



Policy Title: Environmental Health and Safety Policy
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Purpose: The purpose of this document is to establish policies to support the environmental health and safety of the members of the UIWSOM learning community.

Policy Statement

1) Description

This Environmental, Health and Safety Policy (Policy) establishes minimum standards required for the University of the Incarnate Word School of Osteopathic Medicine to maintain a safe and healthy environment for its faculty, staff, students, visitors, and surrounding community members and to preserve resources and protect the environment from adverse impacts.

2) Primary Goals

Prevent accidents and injuries, increase safety awareness, meet requirements of environmental and occupational health and safety laws and regulations, while reduce institutional liability, and establish safety responsibilities for members of the UIWSOM community.

3) Secondary Goals

Establish measurable objectives and targets for health and safety to ensure continuous improvement aimed at elimination of work related illness and injury, so far as is reasonably practicable.

4) Participants

- Faculty
- Staff
- Students
- Visitors
- Surrounding community members
- Each department or unit shall supplement this policy document with specific procedures about hazards in their workplace and the precautions necessary to control and prevent these hazards.

5) Resources

- Leaders at all levels within the workplaces demonstrating, through actions, commitment to occupational health and safety.
- Integrated compliance requirements with relevant health and safety legislation
- Provision of appropriate and targeted health and safety training and information to faculty, staff, and students

6) Methods

The UIWSOM's health and safety program is assigned to the Office of Environmental Health, Safety & Risk Management (EHSRM) office. Its mission is to promote and maintain a safe and healthy university community by developing and implementing procedures and training that strive for regulatory compliance. Implementation of this policy is the responsibility of the entire University community: staff, faculty, and students.

UIWSOM's Safety Sub-Committee (SSC) of the Resource Committee, with members representing the UIWSOM's administrative departments, the University's EHSRM, and Police department, assist in identifying needs, developing procedures, and assisting in the implementation of environmental health and safety programs at the UIWSOM.

Applicable federal and state laws and regulations, together with policies and procedures of the University will provide the guidance under which the UIWSOM will conduct its safety program.

Responsibilities of the EHSRM:

- Risk management
- Workplace safety programs
- Laboratory safety
- Hazardous waste management
- Hazard communication
- Emergency management
- Providing overall direction in property, casualty and workers compensation
- Indoor air quality assessments

7) Guidelines

It is the policy of UIWSOM that all incidents which result in an injury to staff, faculty, students, or visitors shall be appropriately documented and reported. This reporting and documentation is necessary to properly evaluate and/or treat injured staff, faculty, students, and visitors; and to implement corrective actions which prevent the reoccurrence of incidents.

If the injured individual believes his or her injury is an emergent nature, emergency medical attention should be sought. If the injured individual is unconscious or unable to make such a determination, initiate the emergency response.

8) Procedures

a.) Access to Restricted Areas

UIWSOM prohibits access to any areas housing potentially hazardous materials or machinery or required by federal or state agency by unauthorized individuals. Areas with restricted access include and are not limited to all research; teaching and/or clinical laboratories, maintenance shops, mechanical/electrical spaces, construction

areas, and Anatomy Lab. Authorization will be provided on an as required basis by the Dean or appointee.

b.) Airborne Pathogen Control

In the event of exposure or potential exposure, UIWSOM will respond to an individual's health needs and provide appropriate medical evaluation and follow-up. All medical records and documentation regarding employees, faculty, and students will be treated in accordance with the provisions of federal and state laws and regulations regarding confidentiality of medical records.

- All employees, faculty, and students must report exposure incidents immediately to their supervisor and complete an Incident Report.
- Occupational Health Services will investigate all cases and determine the need for evaluation and follow up.
- Personal Protective Equipment - See section below.

c.) Automated External Defibrillator Device (AED)

UIWSOM is committed safe maintenance and use of AEDs installed on campus. All AEDs on campus will satisfy applicable Texas law and guidance relating to the use and maintenance of AEDs.

