

OHS Registration #: \_\_\_\_\_

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

**STANDARD OPERATING PROCEDURE/APPROVAL FORM  
FOR CARCINOGENS AND HIGHLY TOXIC MATERIALS**

**Instructions:** Please complete this form to request approval to use and possess highly toxic or carcinogenic material from the University Chemical Hygiene Committee as required by Chapter 12 of the University Chemical Hygiene Plan and University Policy 7-37.

**Submit a separate form for each chemical.** Copies of the current guidelines and Chemical Hygiene Plan are available at the DOHS web site: <http://www.udel.edu/OHS/>. For questions, please contact the University Chemical Hygiene Officer at 831-2103.

**Form Updated: January 2007**

**Section I – Information**

1. Principal Investigator(s): \_\_\_\_\_
2. E-Mail Address: \_\_\_\_\_
3. Department: \_\_\_\_\_
4. Address: \_\_\_\_\_
5. Phone Number: \_\_\_\_\_
6. Fax Number: \_\_\_\_\_
7. Lab(s) to be Used: \_\_\_\_\_
8. Chemical: Inorganic Cyanides

**Section II – Use and Storage**

**A. Purchasing**

All purchases of this material must have approval from the Principal Investigator (PI) or authorized personnel before ordering. The user is responsible to ensure that a current Material Safety Data Sheet (MSDS) is obtained unless a current one is already available within the laboratory. Quantities of this material will be limited to \_\_\_\_\_ and/or the smallest amount necessary to complete the experiment.

**B. Authorized personnel**

Please select the general categories of personnel who could obtain approval to use this material:

1.  Principal Investigator
2.  Graduate Students
3.  Undergraduates
4.  Technical Staff
5.  Post Doctoral Employees
6.  Other (Describe): \_\_\_\_\_

Please list the specific personnel and their approval level (Attach an addendum to this form for additional personnel):

**NOTE: The Principal Investigator must be aware of all purchases of this material. The Principal Investigator must assure there is not an exceedance of the quantity limits.**

1. _____	<input type="checkbox"/> Purchase	<input type="checkbox"/> Use the Material
2. _____	<input type="checkbox"/> Purchase	<input type="checkbox"/> Use the Material
3. _____	<input type="checkbox"/> Purchase	<input type="checkbox"/> Use the Material
4. _____	<input type="checkbox"/> Purchase	<input type="checkbox"/> Use the Material
5. _____	<input type="checkbox"/> Purchase	<input type="checkbox"/> Use the Material

The Principal Investigator will update this section when any personnel changes occur. If changes occur, document the changes (include the record of training of additional personnel) in the laboratories files and submit an addendum to the University Chemical Hygiene Officer with all training documentation.

### C. Storage

Materials will be stored according to compatibility and label recommendations in a designated area.

- Please list compounds that this chemical is incompatible with:
  - Oxidizing Agents
  - Acids
  - Bases
- Please list special storage requirements (I.E.: Refrigerated, Inert Atmosphere, Desiccated, etc.):
  - DO NOT store near acids, or oxidizing agents. Keep containers securely sealed. Check regularly for spills and leaks.
- Please list specific storage area (This Area Must be Marked and Labeled): \_\_\_\_\_

Storage areas will be inspected by laboratory personnel on a regular basis. Personnel will check for safety concerns such as improper storage, leaking/damaged container(s), damaged labels, quantities in excess of approved limits, theft/disappearance of material, etc. The inspector will also determine if an inventory reduction is possible. The Principal Investigator will designate one individual to complete this inspection.

- Please select an inspection frequency:

- Weekly                       Biweekly  
 Bimonthly                       Monthly

### D. Use location:

Materials shall be used only in the following designated areas.

Check all that apply:

- Demarcated Area in Lab (Describe): \_\_\_\_\_
- Fume Hood                      3. Glove Box
- Other (Describe): \_\_\_\_\_

### Section III – Personnel Safety and Protection

#### **A. Training requirements:**

All users must demonstrate competency and familiarity regarding the safe handling and use of this material prior to purchase. The Principal Investigator is responsible for maintaining the training records for each user of this material. Training should include the following:

1. Review of current MSDS
2. Receive and document chemical waste training
3. Receive and document chemical hygiene training
4. Review of the OSHA Lab Standard
5. Review of the Chemical Hygiene Plan
6. Special training provided by the department/supervisor (Right to Know)
7. Review of the departmental safety manual if applicable
8. Safety meetings and seminars
9. One-on-One evaluation with Department Chemical Hygiene Officer (Bob Pekala) or University Chemical Hygiene Officer (Kevin Eichinger)
10. Other: \_\_\_\_\_

