Current Status: *Active* **PolicyStat ID:** *8784916*

Origination: *7/6/2020*
Effective: *11/6/2020*
Last Approved: *11/6/2020*
Last Revised: *11/6/2020*
Next Review: *11/6/2022*
Document Contact: *Jennie Green: Mgr Laboratory*
Area: *Laboratory-Safety*
Key Words:
Applicability: *All Beaumont Hospitals*

Laboratory Chemical Hygiene Plan

Document Type: Plan

I. PURPOSE AND OBJECTIVE:

A. Purpose and Objective:
The Hazard Communication Plan/Chemical Hygiene Plan is required by Part 431 of the Michigan Occupational Safety and Health Act governing hazardous work in laboratories and supersedes federal regulations in Michigan to ensure that information is transmitted to employees about the chemical hazards that they are exposed to. This is accomplished through labels, safety data sheets, instructions, written information, training and other forms of warning.
The Laboratory Chemical Hygiene Plan references several founding Beaumont Health hospital safety policies. These policies can be found in:

1. Hospital Safety Policies: Royal Oak, Troy, Grosse Pointe Hospital Safety Policies, Oakwood Health Care Policies, and Botsford Health Care Policies
2. References to MIOSHA (Michigan Occupational Safety and Health Administration) Safety and Health Standards Part 431. Hazardous Work in Laboratories can be found at: MIOSHA Standards, Part 431. Hazardous Work in Laboratories
3. References to MIOSHA Occupational Health Standards, Part 430. Hazard Communication can be found at: MIOSHA Standards Part 430. Hazard Communication
4. References to MIOSHA Personal Protective Equipment can be found at: General Industry Safety and Health Standard Part 433. Personal Protective Equipment
5. References to OSHA (United States Department of Labor – Occupational Safety and Health Administration) 29 CFR Standards can be found at: OSHA 29 CFR Standards

B. The Michigan Occupational Safety and Health Administration (MIOSHA) Safety and Health Standard requires that Beaumont Laboratory employees work cooperatively in providing a safe and healthful work environment with training, evaluations and periodic meetings that ensure that all staff are aware of and comply with safeguards that are in place to limit accidents and injuries by the following basic rules. MIOSHA Standards, Part 431.

1. Institute a Chemical Hygiene Program at the Work Site
2. Avoid Underestimation of Risk
3. Provide Adequate Ventilation When Working with Chemicals

4. Minimize Chemical Exposures
5. Observe the Permissible Exposure Limits (PEL's) and Threshold Limit Values (TLV's) as defined by the Safety Data Sheets
(SDS) for all chemicals in use at the work site.

C. The College of American Pathologists (CAP) has specific requirements for the laboratory Chemical Hygiene Plan in the Laboratory General Checklist. This Chemical Hygiene Plan meets each of these requirements in Section XII.

II. PROCUREMENT/HAZARD DETERMINATION/ CHEMICAL INVENTORY:

A. Refer to Hospital Safety document: Hazard Communication Program

B. **Procurement**: Before a substance is received, information on proper handling, storage, and disposal should be known to those who will handle, store, work with or dispose of the substance.

C. **Laboratory storage**: Amounts stored should be as small as practical. A laboratory means a facility where the use of hazardous chemicals occurs. It is a workplace where relatively small quantities of hazardous chemicals are used on a non production basis. Laboratory scale means work with substances in which the containers used for reactions, transfers, and other handling of substances are designed to be easily and safely manipulated by one person.

D. **Distribution**: When chemicals are hand carried outside of the immediate work area, the container should be placed in an outside container or bucket. Freight only elevators should be used if possible.

E. Information supplied by the manufacturers will be relied upon for the hazard determination. It is the policy of Beaumont Laboratory to request a safety data sheet for each chemical that is used in the workplace.

1. A hazardous chemical means a chemical for which there is statistically significant evidence based on at least one study conducted in accordance with established scientific principles that acute or chronic health effects may occur in exposed employees.
2. A physical hazard means a chemical for which there is scientifically valid evidence that it is a combustible liquid, compressed gas, explosive, flammable, organic peroxide, oxidizer, pyrophoric, unstable (reactive) or water-reactive.
3. A health hazard includes chemicals which are carcinogens, toxic or highly toxic agents, reproductive toxins, irritants, corrosives, sensitizers, hepatotoxins, nephrotoxins, neurotoxins, agents which act on the hematopoietic systems and agents which damage the lungs, skin, eyes, or mucous membranes.