- EHSRM Departmental Responsibilities
 - Purchase, installation, maintenance and AED/CPR training costs for all assigned AEDs.
 - Identify individual(s) who will be responsible for routine readiness checks of each assigned AED.
 - Identify individuals interested in volunteering for AED/CPR training in accordance with the standards set forth by the American Red Cross or the American Heart Association.
 - Identify suggested location(s) for new installations.
 - The AEDs, where available and accessible, may be used in emergency situations when sudden cardiac arrest occurs. Individuals, who have volunteered and who are then designated by the department or administrative unit acquiring the AED, be trained in the use and operation of the device.
 - The "AED Medical Advisor" will provide medical oversight for AEDs under this program and provide the prescription required to obtain an AED.
 - AEDs will be placed in an accessible location and will be inspected in accordance with the operational guidelines of the manufacturer by EHSRM or designee.
 - The Emergency Medical Service System should be activated immediately upon the discovery of a situation in which the use of an AED is anticipated. Activation will be via the 911 emergency telephone systems. The activation of the Emergency Medical Service System should not be delayed due to the actual or anticipated use of an AED.

d.) Biological Safety

The UIWSOM Biological Safety Program provides a safe and healthy environment for individuals who work with patients, biological samples, bodily fluids, and other biohazardous materials and aids to prevent, decrease, and control any potential exposure(s) to those material(s) in accordance with federal requirements.

The UIW exposure control plan (ECP) is provided to eliminate or minimize occupational exposure to Bloodborne Pathogens in accordance with OSHA standard 29

CFR 1910.1030, “Occupational Exposure to Bloodborne Pathogens.” The ECP is a key document to assist our organization in implementing and ensuring compliance with the standard, thereby protecting our employees.

This ECP includes:

- Determination of employee exposure.
- Implementation of various methods of exposure control, including: universal precautions engineering and work practice controls personal protective equipment and housekeeping.
- Hepatitis B vaccination.
- Post-exposure evaluation and follow-up.
- Communication of hazards to employees and training.
- Recordkeeping.
- Procedures for evaluating circumstances surrounding exposure incidents.
- Implementation methods for these elements of the standard.
- The Director of Environmental Health, Safety and Risk Management (EHSRM) is responsible for implementation of the ECP (Contact location- Administration Building, room 171, phone number 210-829-6035). The EHSRM department will maintain, review, and update the ECP at least annually, and whenever necessary to include new or modified tasks and procedures. Those employees who are determined to have occupational exposure to blood or other potentially infectious materials (OPIM) must comply with the procedures and work practices outlined in the ECP. UIW will provide and maintain all necessary personal protective equipment (PPE), engineering controls (e.g., sharps containers), labels, and red bags as required by the standard. The EHSRM Department will ensure that adequate supplies of the aforementioned equipment are available in the appropriate sizes.
- The EHSRM Department will be responsible for ensuring that all medical actions required by the standard are performed and that appropriate employee health and OSHA records are maintained.
- The EHSRM and supervisors of the departments with occupational exposure will be responsible for training, documentation of training, and making the written ECP available to employees, OSHA, and NIOSH representatives. The ECP can be found online at <https://blackboard.uiwtx.edu/bbcswebdav/orgs/RiskAndSafety/exposurecontrolplan2017.pdf>.

e.) Building Mechanical Systems

UIWSOM’s goal is to assure that all building mechanical systems are safe and effective for their intended purpose.

Incident involving repair of building mechanical system(s):

- Place a work order with the UIW School Dude portal.
- If this is an emergent situation, contact the UIWSOM Facilities Supervisor.

f.) Certification, Use, and Testing of Biological Safety Cabinets

g.) Chemical, Needle-stick, and Body-Fluid/Biohazard Exposures

It is recommended that employees and students seek medical evaluation and possible treatment immediately after an exposure.

Therefore, in the event of an exposure on the UIW/UIWSOM campus:

- Employees should immediately contact EHSRM Director at the following number at 210-829-6035.
- Students should immediately contact their lab/class instructor, who will then contact the EHSRM Director.

In the event of an exposure offsite (such as on clinical rotations), students should immediately contact the Office of Clinical Affairs, who will notify the EHSRM Director.

In both cases, employees/students should:

- Perform initial first aid by cleaning the wound or exposure site (this includes flushing any affected eyes or mucous membranes)
- Seek care from the nearest emergency room or healthcare facility. If an exposure occurs while on a clinical rotation, this may be handled by the facility's emergency room and/or Employee Health department.

h.) Chemical Safety

The UIW Chemical Safety Program aids in the proper collection and disposal of hazardous waste in accordance with federal, state and local requirements. University policies and procedures are documented in the Chemical Safety Handbook (Handbook), which can be found in the appendix.

