\_\_  
\_\_\_\_\_
2. Baseline serum samples for laboratory and other at-risk personnel are / are not (**check one**) collected and stored. Storage location (if applicable): \_\_\_\_\_.
3. Access to the laboratory is limited or restricted when work with infectious agents or organisms containing recombinant DNA molecules is in progress. Yes    No
4. A sign incorporating the universal biohazard symbol is posted on the access door to the laboratory work area identifying the laboratory's biosafety level (BSL-2), required immunizations, any personal protective equipment required for entry or work with the agent, any procedures required for exiting, and the name and telephone number of the PI when work is in progress infectious agents are present. Only persons who have been advised of the potential hazard and meet specific entry requirements may enter the laboratory or animal rooms. Persons who are at increased risk of acquiring infection are not allowed in the laboratory when work with infectious agents is in progress. Entry requirements (e.g. protective equipment, immunizations) are as follows: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.
5. Spills and accidents which result in overt exposures to infectious materials should be immediately reported to \_\_\_\_\_ (the laboratory director or other appointed person). Medical evaluation, surveillance, and treatment will be provided as appropriate and written records will be maintained. Spills and accidents which result in overt exposures to organisms containing recombinant DNA molecules will be immediately reported to the Institutional Biosafety Committee and NIH/ORDA.
6. The biohazard symbol is used to identify equipment, containers, rooms and materials that contain or are contaminated with viable hazardous agents. Yes    No
7. Eating, drinking, smoking, handling contact lenses, applying cosmetics and storing food for human consumption are prohibited in the lab. Food shall be stored outside the work area in cabinets or refrigerators designated and used for this purpose only located \_\_\_\_\_.
8. Animals and plants not involved in the work being performed are not permitted in the lab. Yes    No
9. Mechanical pipetting devices shall be used; mouth pipetting is prohibited. Yes    No
10. All procedures shall be performed carefully to minimize splashes or aerosols. Yes    No
11. Plasticware should be substituted for glassware whenever possible. Glass may be used only for: \_\_\_\_\_  
\_\_\_\_\_.
12. Broken glassware should not be handled directly by hand. A brush and dustpan is located: \_\_\_\_\_  
\_\_\_\_\_.
13. Contaminated equipment is labeled as such or decontaminated prior to servicing or shipping. Yes    No
14. Needles and other sharp instruments are restricted for use only when there is no alternative, such as parenteral

injection, phlebotomy, or aspiration of fluids from laboratory animals and diaphragm bottles. Only needle-locking syringes or disposable syringe needle units (i.e., needle is integral to the syringe) are used for injection or aspiration of infectious materials. Syringes which re-sheathe the needle, needle-less systems, and other safe devices are used when appropriate. Yes No

15. Used, disposable needles are not bent, sheared, broken, recapped, removed from disposable syringes or otherwise manipulated by hand before disposal. Yes No

16. A biological safety cabinet (BSC) is used whenever procedures with a potential for creating infectious aerosols or splashes are conducted (including pipetting, centrifuging and opening centrifuge safety cups, grinding, blending, shaking, mixing, sonicating, opening containers of infectious materials, inoculating animals intranasally, and harvesting infected tissues from animals or embryonate eggs) or high concentrations or large volumes of infectious agents/organisms containing recombinant DNA molecules are used. Procedures expected to be performed in the BSC include: \_\_\_\_\_

17. Contaminated items generated inside the BSC are to be placed into a biohazard bag or discard tray inside the BSC which contains a disinfectant or is closed or covered before removal from the BSC. Yes No

18. When microorganisms must be manipulated outside the BSC, face protection (goggles, mask, face shield or other splatter guards) will be used. Procedures which may will be performed outside the BSC with such protection include: \_\_\_\_\_

Face protection is available \_\_\_\_\_

19. Personal protective equipment (PPE) to be worn is as follows:

- |             |            |
|-------------|------------|
| Task: _____ | PPE: _____ |
| Task: _____ | PPE: _____ |
| Task: _____ | PPE: _____ |
| Task: _____ | PPE: _____ |
| Task: _____ | PPE: _____ |

20. All protective equipment is removed after use and prior to leaving the laboratory. Disposable protective equipment is to be discarded (location) \_\_\_\_\_.

Contaminated launderable items are placed \_\_\_\_\_.

21. Persons are expected to wash their hands after handling hazardous materials, organisms containing recombinant DNA molecules or animals; after removing gloves; and before exiting the laboratory. A handwashing facility is located \_\_\_\_\_.

22. An eyewash is located \_\_\_\_\_.

23. Laboratory equipment and work surfaces, including the interior surfaces of BSCs, are decontaminated upon completion of work and after any spill or splash of potentially infectious material with a disinfectant that is effective against the agent of concern. Disinfectant used: \_\_\_\_\_.

24. Cultures, tissues, specimens of body fluids, or contaminated items are placed in a labeled container with a cover that prevents leakage during collection, handling, processing, storage, transport (including transport from inside a BSC to outside the BSC), or shipping. Yes No

25. Biomedical waste is disposed via autoclaving / vendor (**check one**). If autoclaved, waste containers are placed in a leakproof container and then on a cart for transport to the autoclave located \_\_\_\_\_.

26. Spore strips or vials are used weekly to ensure proper autoclave function. The person responsible for spore strip/vial use and documentation is \_\_\_\_\_.

The documentation is located \_\_\_\_\_.