#### **B. Personal Protective Equipment:**

All personnel are required to wear the following personal protective equipment whenever handling this material:

1. Proper Laboratory Attire (Pants or dresses/shorts below the knees, sleeved shirt, close-toe shoes)
2. Safety Glasses – **Researchers must upgrade to chemical safety splash goggles if a splash, spray or mist hazard exists. In general, safety glasses can be worn if the fume hood sash is properly positioned to provide the splash, spray and mist protection, otherwise indirect venting chemical safety splash goggles must be worn.**
3. Lab Coat

Personnel may be required to wear other Personal Protective Equipment when working with this material. The Principal Investigator should contact the University Chemical Hygiene Officer to discuss the selection of chemical protective clothing (aprons, suits and gloves) and respirators. Please check all that apply:

1. <input type="checkbox"/> Chemical Safety Splash Goggles	2. <input type="checkbox"/> Face Shield
3. <input checked="" type="checkbox"/> Chemical Protective Gloves (Describe): <u>Neoprene, Nitrile, PVC</u>	
4. <input type="checkbox"/> Chemical Protective Clothing (Describe): _____	
5. <input type="checkbox"/> Chemical Protective Splash Apron (Describe): _____	
6. <input type="checkbox"/> Respirator (Type): _____	

7.  Other (Describe): \_\_\_\_\_

### C. Safe Work Practices

The following safe work practices should be employed when using this material:

1. Wear all required personal protective equipment
2. Cover open wounds
3. Wash hands thoroughly when work with the material is completed
4. No mouth pipetting
5. Use of sharps, such as glass Pasteur pipettes, needles, razor blades, etc. should be avoided or minimized
6. Must not work alone in the laboratory
7. Avoid generating and breathing dust. Avoid contact with skin and eyes.
8. DO NOT eat, drink or smoke.
9. Keep containers securely sealed when not in use.
10. Please list any other safe work practices: \_\_\_\_\_

### D. Personnel Decontamination and Emergency Treatment

For most exposures, decontamination treatment should occur as follows:

NOTE: IMPORTANT: ESTABLISH A FIRST AID PLAN BEFORE WORKING WITH CYANIDES. ANTIDOTES SHOULD BE AVAILABLE ON SITE. Prompt response in an emergency is vital. All workers are to be trained and refresher trained in procedures. Rescuers might need the protection of breathing apparatus where there is the potential of exposure to airborne cyanide.

1. Small Skin Exposures –
  - a. Wash contaminated skin in sink with tepid water for 15 minutes
  - b. Have buddy locate the MSDS
  - c. Wash with soap and water
  - d. Contact Occupational Health and Safety at 831-8475 for further direction
2. Eye Exposure –
  - a. Locate the emergency eye wash
  - b. Turn eye wash on and open eyelids with fingers
  - c. Rinse eyes for 15 minutes
  - d. Have buddy contact 911 for the Newark Campus, 911 for all others and locate the MSDS
  - e. Notify OHS
3. Large Body Area Exposure –
  - a. Locate the emergency safety shower
  - b. Stand under shower and turn it on
  - c. Rinse whole body while removing all contaminated clothing
  - d. Have buddy contact 911 for the Newark Campus, 911 for all others and locate the MSDS

- e. Rinse body for 15 minutes
  - f. Notify OHS
4. Ingestion Emergencies –
- a. If swallowed do NOT induce vomiting.
  - b. If vomiting occurs, lean patient forward or place on left side (head-down position, if possible) to maintain open airway and prevent aspiration.
  - c. Never give liquid to a person showing signs of being sleepy or with reduced awareness; i.e. becoming unconscious
  - d. Have buddy contact 911 for the Newark Campus, 9-911 for all others and locate the MSDS
  - e. Notify OHS
5. Inhalation Emergencies –
- a. If dusts, fumes or combustion products are inhaled remove from contaminated area.
  - b. Decontaminate in a safety shower or eyewash as necessary, following the procedures above.
  - c. Lay patient down. Keep warm and rested.
  - d. Prostheses such as false teeth, which may block airway, should be removed, where possible, prior to initiating first aid procedures.
  - e. Apply artificial respiration if not breathing, preferably with a demand valve resuscitator, bag-valve mask device, or pocket mask as trained. Perform CPR if necessary.
  - f. Have buddy contact 911 for the Newark Campus, 9-911 for all others and locate the MSDS
  - g. Notify OHS
6. Injection Emergencies –
- a. Clean the areas with soap and water
  - b. Allow the wound to bleed
  - c. Have buddy contact 911 for the Newark Campus, 9-911 for all others and locate the MSDS
  - d. Notify OHS