F. The laboratory uses some hazardous chemicals that provide no potential for employee exposure. Examples of such conditions include:

1. Chemically impregnated test media such as dip and read tests where a reagent strip is dipped into the specimen to be tested; and commercially prepared kits, such as pregnancy tests, in which all of the reagents needed to conduct the test are contained in the kit.
2. Medications and drugs are considered exempt from the Laboratory Hazard Communication Plan when it is determined that are in solid, final form, for direct administration to the patient (i.e., tablets, pills, capsules, salts, etc.).
3. Consumer products, when it is determined that they are used in the same manner and with no more frequency than a normal consumer would use them.

G. The chemical inventory is monitored and training updates are coordinated by the Chemical Safety Officer, Department Manager(s), and/or Laboratory Safety Officer(s) and updated whenever one or more of the following occurs:

1. A new hazardous chemical is introduced into the workplace.
2. A hazardous chemical has been removed from use in the workplace.
3. The hazardous chemical determination process is reviewed during annual self-inspection to verify that it is current and any new safety situations are promptly addressed. The annual self-inspection of hazardous chemicals is delegated as per the department manager's discretion and communicated to the Laboratory Safety Officer(s).

III. HOUSEKEEPING, INSPECTION & MAINTENANCE RESPONSE:

A. Refer to MIOSHA Part 431, Appendix A, Part D, Section 4, Inspection Program

B. Housekeeping: Floors should be cleaned regularly.

C. Inspections: Lab Department safety and chemical hygiene inspections should be held annually.

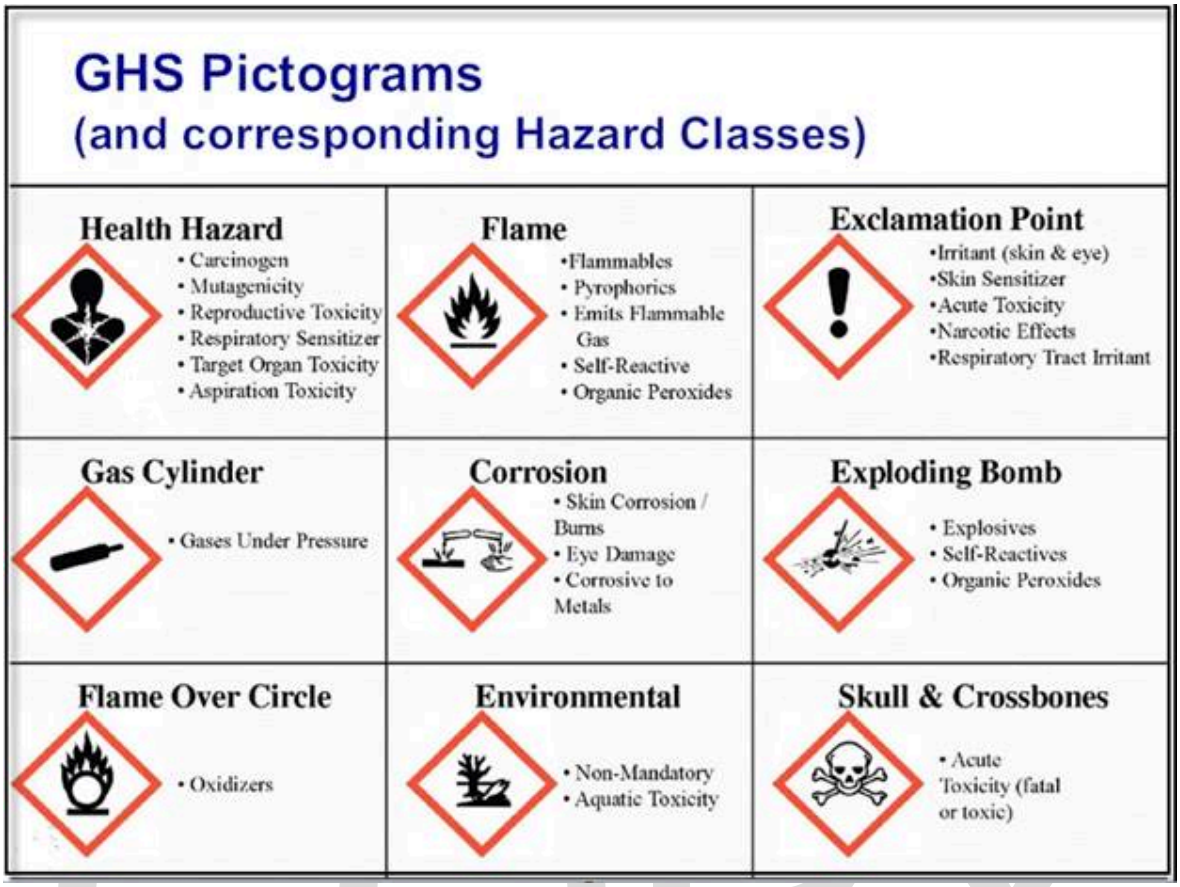
D. Passageways: Stairways and hallways should not be used as storage areas. Access to exits, emergency equipment, and utility controls should never be blocked.