All faculty and staff with exposure to hazardous chemicals must be familiar with the requirements set forth in the Handbook and comply with the rules under the Texas Hazard Communication Act (THCA) enforced by the Texas Department of State Health Services. All occupational operations conducted in UIW facilities must be performed in accordance with the applicable requirements of this handbook. It includes general information to employees and students in the use and handling of hazardous chemicals.

Topics addressed include:

- Information on Safety Data Sheets (SDS)
- Container labeling requirements
- Safe handling, use, storage and disposal of hazardous chemicals
- Employee training programs
- Definitions of hazardous chemicals
- Factors affecting chemical action on the body
- Emergency procedures, including first aid and reporting
- Proper personal protective equipment (PPE)
- Employee rights and responsibilities under the Texas Hazard Communication Act

i.) Clinical and Non-Clinical Equipment and Fume Hoods

UIWSOM's goal is to assure that clinical and non-clinical Equipment are safe and effective for their intended purpose. Clinical systems and devices and reusable accessories to such equipment will be tested for safety and performance prior to initial use and periodically thereafter. Recalibration or repair shall be performed as needed.

Incident involving repair of patient equipment:

- Remove involved equipment, accessories, and disposables from service.
- Hold all involved equipment and any ancillary devices (including disposables) for evaluation. The date, time, and person most familiar with the incident should be noted and attached to the equipment.

j.) Compressed Gas Cylinders

- Compressed gas cylinders must be handled only by experienced and properly instructed personnel. This includes the right to know information on the chemical container and SDS.
- The user of the cylinder and the person installing should check the identity of the gas before use. If the cylinder content is not identified, if hydrostatic test date is past due, or if the cylinder is in any way damaged, the cylinder should be returned to the supplier.
- The user shall not modify, tamper with, paint, deface, obstruct, remove or repair any part of the cylinder, including the pressure relief device and the container valve or the valve protection device.
- The user is solely responsible for the proper disposal of the cylinder when it is empty or no longer needed.
- The user is responsible to maintain an inventory of all gases (cylinders) used and stored in their area. This inventory must be given to EHSRM once a year. Safety Data Sheets (SDS) must be obtained and maintained (hardcopies) for all compressed gas cylinders. SDSs can be found online.
- Empty cylinders must be marked EMPTY and stored apart from full cylinders while waiting to be removed.
- Rooms or cabinets containing compressed gases must be conspicuously labeled "Compressed Gas". Gas cylinder storage areas must be prominently posted with the hazard class and the name of the gases stored (NFPA fire diamond).
- Piping systems require additional labeling and marking.

k.) Containment for Research Involving Cell Culture

It is the policy of UIWSOM to implement accepted safety standards while conducting all research involving agents and materials. The following guidelines will be adopted as minimum standards for research involving biographical agents and materials at UIWSOM:

Biosafety in Microbiological and Biomedical Laboratories, U.S. Department of Health and Human Services, Public Health Service Centers for Disease Control and National Institutes for Health.

Furthermore, it is the policy of UIWSOM to implement procedures for the safe handling of all specimens, cultures, and other diagnostic material, recognizing that such material may contain etiologic agents. Procedures for the handling of specimens, cultures, and other diagnostic materials shall follow the general guidelines applicable to etiologic agents for minimizing risk to human health and the environment.

l.) Decorations

To assure the potential for fire is minimized, prohibits the use of certain types of decorations.

- Electrical lights or electrically operated ornaments must bear the seal of approval of a nationally recognized testing laboratory (NRTL). The two most common are Underwriter's Laboratory (UL) and FM Approvals LLC.
- Electrical lights or electrically operated ornaments may not be used on aluminum or any other similar metal due to the risk of electric shock.
- Cut and live cut decorations are prohibited.
- At no time may decoration conceal or impede access to any safety device or building safety feature.
- At no time may decorations obstruct or impede egress.

m.) Disposal of Used Rags

Empty containers or rags must be disposed of according to any regulations and requirements as long as they at least comply with all legal requirements. Consult with EH&S for further clarity.

n.) Disposal of Sharps and Medical Waste

Laboratories engaged in research regulated at Biosafety Level 1 or Biosafety Level 2 must follow these procedures:

Biosafety Level 1 Laboratories

- All solid waste items which are potentially contaminated with microorganisms, tissue culture, cell culture, recombinant DNA, genetically engineered organisms, or genetically engineered plants regulated by the CDC/NIH, USDA/APHIS, or others at Biosafety Level 1 (BL-1) must be autoclaved prior to disposal in the building trash dumpster. Such items should be placed into a clear autoclave bag.
- UIWSOM prohibits the use of red autoclave bags or bags with the biohazard symbol for the disposal of BL-1 waste.
- Autoclave Procedures:
 - The clear autoclave bag should be filled to two-thirds of its capacity.
 - After the bag is 2/3 full, it should be loosely taped closed and labeled with the investigator's name.
 - Autoclave tape should be affixed to the exterior of the bag to ensure the waste has received proper autoclave time, temperature, and pressure.
 - All liquid waste items must be autoclaved or chemically disinfected (with 10% bleach solution or other appropriate disinfectant) prior to drain disposal of the liquid.

Biosafety Level 2 Laboratories

- All solid waste items which are potentially contaminated with microorganisms, tissue culture, cell culture, recombinant DNA, genetically engineered organisms or genetically engineered plants which are regulated by the CDC/NIH, USDA/APHIS, or others at Biosafety Level 2 (BL-2) must be autoclaved and placed into the Regulated Medical Waste stream as Overclassified Medical Waste as outlined below.
- The following autoclave procedures should be followed when processing biological waste generated in BL-2 laboratories.
- Note: The color of the autoclave bags used to package BL-2 laboratory waste is unimportant since the waste is packed in the Regulated Medical Waste (RMW) boxes for ultimate disposal after processing.

o.) Electric Powered Tools and Equipment

- It is Facilities Management policy to use a Ground Fault Circuit Interrupter(GFCI) on any
- Portable electrical tools and equipment that are 240 Volts and below when said tools and equipment are used in a wet or damp environment.
- Safe work practices require several electrical items be used when necessary (i.e., GFCI, Multi-meter, insulated hand tools, double insulated or grounded electrical tools, LO/TO devices).
- Electrical tools, extension cords and equipment will have grounding or be double insulated.
- Inspect your tools and extension cords before you use them. Look for cracks or other damage in the casing, frayed or damaged wiring or a damaged plug. Damaged tools and electric cords are to be provided with lock out/tag out device.
- A qualified person should repair damaged power tools and only UL listed manufacturer authorized replacement parts should be used for repairs.
- Extension Cords:
 - Multiple “Daisy Chaining” of extension cords is prohibited.
 - Cords will be manufactured with water proof insulation.
 - Cords will have three conductors and grounding plugs.
 - Cords will be kept clean.

p.) Emergency Equipment: Eyewash, Drenching Hose, and Shower Equipment

- All employees and students should exercise appropriate precautions to assure eye, face, and body protection.
- When there is a reasonable probability of hazardous or injurious eye, face, and/or body exposure, all employees and students are required to utilize approved and appropriate equipment.
- Emergency eyewash and/or shower equipment are not used in lieu of appropriate protective eye, face, and body equipment.

q.) Emergency Response and Building Evacuation

The University of the Incarnate Word Emergency Response and Evacuation Plan (EREP) ensures UIW meets or exceeds the requirements outlined in NFPA 45, Section 4.6.3 and Federal Emergency Actions plans for laboratories in 29 CFR §1910.38.

The UIW’s master copies of the EREP is kept in the Environmental Health, Safety & Risk Management (EHSRM) office located in room 171 of the Administration building and the University Police office located in Sr. Clement Eagan Residence Hall. Each employee receives an electronic copy of the EREP and electronically sign that they have read and understand the EREP. A hard copy is available upon request. It is also available at <http://www.uiw.edu/safety/documents/erep2017.pdf>. The document establishes procedures for minimizing the effects of an emergency situation at University campuses.

The document includes emergency response plans covering:

- Fire emergencies.
- Weather emergencies.
- Medical emergencies.

- Bomb threats.
- Homeland Security.
- Suspicious persons and packages.
- Hazardous material spill.
- Employee alarm system.
- Emergency response phone numbers.