Please list any special decontamination procedures: \_\_\_\_\_

### E. Exposure Symptoms and Treatment

Please list the emergency procedures to be followed in the event of an exposure. These will be found in the MSDS for the compounds:

1. **Skin Contact Symptoms:** Skin contact with the material may produce severely toxic effects; systemic effects may result following absorption and these may be fatal. The material is not thought to be a skin irritant (as classified using animal models). Temporary discomfort, however, may result from prolonged dermal exposures. Good hygiene practice requires that exposure be kept to a minimum and that suitable gloves be used in an occupational setting. Exposure limits with "skin" notation indicate that vapor and liquid may be absorbed through intact skin. Absorption by skin may readily exceed vapor inhalation exposure. Symptoms for skin absorption are the same as for inhalation. Contact with eyes and mucous membranes may also contribute to overall exposure and may also invalidate the exposure standard.
2. **Eye Contact Symptoms:** Although the material is not thought to be an irritant, direct contact with the eye may produce transient discomfort characterized by tearing or conjunctival redness (as with windburn).

3. **Ingestion Symptoms:** Severely toxic effects may result from the accidental ingestion of the material; animal experiments indicate that ingestion of less than 5 gram may be fatal or may produce serious damage to the health of the individual. Considered an unlikely route of entry in commercial/industrial environments.
4. **Inhalation Symptoms:** Very toxic by inhalation. The material is not thought to produce respiratory irritation (as classified using animal models). Nevertheless inhalation of the material, especially for prolonged periods, may produce respiratory discomfort and occasionally, distress.
5. **Injection Symptoms:** May be fatal

The ChemWatch MSDS, which is available at <http://www.udel.edu/OHS/> oftentimes, has treatment information for Emergency Room Personnel and Doctors to follow. Please list any information that can be provided to assist with the treatment:

- Signs symptoms of acute cyanide poisoning reflect cellular hypoxia and are often non-specific.
- Cyanosis may be a late finding.
- A bradycardia, hypertensive and tachypneic patient suggests poisoning especially if CNS and cardiovascular depression subsequently occurs.
- Immediate attention should be directed towards assisted ventilation, administration of 100% oxygen, insertion of intravenous lines and institution of cardiac monitoring.
- Obtain an arterial blood gas immediately and correct any severe metabolic acidosis (pH below 7.15).
- Mildly symptomatic patients generally require supportive care alone. Nitrites should not be given indiscriminately - in all cases of moderate to severe poisoning, they should be given in conjunction with thiosulfate. As a temporizing measure supply amyl nitrite perles (0.2ml inhaled 30 seconds every minute) until intravenous lines for sodium nitrite are established. 10 ml of a 3% solution is administered over 4 minutes to produce 20% methemoglobin in adults. Follow directly with 50 ml of 25% sodium thiosulfate, at the same rate, IV. If symptoms reappear or persist within 1/2-1 hour, repeat nitrite and thiosulfate at 50% of initial dose. As the mode of action involves the metabolic conversion of the thiosulfate to thiocyanate, renal failure may enhance thiocyanate toxicity.
- Methylene blue is not an antidote. [Ellenhorn and Barceloux: Medical Toxicology]
- If amyl nitrite intervention is employed then Medical Treatment Kits should contain the following:
  - a. One box containing one dozen amyl nitrite ampoules
  - b. Two sterile ampoules of sodium nitrite solution (10 mL of a 3% solution in each)
  - c. Two sterile ampoules of sodium thiosulfate solution (50 mL of a 25% solution in each)
  - d. One 10 mL sterile syringe. One 50 mL sterile syringe. Two sterile intravenous needles. One tourniquet.
  - e. One dozen gauze pads.
  - f. Latex gloves
  - g. A "Biohazard" bag for disposal of bloody/contaminated equipment.
  - h. A set of cyanide instructions on first aid and medical treatment.
- Notes on the use of amyl nitrite:
  - Amyl Nitrite is highly volatile and flammable - do not smoke or use around a source of ignition.
  - If treating patient in a windy or draughty area provide some shelter or protection (shirt, wall, drum, cupped hand etc.) to prevent amyl nitrite vapor from being blown away. Keep ampoule upwind from the nose, the objective is to get amyl nitrite into the patient's lungs.
  - Rescuers should avoid Amyl Nitrite inhalation to avoid becoming dizzy and losing competence.