E. Maintenance (As applicable): Eye wash fountains and safety showers should be inspected at regular intervals and routinely tested

1. Hospital Safety Manuals: Eye Wash Stations and Shower Equipment
2. Other safety equipment should be inspected regularly (e.g., every 3 6 months).
3. Respirators (if supplied) for routine use should be inspected periodically by the laboratory manager. Hospital Safety Manual: Respiratory Protection Plan
4. Procedures to prevent restarting of out of service equipment must be established. Hospital Safety Manual: Lock Out/Tag Out Policy. These records are maintained by Beaumont Facilities Management.

IV. HAZARD LABELING SYSTEM:

A. In accordance with the MIOSHA Standards, Part 431 and MIOSHA Hazard Communication Standards, Part 430, chemical hazard labels are to be legible, in English, and displayed either on the container (of the product) or readily available in the work area throughout each work shift. The immediate work area is defined as the room where the product will be used by the employee. In keeping with the interpreted intent of the law, it is policy to ensure that the employee is familiar with the hazards they have contact with and that there is a label available to remind or warn them of the hazards.
HCS = Hazard Communication Standard
https://www.osha.gov/Publications/OSHA3491QuickCardPictogram.pdf



B. A label will be provided for each chemical product on a primary container that will include the following:
    1. Product identifier/name of chemical
    2. Signal word (either Danger or Warning)
    3. Hazard statement(s)
    4. Pictogram(s)
    5. Precautionary statement(s)
    6. Name, address, and telephone number of the chemical manufacturer, importer, or other responsible party

C. A label will be created for any secondary container that contains the information specified on shipped containers OR the product identifier/name and words, pictures, symbols, or combination thereof, which provide at least general information regarding the hazards of the chemicals, and which, in conjunction with the other information immediately available to employees in the Hospital Safety Manual Hazard Communication Program, will provide employees with the specific information regarding the physical and health hazards of the hazardous chemical.

D. Prominent signs or labels of the following types must be posted;
    1. Emergency telephone numbers of emergency personnel/facilities, mangers, and laboratory workers
    2. Identity labels, showing contents of containers (including waste receptacles) and associated hazards
    3. Location signs for safety showers, eyewash stations, other safety and first aid equipment, exits and areas where food and beverage consumption and storage are permitted

4. Warnings at areas or equipment where special or unusual hazards exist

V. CHEMICAL SPILL RESPONSE:

A. Refer to MIOSHA Part 431, Appendix A, Part D, Section 8, Spills and Accidents

B. The initial step in controlling any type of spill is prevention. All hazardous chemicals should be handled with care and with appropriate Personal Protective Equipment (PPE). The cleanup process for spills is much more costly than slowing down to be cautious when working with these items.

C. Spill Control Policy for Beaumont Laboratory: Hospital Safety policies: Spill Response Plan and specific laboratory spill policies

D. All accidents or near accidents should be carefully analyzed with the results distributed to all who might benefit. In the event of a chemical spill, the safety data sheet will be referred to for proper spill response procedures. These will include appropriate materials to be used for collection of the material (i.e., absorbents, spill kit materials), as well as protective measures to be taken with the particular product. Below, are outlined some basic steps for responding to a chemical spill should one occur:

1. Alert people in all parts of the facility that could be impacted including isolation areas such as cold rooms - if applicable.
2. Determine what has been spilled and locate the safety data sheet (SDS) for the product.
3. If the product is toxic, evacuate personnel from the area.
4. Provide adequate ventilation as described on the SDS.
5. Try to contain the spill from spreading with absorbent material. **If the spill is larger than what can be cleaned with the contents of one spill kit, contact Security, who will initiate the facility spill response**.
6. Cleanup personnel must use proper personal protective equipment as described for spill response (within the SDS).
7. If the SDS is incomplete, professional judgment will be used in the absence of specific spill response information. The manufacturer may be contacted for further information, if time allows.
8. Dispose of clean up materials as recommended by the manufacturer and in accordance with local, state and federal regulations. Ensure that materials saturated with flammable liquids are placed into containers that will limit the potential for combustion and subsequent fire hazards.
9. Spill incidents should be documented by the Laboratory department manager and involved employee(s) using the Beaumont Laboratory Safety Root Cause Analysis (RCA) form. The form should be forwarded it to the Laboratory Safety Officer for review and discussion with other staff so that recurrence of the incident can be avoided.
10. Large Spills that require the assistance of the hospital security and hospital safety department should follow the hospital safety Spill Response Plan and document the spill incident using the Corporate Hospital Chemical Spill Form. The large spill should also be documented on the Laboratory Safety RCA form and forwarded to the Laboratory Safety Officer.
11. SPILLED acronym is included in the employee safety training: Secure the area, Protect yourself, Inspect the spill, Locate spill kit, Lay down barrier and absorbents, Extract the mess, Dispose of waste properly.
12. Spill kits are located within each laboratory department that uses hazardous materials.

VI. MEDICAL PROGRAM:

A. Refer to MIOSHA Standards, Part 431 Medical Consultation and Examinations

B. Regular medical surveillance will be established to the extent required by regulations (per SDS's) at Beaumont Laboratory.

C. Routine surveillance - as necessary (Per SDS's). Anyone at Beaumont Laboratory whose work involves regular and frequent handling of toxicologically significant quantities of a chemical will be referred to a qualified physician to determine on an individual basis whether a regular schedule of medical surveillance is desirable.

D. Personnel trained in first aid will be available during working hours and an emergency room with medical personnel should be nearby. The nearest emergency room is located at:

1. Beaumont-Dearborn, 18101 Oakwood Blvd., Dearborn, MI 48124
2. Beaumont-Farmington Hills, 28050 Grand River Ave., Farmington Hills, MI 48336
3. Beaumont-Grosse Pointe, 468 Cadieux Rd., Grosse Pointe, MI 48230
4. Beaumont-Royal Oak, 3601 W. 13 Mile Rd., Royal Oak, MI 48073
5. Beaumont-Taylor, 10000 Telegraph Rd., Taylor, MI 48180
6. Beaumont-Trenton, 5450 Fort St., Trenton, MI 48183
7. Beaumont-Troy, 44201 Dequindre Rd., Troy, MI 48085
8. Beaumont-Canton, 7300 N. Canton Center Rd, Canton, MI 48187
9. Beaumont-Wayne, 33155 Annapolis St., Wayne, MI 48184

VII. PERSONAL PROTECTIVE EQUIPMENT (PPE) SELECTIONS, PROVISION, USE AND ACCESSIBILITY:

A. Refer to MIOSHA Standards, Part 431 and Appendix A, Part A-General Principles

B. PPE is provided to employees of Beaumont Laboratory for the protection of eyes, face, head and extremities, where there is a potential for injury or impairment in the function of the body through absorption, inhalation or physical contact. Hospital Safety Manual: Personal Protective Equipment-MIOSHA

C. The PPE for employees has been selected based upon the type of task being performed and the degree of exposure anticipated from the hazard to which the employee has been exposed. Equipment is maintained in accordance with manufacturers' guidelines to ensure its proper functioning and is available in sizes to fit all staff.

D. The use of personal protective equipment is a condition of employment. Employees who disregard the proper use of personal protective equipment when required for their job assignment may be subjected to retraining and follow up at the manager's discretion.