The EREP is designed to assist university employees and students on how to appropriately respond, report and if the situation requires how to evacuate in an emergency situation.

r.) Electrical Safety

- Lockout/tag-out procedures will be followed per Facilities Management policy.
- Facilities Management requires the mandatory use of the ground fault current interrupters (GFCI) whenever any work using electrical tools, cord sets, extension lights, etc., is being performed. GFCIs are to be used on all portable electrical tools and equipment below 240 Volts when said tools and equipment are used in a wet or damp environment.
- The ground fault current interrupter is to be used in addition to, not in lieu of, the normal three- or four-wire equipment grounding conductor.
- The employee is required to become familiar with the required minimum Personal Protective Equipment (PPE), tools and equipment for service work require for several electrical items. (Multi-meter, insulated hand tools, double insulated or grounded electrical tools, Lock Out/Tag Out devices.)
- Electrical Safe Work Practices training will be provided to all employees.
- Facilities Management employees are prohibited from working on energized circuits greater than 240 Volts without express authorization of the supervisor.
- Conductive tools, equipment, jewelry, accessories and articles should not be used or worn if they have the potential to contact exposed, energized components.
- All portable power tools are required to be of the three-wire grounded type or double insulated.

s.) Fall Protection

- All employees and/or contractors whose job requires them to work off the ground at heights defined by OSHA are to be trained on proper personal protective equipment.
- Working at any elevations greater than six (6) feet from the floor, deck, platform, or ground level not protected on all sides by standard handrails, shall be required to use personal fall protection.
- Anyone working around an excavation site that is four (4) feet or deeper must utilize fall protections.
- Anyone working on scaffolding without standard guardrails must be tied off at ten (10) feet in height.
- Anyone working on scissors lifts and other such devices are required to tie off.
- Training must include the following:
 - The need to know where/when protection is required.
 - The selection, use, and maintenance of fall protection systems which are appropriate for the situation.
 - Proper construction and installation of safety systems.

- Implementation of safe work practices.
- Limitations of fall protection equipment.

t.) Fire Drills, Fire Incident Responsibilities, Evacuation Plans, Fire Alarm Systems
Please refer to the UIW Emergency Preparedness Manual.

u.) Fire Prevention

UIWSOM reduces fire risk and implements procedures to establish a safe environment.

- All stairway fire doors must be kept closed and stairway landings unobstructed. All other smoke or fire doors shall be unobstructed and closed. All doors equipped with a self-closing device shall not be wedged open, propped open, or held open by any unapproved device. These doors must be maintained in a condition to assure the doors properly close and latch.
- Free access to fire hose cabinets, fire extinguishers, fire alarm pull stations, and other emergency equipment must be maintained at all times.
- Storage shall be maintained a minimum of 18 inches below sprinkler head deflectors and across the plane of the room
- Perimeter storage is allowed within the 18 inches of clearance as long as there is not a sprinkler located directly above the storage.
- Electrical panels must have at least three (3) feet of clearance.
- No Smoking rule shall be enforced.
- Lights are never to be shielded with linen or other combustible materials.
- Electric burners and griddles are prohibited.
- Candles are prohibited. The only exception is they may be used for religious gatherings, but must never be left unattended, not located within a means of egress, and have a non-combustible stand.
- Persons using Oxygen are prohibited from use of an open flame.
- Special precautions must be taken to prevent fire in oxygen-enriched atmospheres. Oxygen shall not be used in areas where there are potential sources of ignition such as static discharge or faulty electrical switches. Oxygen shall be stored separately from flammable gases or liquids.

v.) Hand Tools

- DO NOT USE DAMAGED TOOLS.
- Inspect hand tools before each use. Look for bends, chips, mushroomed heads, cracks or other damage.
- Use tools only for their intended use. Do not use a screwdriver as a chisel or a pry bar or a wrench as a hammer, etc.
- Keep tools clean and store them correctly.
- Screwdrivers – make sure the tip fits the slot of the screw correctly and use the other hand to steady the blade.
- Sockets – use the proper size socket and never use a hand socket on a power wrench.
- Wrenches – never use a leverage extension on a wrench handle.
- Use box, open end, or adjustable wrenches correctly and for the right application.
- Box wrenches should be used to loosen a frozen nut or for final tightening.
- Open-end wrenches should never be tilted or cocked and make sure the nut/bolt is fully seated.