- Lay the patient down. Since Amyl Nitrite dilates blood vessels and lowers blood pressure, lying down will help keep patient conscious.
- DO NOT overuse - excessive use might put the patient into shock. Experience at DuPont plants has not shown any serious after-effects from treatment with amyl nitrite.

#### ADDITIONAL NOTES:

- Major medical treatment procedures may vary e.g. US (FDA method as recommended by DuPont) uses amyl nitrite as a methemoglobin generator, followed by treatment with sodium nitrite and then sodium thiosulfate.
- **MODES OF ACTION:** Amyl nitrite (AN) reacts with hemoglobin (HB) to form about 5% methemoglobin (MHB). Sodium nitrite (NaNO<sub>2</sub>) reacts with hemoglobin to form approximately 20-30% methemoglobin. Methemoglobin attracts cyanide ions (CN) from tissue and binds with them to become cyanmethemoglobin (CNMHB). Sodium thiosulfate (Na<sub>2</sub>S<sub>2</sub>O<sub>3</sub>) converts cyanmethemoglobin to thiocyanate (HSCN) which is excreted by the kidneys. i.e. AN + HB = MHB NaNO<sub>2</sub> + HB = MHB CN + MHB = CNMHB Na<sub>2</sub>S<sub>2</sub>O<sub>3</sub> + CNMHB + O<sub>2</sub> = HSCN
- The administration of the antidote salts is intravenous in normal saline, Ringers lactate or other available IV fluid.

#### F. Spills

The laboratory should be prepared to clean up minor spills (25 ml/25 g or less) of highly toxic/carcinogenic materials should they occur in a properly operating fume hood. Chemical spill clean up guidance can be found at <http://www.udel.edu/OHS/chemspillkit/chemspillkit.html>. Laboratory personnel cleaning up a spill will wear all personal protective equipment listed above and manage all cleanup debris according the waste disposal section. Notify OHS of any spills, even if the lab staff handled the clean-up.

Please list the following:

1. Location of Spill Cleanup Materials for a small spill: \_\_\_\_\_
2. Any special measures/cleanup material required to cleanup a spill: Environmental hazard - contain spillage. Clean up all spills immediately. Wear protective clothing, gloves, safety glasses and dust respirator. Use wet clean up procedures and avoid generating dust. Place in suitable containers for disposal.

If a spill is large or occurs outside of a fume hood, the laboratory occupants should immediately vacate the laboratory, close all doors and contact Occupational Health & Safety at 831-8475 during working hours or 911 after hours. If the laboratory personnel determine that the spill is not contained to the lab or could cause harm to people outside the laboratory, they should pull the building fire alarm and go to the Emergency Gathering Point to await the University Police and Emergency Responders. The responsible/knowledgeable person should provide the University Police and the Emergency Responders with the following:

1. Common Name of the Material Involved
2. A copy of a MSDS, if possible
3. Any pertinent information related to the emergency, such as location in the lab, other hazards in the lab, etc.

#### G. Emergency Phone Numbers:

Below are a list of emergency numbers to contact in the event of an emergency:

1. Police, Fire or Medical Emergency, call – 911 on the Newark Campus, 9-911 for all others
2. Occupational Health & Safety – X8475

Please provide a list of other emergency phone numbers, such as after hour contacts for laboratory personnel or any other important phone number, to be used in the event of an emergency: \_\_\_\_\_

#### **H. Other Special precautions**

Please list any other special precautions or procedures not listed in the above sections. Please be as specific as possible: \_\_\_\_\_

#### **I. Chronic Health Effects**

Principal routes of exposure are usually by inhalation of dust and hydrogen cyanide vapor and skin contact/absorption. Cyanide prevents body cells from using oxygen. Overexposure causes headache, dizziness, sweating, ineffective breathing and nausea which can be followed by a weak and irregular heartbeat, unconsciousness, convulsions, coma and death. Chronic exposure may interfere with iodine uptake by the thyroid and lead to its enlargement and related thyroid disorders. Loss of weight and appetite, mental deterioration, weakness and nervous system abnormalities may result. Sodium cyanide is alkaline and is irritating and corrosive to body tissue. Repeated minor contact causes cyanide rash, also itching, papules (small, superficial raised spots on the skin). Inhalation may result in obstruction, bleeding, sloughs and in some cases perforations of the septum.