E. Annual review regarding personal protective equipment will include:

1. When PPE is required to be used
2. What PPE is necessary for specific tasks

3. How to properly wear, use and adjust PPE,
4. The proper care, maintenance, limitations, useful life and disposal of PPE
5. Other items designated by the laboratory manger may be required

F. Examples of PPE provided and their intended use at Beaumont Laboratory are as follows:

1. Fire Extinguishers
2. Fire Alarms
3. Emergency Phones
4. Safety Showers
5. Eyewash Fountain(s)
6. Safety Goggles/glasses
7. Lab Coats
8. Masks

G. Lab coats, gowns or other protective clothing are worn whenever there is the reasonable potential for the soiling of clothes when working with hazardous chemicals or blood and body fluids. The protective garments have been selected to meet the type and amount of soiling expected to be present during a specific task. The safety data sheets of hazardous chemicals will be reviewed to select proper PPE for a given product.

H. Protective Eye Wear, Masks, and Shields: Protective eye wear and/or masks are worn whenever there is the potential for the generation of splashes, spills, spray, splatter, droplets, or aerosols of chemicals and there is the potential for eye, nose or mouth contamination. Appropriate eye wear, masks, or shields will be worn as recommended by the manufacturer of a hazardous product.

I. Gloves: When working with hazardous chemicals, blood or body fluids, gloves will be worn according to manufacturer recommendations. General-purpose gloves, not used in direct patient care, may be decontaminated and reused. Gloves are not to be used if they are peeling, cracking or discolored, or if they have punctures, tears or other evidence of deterioration.

J. Maintenance and Replacement of PPE: Beaumont Laboratory will periodically survey PPE to ensure its condition allows for the intended protection of the employee. Employees will immediately notify managers of any damage or defects that make the PPE incapable of properly protecting them. Repair and/or replacement of personal protective equipment are provided by the employer as needed to maintain its effectiveness.

K. Necessary cleaning, laundering or disposal of personal protective equipment is provided by Beaumont Laboratory. Linens are NOT to be taken home by the employee for laundering.

L. Employees will not be responsible for the cost of any personal protective equipment that is required to protect them from exposure to chemical or biohazards in the workplace.

VIII. RECORDS:

A. Refer to MIOSHA Standards, Part 431 Recordkeeping

B. Accident records must be written with any follow up or corrective actions taken noted.

C. Chemical Hygiene Plan records must document that the facilities and precautions were compatible with

current knowledge and regulations.

D. Inventory and usage records for high risk substances, if present, will be kept by Beaumont Laboratory. Records of the amounts of these materials on hand, amounts used, and the names of the workers involved (if an accident occurs) will be maintained.

E. Medical records – Beaumont Health Employee Health and Safety department will establish and maintain for each employee an accurate record of any measurements taken to monitor employee exposures and any medical consultation and examinations including tests or written opinions required by the MIOSHA Recordkeeping standard. Beaumont Health Employee Health and Safety department will assure that such records are kept, transferred, and made available. All medical records will be retained by Beaumont Health Employee Health and Safety department in accordance with the requirements of state and federal regulations for at least the duration of employment plus 30 years. MIOSHA Recordkeeping standard in accordance with OSHA 29 CFR 1910.1020(d)(1)(i) Sub part Z, Toxic and Hazardous Substances, Assess to employee exposure and medical records.

IX. SAFETY DATA SHEETS:

A. Refer to MIOSHA Standards, Part 431 Employee Information and Training, (h) Hazard Identification

B. Safety data sheets (SDS) are maintained at Beaumont Laboratory to comply with MIOSHA's Hazardous Work in Laboratories Standard. Hospital Safety Manual: Hazard Communication Program

C. Safety data sheets contain useful information regarding the hazards associated with products or chemicals used in the facility. Employees are not required to memorize the information contained within the data sheets but are provided with training so that they can locate them and find information such as:

1. Flammability Hazard, Reactivity Hazard, Health Hazard, Precautions for Safe Handling and Use, and Control Measures
2. This information will ensure that chemicals and products are used in a safe manner and that employees are aware of the hazards associated with those items.
    a. It is the responsibility of Beaumont Laboratory to have safety data sheets available for each hazardous chemical or product used in the facility. The suppliers and manufacturers of such products are required to supply material safety data sheets along with the first order of each product. If a safety data sheet is not received with a first order, one will be requested.
    b. The annual review of the Laboratory department's hazardous chemicals' SDS in the Online Michigan Safety Data Sheets (MSDS) application is delegated as per the department manager's discretion. Completion of the review and any new chemical SDS that needs to be uploaded into the application is communicated to the Laboratory Safety Officer(s).
    c. In order for hazard labeling to be completed, certain information must be provided on the SDS. If any necessary information is missing, the manufacturer will be contacted in order to obtain it.
    d. The location of the material safety data sheets must be posted in the laboratory.
    e. When new or revised data sheets are received, they should be posted on the employee bulletin board for review by employees before they are included in the designated SDS file.
3. If an SDS is removed because it has been revised or the product is no longer used, the data sheet must be marked with the date it was removed and then placed in a separate file of archived data sheets. These data sheets are to be retained for 30 years from the date of removal from the active file.