- Adjustable wrenches should be tightly adjusted and pull so that the force is on the side of the fixed jaw.
- Hammers – strike the head parallel to the surface being struck and never strike a hammer with another hammer.
- Remember to use the proper tool and to use the tool properly.

w.) Hearing Conservation

If you are exposed to noise levels of 85 dBA or greater as part of your job you will receive training annually on:

- The effects of over exposure to noise.
- Methods to prevent over exposure.
 - The proper use and care of hearing protection equipment.
- Affected employees will be provided with hearing protection and are expected to wear it in all designated/posted high noise areas and whenever using equipment suspected to be greater than 85 dBA.
- Employees are expected to report symptoms of suspected hearing loss to their supervisor.
- In areas not posted or designated with high noise warnings, employees should apply the rule of thumb for wearing hearing protection. The rule of thumb is when noise levels prevent conversation at a normal voice level from a distance of up to three feet, you need hearing protection.
- Annual audiometric hearing evaluations may be made available to all employees exposed to work related noise above 85 dBA.
- Employees are expected to inspect hearing protection equipment for cleanliness, signs of wear or defects and replace identified components promptly. Do not re-use disposable hearing protection.
- All hearing protection used by Facilities Management employees will have a noise reduction rating (NRR) of 26 dBA or greater.
- Radio or other electronic music devices with speakers inserted in an individual's ear does not constitute proper hearing protection and cannot be worn when hearing protection is required.

x.) Heaters, Fans, Appliances, Adapters, and Extension Cords

- Adapters and extension cords will only be used when the UIWSOM Facilities Supervisor approve the device. Upon approval, the device will receive a safety-approved tag.
- UIWSOM Facilities Supervisor is responsible for review and approval of request to use all non-UIWSOM provided electrical devices.

y.) Hazardous Energy Sources

Lockout and tagout is required to be implemented for all energy sources that might cause unexpected movement, personal injury or property damage. This includes electrical, mechanical, hydraulic, thermal, pneumatic, compressed gas energy, potential energy from suspended or overhead objects and compressed springs.

A tagout system will always be used in addition to the lockout system. Tagout devices must indicate the reason for the lockout; how that person may be reached; the identity of the device; and the date and time the tag was placed.

De-Energizing

- Locate and identify all energizing devices (disconnects, breakers, valves). If identification does not already exist, mark or tag each device indicating its function (i.e., Line #1, Chiller #4, 480 Volts).
- Notify all affected employees that a lockout/tagout is scheduled to occur.
- Know and follow shutdown procedures for the equipment or process that is to be locked or blocked out. Liquid or gaseous conveying pipe is required to be blocked or capped during times of lock out.
- All the involved employees will install lockout and tagout devices on all energy sources.
- Bleed or drain stored energy (capacitance, pressurized oil, water, steam, refrigerant, etc.).
- Attempt to activate the device to ensure it is inoperable (except 3-phase equipment).
- Double-check electrical circuits with a meter.

Re-Energizing

- Check that non-essential items have been removed from the work area.
- Check that equipment components are operationally intact.
- Ensure all employees are safely clear of equipment.
- Notify all affected employees that the lockout/tagout devices will be removed.

z.) Laboratory Safety

UIWSOM is committed to:

- Ensuring the safety of its students, employees, and visitors.
- Complying with all applicable regulatory environmental, health, and safety requirements.

Although individual units are free to go above and beyond stated requirements, in order to ensure a minimal level of protection is maintained, all laboratory operations must satisfy all Federal, State, and Local regulations as well as any guidance developed by UIWSOM organizational units designated with the authority to do so.

Procedures

- Each faculty member, principal investigator, lab manager, lab supervisor or designated responsible authority is responsible for the safety of the individuals working within his or her laboratories.
- Food and drinks are strictly forbidden in laboratories that use, store, or house any hazardous materials such as chemicals, biological materials, radioactive materials or animals.
- Appropriate clothing must be worn in laboratories at all times. Long pants and closed-toe footwear are required attire when using any hazardous material or working with animals. Clothing and hair must be secured properly to avoid accidents.
- An appropriate level of Personal Protective Equipment (PPE) must be worn at all times when hazardous materials such as chemicals, biological materials, radioactive materials, animals or equipment, are used.
- Proper labeling and storage of all hazardous materials are required and essential for a safe laboratory work environment.