#### **Section VI – Waste Disposal**

The authorized person using this material is responsible for the safe collection, preparation and proper disposal of waste unless otherwise stated below. Waste shall be disposed of as soon as possible and in accordance with all laboratory and University procedures. All personal must obtain chemical waste disposal training via DOHS.

Specific instructions:

Collect solid waste material in a 7mil polyethylene bag and label with an orange chemical waste label. Collect liquid waste in a "Justrite" container provided by DOHS. Label with a hazardous waste label. Use proper laboratory ventilation such as a fume hood to manage both liquid and solid wastes. Contact DOHS for removal. Do not put in the normal trash or pour any solutions down the drain.



**Section V – Signature and Verification**

Your signature below indicates that you have completed this form accurately to the best of your knowledge, you acknowledge all requirements and restrictions of this form and that you accept responsibility for the safe use of the material.

1. Prepared By: \_\_\_\_\_

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

Signature: \_\_\_\_\_

2. Principal Investigator: \_\_\_\_\_

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

Signature: \_\_\_\_\_

## **Section VI – Approval Process**

### **A. University Chemical Hygiene Officer Approval**

The Principal Investigator should have this form completed as accurately as possible. Please e-mail or fax this form to the University Chemical Hygiene Officer at [eich@udel.edu](mailto:eich@udel.edu) or 831-1528. The Chemical Hygiene Officer will review and verify the form and make any necessary changes or updates.

1. University CHO: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_

### **B. Conditional Approval to Purchase and Use**

This form will then be e-mailed or faxed to a member of the University Chemical Hygiene Committee (CHC), usually from the same department as the requesting PI. The Committee Member will meet with the Principal Investigator or designee and discuss the form and the use of the material. If the Committee Member finds the procedure acceptable, they can offer a conditional approval for purchase and use of this material.

2. CHC Member: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_

### **C. Full Approval**

A signed copy of the form will be sent, via campus mail, to the University Chemical Hygiene Officer, who will bring it up at the next Chemical Hygiene Committee Meeting for full approval. All approvals will be good for two years. The complete, signed approval form will kept on file with Occupational Health & Safety and a copy will be sent to the Principal Investigator to keep on file.

3. Acceptance: \_\_\_\_\_ Date: \_\_\_\_\_

CHC Chair: \_\_\_\_\_

Signature: \_\_\_\_\_

### **D. Approval Expiration**

The approval for use and purchase of this material will expire should any of the approved information change, with the exception of Section II, B and C, Authorized Personnel and Storage Location, or two years after CHC approval. If, at the end of two years, the procedure is substantially the same, the Principal Investigator can complete a renewal form and send it to the University CHO, who can approve the renewal for an additional two years.

## CHECKLIST FOR POSSESSION AND USE OF CARCINOGENS AND HIGHLY TOXIC MATERIALS

The checklist is provided to assist a researcher with the approval process for possession and use of carcinogens and highly toxic materials. This form may be kept on file in the laboratory with the SOP to serve as documentation. The complete procedure can be found in the University Chemical Hygiene Plan in Chapter 12.

Date and Initial	
_____	1. Complete a Standard Operating Procedure/Approval Form For Carcinogens and Highly Toxic Materials and submit this form to OHS for review
___DL 12/20/06___	2. Review and make OHS's changes and recommendations
_____	3. Meet with a member of the University Chemical Hygiene Committee to review the approval form and the use of the material.
_____	4. Submit (via campus mail) the completed and signed form back to the University Chemical Hygiene Officer for conditional approval to purchase and use the material. The University Chemical Hygiene Committee will review this form at the next scheduled meeting for full approval.
_____	5. Complete a Job Hazard Analysis (JHA) for each experiment in which this compound is used. These JHAs must be kept on file in the laboratory and updated every 5 years or when a process changes.
_____	6. Provide and document training for every worker who will use the material. Training shall include hands-on instruction as well as review of the JHA, SOP and the University Chemical Hygiene Plan; specifically Chapter 12.
_____	7. Conduct a trial run with OHS present.
_____	8. Have OHS present the first time a process using this material occurs.