4. SDS sheets for Beaumont Laboratory are located on the Beaumont Intranet, under the Documents section. Quick Link: Beaumont Intranet Online MSDS

X. WASTE MANAGEMENT:

A. Refer to MIOSHA Part 431, Appendix A, Part D - Chemical Hygiene, Section 3-Waste Management

B. Chemical waste (or hazardous products) is disposed of in accordance with information provided on the SDS by the products manufacturer at Beaumont Laboratory, Corporate Safety: Hazardous Materials and Waste Management Plan

C. Should the SDS fail to provide adequate instruction, the manufacturer is contacted by telephone for further information on proper disposal of the product.

D. If the chemical waste has become contaminated with blood or other potentially infectious materials, then it will be disposed of in accordance with the guidelines set forth in the medical waste management plan located at Beaumont Laboratory and in the Hospital Safety documents.

1. Content: The waste disposal program at Beaumont Laboratory must specify how waste is to be collected, segregated, stored, and transported and include consideration of what materials can be incinerated.
2. Aim: To assure that minimal harm to people, other organisms, and the environment will result from the disposal of waste laboratory chemicals. Transport from the institution must be in accordance with Department of Transportation (DOT) regulations.
3. Discarding Chemical Stocks: Containers of chemicals and solutions (primary and secondary) must undergo prompt and proper disposal according to the product's SDS and MIOSHA standards for Waste Management. If necessary, refer to the Safety document: Hazardous Materials and Waste Management Plan.
4. Frequency of Disposal: Waste should be removed from laboratories to a central waste storage area at least once per month and from the central waste storage area at regular intervals.
5. Method of Disposal: Incineration in an environmentally acceptable manner is the most practical disposal method for combustible laboratory waste. Indiscriminate disposal by pouring waste chemicals down the drain or adding them to mixed refuse for landfill burial is unacceptable. Hoods must not be used as a means of disposal for volatile chemicals.
6. Disposal by recycling or chemical decontamination should be used when possible Beaumont Laboratory Waste Disposal Plan is within the Safety document: Hazardous Materials and Waste Management Plan

XI. EMPLOYEE INFORMATION AND TRAINING:

A. Refer to MIOSHA Standards, Part 431 Employee Information and training

B. The Laboratory Safety Committee will determine the safety training and education program conducted for Beaumont Laboratory. The Laboratory New Employee Safety Training can be found in the Laboratory Education manual for the individual hospitals.

C. All Safety training records will include the following information and will be retained as per the CAP (College of American Pathologists) Personnel Training accreditation standards. Documentation of the training will be maintained in employee personnel files or in a master training file.

D. Before any new hazardous chemical is introduced into the workplace, each employee will be given

information in the same manner as during the initial safety training.

E. Before starting work, at the time of their initial assignment, each new employee at Beaumont Laboratory will be assigned to a series of training modules.

F. In those modules, each employee will be given information on:

1. Location and availability of this Chemical Hygiene Plan
2. Details of the written Chemical Hygiene Plan
3. Chemicals and their hazards in the workplace.
4. PEL's for MIOSHA regulated substances or exposure limits in use at Beaumont Laboratory. This information is in the SDS
5. How to lessen or prevent exposure to these chemicals.
6. Signs and symptoms associated with exposure to hazardous chemicals.
7. What Beaumont Laboratory has done to lessen or prevent workers' exposure to these chemicals
8. Protective measures employees can take to protect themselves from chemical exposures, such as PPE, work practices, and emergency procedures.
9. Methods and observation that may be used to detect the presence of, or release of a hazardous chemical such as monitoring and the visual or odor of hazardous chemicals when being released.
10. Procedures to follow if they are exposed.
11. How to read and interpret labels and SDS's.
12. Where to locate SDS's Beaumont Laboratory and from whom they may obtain copies.