- Faculty members, principal investigators, lab managers, lab supervisors or designated responsible authorities are responsible for ensuring that all individuals working in their laboratories have been adequately trained. Training must be accomplished before individuals begin performing hazardous duties. Individuals in laboratories must have read and understand all written guidelines, manuals, plans, policies, programs and standard operating procedures that pertain to their activities.
- Faculty members, principal investigators, lab managers, lab supervisors or designated responsible authorities that participate in any activity that results in a waste product of any kind must follow disposal procedures in compliance with all government regulations and prevent the release of contaminants through sound best management practices for waste generation, handling, and disposal.
- Safety Data Sheets (SDS) for all laboratory chemicals are required to be maintained in the laboratory or on-line. Safety Data Sheets are available from manufacturers' web sites and through the MSDSOnline® service at the IUEHS website
- The entrance to each laboratory in which hazardous materials are used or stored shall be posted with the names and phone numbers of the Principal Investigator, Lab Manager, or Lab Supervisor and any other designated personnel who can be contacted in the event of an emergency. Such signage will follow the Hazard Assessment and Laboratory Signage Program developed by IUEHS, or equivalent.
- The availability and use of a number of types of safety equipment are essential to the practice of safe science. Safety equipment, such as biosafety cabinets, fume hoods, safety showers, and emergency eyewashes, should be present in well-marked, highly visible, and easily accessible locations in or near all laboratories that use hazardous materials.
- The prompt reporting of hazardous material spills to proper University authorities is an essential element in the protection of the health and safety of faculty, staff, students, visitors, and patients. Follow the spill procedures for chemical, biological, or radiological spills as necessary.

Employees are required to report all occupational injuries, illnesses, or incidents to their work supervisor. Following a report of an incident, the Designated Medical Service Provider for the respective campus shall provide a confidential medical evaluation and follow-up to the employee.

aa.) Material Handling and Safe Lifting Techniques

The first rule of material handling is to lighten the load whenever possible! This may mean that two trips to the destination will be necessary.

- Solicit help of another person when needed.
- Use material handling equipment whenever possible, such as loading ramps, two-wheel handcarts, hoists/slings, fork trucks, or hydraulic lift-gates.
- Always push carts, hand trucks and dollies rather than pulling them.
- Periodically review and use safe lifting techniques:
 - Conduct a preliminary survey of your travel route to identify and address hazards and obstructions. Remove any obstructions not affixed to the structure.
 - For heavy lifting, perform appropriate back stretching exercises first to limber up your back muscles.
 - For repetitive lifting, take occasional breaks.

- Face the load with your feet shoulder width apart and one foot slightly ahead of the other.
- Bend your knees to squat down with your back straight and take a good grip on the load.
- Lift the load slowly with your legs while keeping your back straight, do not jerk.
- Keep the load close to your body.
- Turn with your feet, not your waist. Lower the load slowly with your legs while keeping your back straight.

bb.) Means of Egress

Every effort shall be made to keep all storage out of egress paths and egress corridors. The following guidelines must be followed:

- Storage in egress corridors shall not obstruct the corridor to less than 44 inches.
- At no time shall items stored in corridors obstruct emergency showers, utility access panels, exit doors, fire doors, exit signs, fire extinguishers, fire alarm pull stations, or sprinkler systems.
- No combustible items such as boxes or paper shall be placed outside of cabinetry in corridor.
- Storage of chemicals is prohibited.
- Compressed gas cylinders must be properly secured.

cc.) Pest Control

UIWSOM restricts the use of chemical pesticides in all buildings and property. All procedures will have the approval of Director of Facilities Services. All pesticides within UIWSOM shall be applied in a manner which conforms to guidelines established by the manufacturer on the safety data sheets (SDS). All pesticides shall be stored, handled, and disposed in accordance with federal and state regulations set forth by Occupational Safety and Health Administration (OSHA) and the Environment Protection Agency (EPA). The contact for pest control issues is the UIWSOM Facilities Supervisor.

dd.) Protective Devices and Hazard Assessment

UIWSOM will evaluate and implement devices which have the potential to reduce exposure of staff, faculty, and students to biological, chemical, and physical hazards. All faculty, staff, and students are required to implement protective safety equipment and procedures as approved. Upon approval, protective devices shall be implemented by all applicable faculty, staff, and students, unless it has been demonstrated that implementation of the device in a specific medical procedure interferes with teaching. This is to include, but is not limited to safety glasses, chemical splash goggles, face shields, fluid resistant masks.

