		Department:	Central Processing Lab
Wake Forest®	CP 24 - Working in the	Effective Date:	1/15/2019
Baptist Medical Center	Biosafety Cabinet	Revised Date:	1/10/2019
		Contact:	Central Processing Lab
			Section Manager
CLIA Medical Director Signature:		Approved Date:	1/11/2019
Gregory Pomper, MD (Signature on file)			1/11/2017

1) General Procedure Statement:

a. **Purpose:** To provide laboratory testing personnel with guidelines for working in the biosafety cabinet.

b. Responsible Department/Scope:

i. Procedure owner/Implementer: Central Processingii. Procedure prepared by: Jennifer Hausman

iii. Who performs procedure: Central Processing Team Members

2) Procedure:

Working in the Biosafety Cabinet

Note: Appropriate personal protective equipment (PPE) must be worn when working in the biosafety cabinet

- a. Ensure the UV light is off
- b. Slowly raise the sash until the bottom of the sash aligns with the sash indicator decal located on the left side of the work area
 - i. The light and blower should turn on automatically when the sash is raised
- c. Ensure the air grilles are not obstructed
- d. Wait for start up to complete
 - i. "please wait!" will appear on screen during start up
- e. Place samples into the biosafety cabinet
- f. Process/aliquot samples, using sterile technique, as far to the rear of the work area as possible, but at least 4 inches inside from the sash

- g. Dispose of contaminated supplies in the "Discard" bin inside of the cabinet
 - i. Discard bin will be changed as needed, by placing the cover on the bin and discarding the closed bin in the stericycle waste
- h. Surface disinfect all materials before removing from the cabinet
- i. Upon completion of work, allow the cabinet to remain on for 2-3 minutes undisturbed, to purge airborne contaminants, and wipe down any visible spills
 - i. If a spill or splatter occurs during use, surface disinfect all objects in the cabinet with disinfecting spray before removal
 - ii. Disinfect the inside of the cabinet and all objects WHILE CABINET IT IS IN OPERATION, to prevent the release of contaminants

3) Review/Revision/Implementation:

All procedures must be reviewed at least every 2 years.

- All new procedures and procedures that have major revisions must be signed by the Department Chairman.
- All reviewed procedures and procedures with minor revisions can be signed by the designated section medical director.
- 4) Related Procedures: N/A
- 5) References:
 - a. Labconco Purifier Logic+ Biological Safety Cabinets User's Manual, Part #3848310 Rev. E
- 6) Attachments: N/A

7) Revised/Reviewed Dates and Signatures:

Review Date	Revision Description	Signature
1/10/2019	Original Document Written	Jennifer A. Hausman, MLS(ASCP)SBB ^{CM}