G. The employee will be informed that:

1. Beaumont Laboratory is prohibited from discharging, or discriminating against, an employee who exercises the rights regarding information about hazardous chemicals in the workplace.
2. As an alternative to requesting an SDS from Beaumont Laboratory, the employee may obtain a copy from Consumer and Industrial Services at the Michigan Department of Community Health. A sign labeled "LARA" (Licensing and Regulatory Affairs) will be posted with the address and telephone number of the department/individual responsible for such requests.

XII. ADDITIONAL CHEMICAL OR PHYSICAL HAZARDS IN THE LABORATORY:

A. **Compressed Gases**: Compressed gases, both flammable and non-flammable, are used in many areas of the laboratory. Regardless of the size of tank or type of gas used, hospital safety policies should be observed. Refer to Portable Medical Gas Cylinders.

B. **Sodium Azide**: Sodium azide is used as a chemical preservative in laboratories. The amounts involved are generally very small. Waste products containing low concentrations of sodium azide are commonly discarded into a laboratory's drain system. Sodium azide can slowly react with both copper and lead to produce explosive metal azides. Brass or copper drain pipes or cast iron pipes with lead joints may form copper or lead azides. The explosive azides may be detonated directly by shock, friction, heat, electrical discharges, and other energy sources such as concussion from hammers, chisels and wrenches. Formation of metallic azides is minimized by thoroughly flushing drains with water when discarding solutions containing sodium azide. Discard while flushing with a fast flow of water and allow water to run

for 2-3 minutes after dumping.

C. **Cryogenic liquids**: Working with cryogenic liquids involves significant health and safety hazards. Refer to the hospital safety policy Safe Use and Handling of Cryogenic Materials.

D. **USP (United States Pharmacopeia) 800 Hazardous Drugs-Handling in Healthcare Settings (2017**): "Describes practice and quality standards for handling hazardous drugs to promote patient safety, worker safety and environmental protection. Handling HDs includes, but is not limited to, the receipt, storage, compounding, dispensing, administration and disposal of sterile and non-sterile products and preparations." A risk assessment was performed to evaluate how these guidelines applied to laboratory services. Current laboratory requirements for handling specimens and spill clean-up are appropriate for specimens that may contain hazardous drugs. No changes to current laboratory practices are needed to comply with the USP 800 guidelines. Risk assessment attached. For further information, refer to USP General Chapter <800> Hazardous Drugs-Handling in Healthcare Settings.

XIII. CHEMICAL HYGIENE PLAN REQUIREMENTS FOR THE COLLEGE OF AMERICAN PATHOLOGISTS (CAP):

A. **Laboratory Director**

1. Implementation and on-going support of safe practices in the laboratory
2. Provide facilities and equipment adequate to reasonably protect employees against potential hazards posed by chemicals in the laboratory
3. Inform supervisors of any new policies, procedures or other requirements of outside agencies
4. Encourage a positive attitude toward safe laboratory practices through periodic inspections, review of procedures, onsite inquiries about safety issues and exhibition of a concern for their well-being
5. May delegate responsibilities to a Chemical Hygiene Officer, who may also serve as Laboratory Safety Officer

B. **Manager/Supervisor/Coordinator**

1. Implementation of safe practices in the areas under their direction
2. Inform the employee of proper procedures and protocols and verify that necessary safety equipment is available and properly functional
3. Monitor compliance with established safety requirements and counsel employees who are not complying by re-instructing and, if necessary, instituting disciplinary action
4. Maintain an up-to-date list of hazardous chemicals used in their section and ensure that reagents containing any such chemicals are properly labeled as to hazard
5. Work with the safety officer or laboratory director to establish new procedures for safety as appropriate and may delegate this function to a section representative, if desired

C. **Employee**

1. Inform themselves of any safety requirements in their work area
2. Follow required practices and procedures and should encourage similar safe practices among their coworkers.

3. Participate with their supervisor in developing new recommendations for safe practice by noting any unaddressed hazards.