Adherence to this policy is a condition of employment and status as a student. Any breach of the policy will lead to normal disciplinary procedures being applied.

ee.) Respiratory Protection

The Respiratory Protection Program is developed to ensure that all employees and students will adequately protect situations where it has been determined that inadequate air quality is in occurrence, during repair or implementation of a repair, or in emergency situations.

- The supervisor or principal investigator must make a request in writing to the Director – EHSRM to conduct monitoring of the work area to determine the level to which individuals are exposed.
- This request must include a list of chemicals to which it is suspected the students and/or staff are exposed.
- The amount of chemicals used on a routine basis.
- Any protection that is currently being used.
- Name of all individuals who are potentially exposed.
- Work shift and location of those individuals for whom monitoring is being requested.
- Upon receipt of such written request, the Director will schedule monitoring by an Industrial Hygienist to determine exposure levels.
- Based upon the results of such monitoring, the Director will make a determination of whether respiratory protection is required and what protection would be appropriate based upon published standards.
- The findings will be forwarded to the Dean of the UIWSOM with recommended actions. Copies will be sent to the UIW Provost.
- Upon receipt of the results, the supervisor shall inform affected staff and/or students and shall contact the Director – EHSRM to schedule a meeting with staff and/or students to explain the results of the monitoring and appropriate steps to be taken.
- At the time of the meeting, the staff and/or students will be given a medical evaluation questionnaire to be completed and forwarded to the chief medical officer of Occupational Health Services.
- Occupational Health Services upon receipt of the completed questionnaire will schedule medical evaluation of the affected individuals. The results of this evaluation will be subject to review and approval by the Director – EHSRM and the dean of UIWSOM.
- Upon receipt of notification of an individual’s medical approval to wear respiratory protection individual training, respirator selection, and fit testing will occur.
- In order to ensure proper fit of respirator protection, individuals requiring respiratory protection are not permitted to grow or wear facial hair that may interfere with the seat of the respirator. Individuals who cannot be clean shaven due to documented medical conditions or documented religious restrictions are allow to select a loose fitting powered air purifying respirator if their work does not require entry into areas deemed as Immediately Dangerous to Life or Health (IDLH). In order to be granted this exception, documentation must be provided to the Director – EHSRM.

ff.) Tobacco

UIWSOM values its staff and students and recognizes they can best fulfill their duties when healthy. The use of any tobacco products, smoking of tobacco, and other combustible materials by staff, faculty, students, volunteers, visitors, and other individuals including temporary workers and contractors are prohibited in all buildings and property at the UIWSOM. Electronic cigarettes (e-cigarettes) and personal vaporizing devices shall be considered the same as regular cigarettes for the purpose of this policy, regardless of the nicotine content of the liquid used in such devices. The sale of tobacco materials is also prohibited on all premises. There is to be no tobacco use by staff who is a driver or occupant of a UIWSOM vehicle.

Forms of tobacco and smokeless tobacco that are prohibited include:

- Cigarettes, Cigars, Pipes.
- Smokeless tobacco, also called chewing tobacco, oral tobacco, spit, spitting tobacco, dip, chew, snuff, snus, twist, plug, and dissolvable tobacco products.
- Electronic cigarettes, also call “e-cigarettes” or “electronic nicotine delivery systems.”

Adherence to this policy is a condition of employment and status as a student. Any breach of the policy will lead to normal disciplinary procedures being applied.

Definitions

Employees – All faculty and staff.

Environmental, Health, Safety, and Risk Management (EHSRM) Department – The administrative unit that manages the University Location’s Environmental, Health and Safety programs.

Local EHSRM Director – The person who manages an EHSRM Department at a Campus, National Laboratory, or Medical Center.

Safety Sub-Committee (SSC) – is a subset of the Resource Committee, with members representing the UIWSOM’s administrative departments, the University’s EHSRM, and Police department, assist in identifying needs, developing procedures, and assisting in the implementation of environmental health and safety programs at the UIWSOM.

University Location – Any property or building that is owned or leased by the University where University business or activities take place.