

1. STANDARD MICROBIOLOGICAL PRACTICES
1.1. Lab access limited/restricted when experiments or work with cultures/specimens are in progress
1.2. Lab personnel wash hands after handling viable materials, removing gloves, or leaving lab
1.3. No eating, drinking, smoking, handling contact lenses, applying cosmetics, or storing human food in lab
1.4. Contact lens users wear safety glasses, goggles or face shields
1.5. Food stored outside lab in designated cabinets/refrigerators
1.6. Mechanical pipetting devices are used (<i>i.e.</i> , no mouth pipetting)
1.7. Sharps handling policies/practices in place
1.8. Procedures minimize splashes/aerosols
1.9. Work surfaces are decontaminated at least daily and/or at completion of work
1.10. Work surfaces are decontaminated after any spill/splash of viable material
1.11. Disinfectants are labeled for agents being used
1.12. Cultures/stocks/regulated wastes are decontaminated by approved method (<i>e.g.</i> , autoclaving) before disposal
1.13. Materials decontaminated outside of lab are transported in durable, leak-proof, closed containers
1.15. Biohazard signage posted at lab entrance when infectious agents are present (signage lists agents and PI name/phone)
1.16. Insect/rodent control program in effect
2. SPECIAL PRACTICES
2.3. Personnel at risk of acquiring infections or for whom infections may have serious consequences are denied access to lab
2.4. All personnel are advised of potential hazards prior to entering/working in lab
2.7. Minimum requirements to enter/work in lab are established and enforced.
2.8. Posted biohazard signage includes biosafety level, required immunizations, required PPSE, and required lab exit procedures
2.9. Lab personnel are appropriately immunized against or tested for the agents being used (<i>e.g.</i> , HBV vaccinations, Tb skin test)
2.10. Baseline and periodic serum samples are collected/stored as required
2.11. Lab Director has incorporated biosafety procedures into lab SOPs or has adopted/prepared a lab-specific Biosafety Manual
2.12. Lab Director has adopted/prepared a lab-specific Biosafety Manual and incorporated biosafety procedures into lab SOPs
2.13. Lab personnel have read and follow biosafety procedures/practices
2.14. Lab personnel are trained on the potential hazards, precautions to prevent exposures, & exposure evaluation procedures
2.15. Lab personnel receive annual refresher training and/or additional training as necessary
2.16. Needle/syringe use is kept to absolute minimum
2.17. Only needle-locking syringes or syringes w/ permanently affixed needles are used for injection/aspiration of infectious materials
2.18. Syringes that "re-sheath" the needle or needless systems are used when appropriate
2.19. Disposable needles are not bent, sheared, broken, recapped, removed from disposable syringes, or otherwise manipulated prior to disposal
2.20. Plastic ware is substituted for glassware whenever possible
2.21. Sharps containers are labeled, conveniently located, and puncture resistant
2.22. Nondisposable sharps containers are hard-walled and leak proof
2.23. Broken glassware is only handled by mechanical means
2.24. Sharps containers are decontaminated (<i>e.g.</i> , autoclaved) prior to disposal or reprocessing
2.29. Cultures, tissues, specimens, or infectious wastes are kept in covered, leak-proof containers during collection, handling, processing, storage, transport or shipment.
2.30. Lab equipment and work surfaces decontaminated on routine basis w/ effective disinfectant
2.31. Lab equipment is decontaminated prior to sending it for repair/maintenance, or packaging it for shipment
2.32. Spills/accidents are immediately reported to the lab director
2.33. Animals not involved in work are not allowed in lab
2.34. Plants not related to work are not allowed in lab
2.35. All open work with infectious materials is performed in a BSC or equivalent
2.36. Plastic-backed absorbent paper is used to line BSC work surfaces
2.37. Spills of infectious materials are decontaminated by professional staff or personnel trained/equipped to handle concentrated infectious material.
2.38. Spill cleanup procedures are developed and posted.
2.39. All potentially contaminated lab materials (<i>e.g.</i> , waste, gloves, lab coats, <i>etc.</i>) are decontaminated before disposal or reuse.
2.41. Accidental exposures are documented (<i>i.e.</i> , medical evaluations, surveillance, treatment)
3. SAFETY EQUIPMENT (Primary Barriers)
3.1. Lab coats, gowns, or uniforms are worn
3.3. Lab coats, gowns, or uniforms are removed and left in lab before leaving for non-lab areas
3.4. Protective clothing is changed when overtly contaminated
3.5. Protective clothing is either disposed of in the lab or laundered on-site by the institution.
3.6. Reusable clothing is decontaminated before laundering
3.7. Gloves are worn if skin on hands is broken or has rash
3.8. Gloves are worn if hands are at risk of contacting infectious materials, infected animals, or contaminated surfaces/equipment.
3.9. Gloves are not worn outside lab or when touching "clean" surfaces (<i>e.g.</i> , telephones, keyboards, elevator buttons, <i>etc.</i>)
3.10. Gloves are disposed of when overtly contaminated, work w/infectious materials is completed, or integrity is compromised.
3.11. Disposable gloves are not reused.
3.13. Goggles or face shield used when performing procedures that pose a splash risk outside of a BSC
3.14. Respirators and face protection are used when in rooms containing infected animals.
3.15. Class II BSC or equivalent are used for procedures that have potential to create aerosols or splashes

3.16. Class II BSC or equivalent are used for work w/ high concentrations (>10 ⁸ cfu/ml) or large volumes (>1 liter) of infectious agent
3.17. Class II or III BSC are used for all manipulations of infectious materials, necropsies of infected animals, harvesting tissue/fluids from infected animals/embryonated eggs, etc.
3.18. All procedures are conducted in Class III BSC or Class II BSC used in conjunction w/ 1-piece positive pressure suits w/ ventilated life support system.

4. LABORATORY FACILITIES (Secondary Barriers)
4.1. Lab has adequate lighting
4.2. Labs have doors for access control
4.3. Labs where “select agents” are used or stored have lockable doors (See 42 CFR 72.6).
4.5. Lab has a sink for hand washing
4.8. Lab designed to be easily cleaned (<i>e.g.</i> , no carpets/rugs, spaces between cabinets/equipment/furniture are accessible, <i>etc.</i>)
4.9. Walls, floors, ceilings can be easily cleaned/decontaminated (<i>e.g.</i> , seamless, free of imperfect junctions, smooth, resistant to water/chemicals, sealed penetrations, floors are slip resistant and have covered base, <i>etc.</i>)
4.10. Bench tops are impervious to water and resistant to heat, organic solvents, acids, alkalis, and disinfectants.
4.11. Lab furniture/equipment is suitable for intended use/loads.
4.12. No fabric upholstered/covered furniture or chairs
4.13. Lab windows that open to the outside are fitted w/ fly screens.
4.14. Lab windows are closed and sealed.
4.15. Labs are located away from public areas.
4.16. BSC not located near doors or windows that can be opened
4.17. BSC not located near air supply grills or high lab traffic areas
4.18. Eyewash station is readily available
4.20. Method for decontaminating lab waste is available in building (<i>i.e.</i> , autoclave, incinerator, <i>etc.</i>)
4.21. Method for decontaminating equipment is available.
4.22. Waste transported outside of lab is in sealed containers and not transported in public corridors.
4.28. BSC are tested and certified at least annually.
4.32. Vacuum lines and portable vacuum pumps are protected with liquid disinfectant traps and HEPA filters or their equivalent.