D. **Laboratory Safety Committee**

1. Reviewing operations within the laboratory through periodic meetings and inspections and making appropriate recommendations both the chemical hygiene plan and the laboratory safety manual, as necessary

E. **Designation of a chemical hygiene officer (or designee) for the following locations:** Current list of assigned officers can be found on the Laboratory Safety Committee Meeting Agenda

1. Beaumont Dearborn (Anatomic Pathology)
2. Beaumont Dearborn (Clinical Pathology)
3. Beaumont Farmington Hills
4. Beaumont Grosse Pointe
5. Beaumont Royal Oak (Anatomic Pathology)
6. Beaumont Royal Oak (Clinical Pathology)
7. Beaumont Taylor
8. Beaumont Trenton
9. Beaumont Troy
10. Beaumont Wayne

F. **Policies for all operations that involve chemicals**

1. The information for using specific chemicals is found in the individual procedures.

G. **Criteria for the use of personal PPE and control devices**

1. The information for using PPE and control devices can be found in the laboratory and hospital safety documents.

H. **Policies for exposure monitoring criteria when permissible levels are exceeded**

1. The information for monitoring criteria can be found in the policy **Hazardous Gases and Vapors**.

I. **Provisions for medical consultations and examinations (Emergency Department)**

1. Beaumont Canton 7300 N. Canton Center Rd., Canton, MI 48187
2. Beaumont Dearborn-18101 Oakwood Blvd. Dearborn, MI 48124
3. Beaumont Farmington Hills-28050 Grand River Ave. Farmington Hills, MI 48336
4. Beaumont Grosse Pointe-468 Cadieux Rd. Grosse Pointe, MI 48230
5. Beaumont Royal Oak-3601 W. 13 Mile Rd. Royal Oak, MI 48073
6. Beaumont Taylor-10000 Telegraph Rd. Taylor, MI 48180
7. Beaumont Trenton-5450 Fort St. Trenton, MI 48183
8. Beaumont Troy-44201 Dequindre Rd. Troy, MI 48085
9. Beaumont Wayne-33155 Annapolis St. Wayne, MI 48184

J. **Provision for training personnel on the elements of the Chemcial Hygiene Plan:** The aspects are covered annually with the online mandatories.

K. **A copy of the OSHA Laboratory Standard, for laboratories subject to US regulations, or (for non-US laboratories) a copy of appropriate local standard.**

L. **Evaluation of the carcinogenic potential, reproductive toxicity and acute toxicity for all chemicals used in the laboratory.** The product label, safety data sheet (SDS), or for chemicals purchased prior to June 1, 2015 with no appropriate SDS, records of investigation by the safety officer may be used for this evaluation. Refer to the MSDS online application located on the Beaumont Intranet under Documents (Beaumont Intranet Online MSDS).

M. **Specific handling requirements for all hazardous chemicals used in the laboratory.**Refer to the laboratory department specific training and the online MSDS.

Attachments

Risk Assessment Lab PPE for USP 800 9_10_20.doc

Approval Signatures

Step Description	Approver	Date
CLIA Site Licensed Medical Directors	Jeremy Powers: Chief, Pathology	11/6/2020
CLIA Site Licensed Medical Directors	Muhammad Arshad: Chief, Pathology	11/4/2020
CLIA Site Licensed Medical Directors	John Pui: Chief, Pathology	11/4/2020
CLIA Site Licensed Medical Directors	Vaishali Pansare: Chief, Pathology	11/4/2020
CLIA Site Licensed Medical Directors	Peter Millward: Chief, Pathology Service Line	11/4/2020
CLIA Site Licensed Medical Directors	Mitual Amin: Chair, Pathology - OUWB	11/4/2020
Policy and Forms Steering Committee Approval (if needed)	Jennie Green: Mgr Laboratory	11/4/2020
Operations Directors	Sarah Britton: Administrator, Laboratory Svcs	11/3/2020
Operations Directors	Amy Knaus: Dir, Lab Operations C	11/3/2020
Operations Directors	Brittnie Berger: Dir, Lab Operations C	10/27/2020
Operations Directors	Elzbieta Wystepek: Dir, Lab Operations B	10/26/2020
Operations Directors	Joan Wehby: Dir, Lab Operations C	10/26/2020
Operations Directors	Kimberly Geck: Dir, Lab Operations B	10/26/2020
Quality Best Practice	Jennie Green: Mgr Laboratory	10/26/2020
	Jennie Green: Mgr Laboratory	10/26/2020

Applicability

Dearborn, Farmington Hills, Grosse Pointe, Royal Oak, Taylor, Trenton, Troy, Wayne