
BSL-3 General Procedures

India
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SAND No. #####

Sandia is a multiprogram laboratory operated by Sandia Corporation, a Lockheed Martin Company,
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under contract DE-AC04-94AL85000.

Rationale

- **The general facility procedures are scoped to provide overall biosafety and biosecurity practices and procedures for working in any of the CSIR BSL-3 laboratories**
- **Specific standard operating procedures (SOP's) are required and will include biosafety and biosecurity practices unique to each BSL-3 laboratory and the work conducted within that laboratory space**
 - **Areas requiring specific SOPs will be identified**

Priority Procedures

- **Entry Procedures**
- **Proper PPE Procedures**
 - **Respiratory Protection**
 - Fit Testing
 - Medical Evaluation and clearance
- **Decontamination Procedures**
- **Incident Response Procedures**
- **Medical Surveillance**



PRIORITY

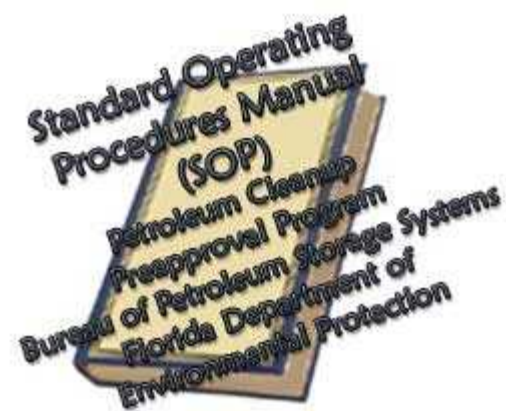
Risk Assessment

- **SOPs should be based upon a biosafety and biosecurity risk assessment designed to assess the unique risk:**
 - **Procedures**
 - **Agent Based Hazards**
 - Safety
 - Security
 - **Other Hazards**
 - Chemical
 - Radiological
 - **Environment**



SOP

- **Standard Operating Procedures (SOPs)**
 - Written instructions that document a routine or repetitive activity
 - Detail of processes necessary to perform a job safely and properly
 - Describe both technical and administrative practices and operations
 - Specific to an organization or laboratory



SOP Purpose

- **Ensure all relevant individuals understand the work**
- **Document how activities shall be performed**
 - **Facilitate consistency which supports data quality**
 - **Ensure compliance with regulations**
 - **Help maintain quality control**
- **Types**
 - **Repetitive technical activities**
 - **Clinical specimen receipt and processing**
 - **Proper use of biosafety cabinet**
 - **Diagnostic test procedures**
 - **Administrative procedures**
 - **The process for proper documentation of training**
 - **Laboratory Access Authorization**

SOP Sections

- **Title Page**
- **Table of Contents**
- **Required Controls**
 - Limited Access
 - Containment
- **Required Training**
 - Personal Protective Equipment
 - Equipment
- **Body**
 - Brief description of the procedure
 - Risks
 - Definitions
 - Procedures
- **Emergency Response Measures**
- **References**
 - Other relevant SOPs
 - Relevant Guidelines and Regulations
- **Contact Information**
 - Principle Investigator
 - Responsible Official
 - Biosafety Officer
 - Engineering and Maintenance



Body of the SOP

- **Format**
 - Easy to read and concise
 - Sufficient detail to enable persons with basic knowledge to successfully reproduce procedure without supervision
- **Title and brief description of the procedure or experiment**
- **Special health and safety precautions**
- **Associated Risks**
 - Burns (Autoclaves; UV lights)
 - Rotor failure
- **Definitions**
- **Experience Requirements**
 - Formal training
 - Supervision
 - Documentation and evaluation of training
- **Procedures**
 - Step-by-step description of the procedure
 - Steps written in the order they occur

Biosafety/Biosecurity Manual Outline

- 1. Entry procedure**
- 2. Working within the laboratory**
 - Including PPE selection and Use
- 3. Exit procedure**
- 4. Autoclaving/Decontamination**
- 5. Movement of equipment in and out**
- 6. Animal Procedures**
- 7. Transport of infectious material**
- 8. Communication and data transmission**
- 9. Lab Status when not in use**
- 10. Requirements of incident response plans**
- 11. Medical Surveillance**

1. Entry Procedures

- 1. Secure Entry**
- 2. Verify Airflow**
- 3. Enter Laboratory Space**



1.1 Secure Entry

- **Authorized and controlled access**
- **SOP to identify those authorized**
- **SOP to control access**
 - Procedural
 - Physical

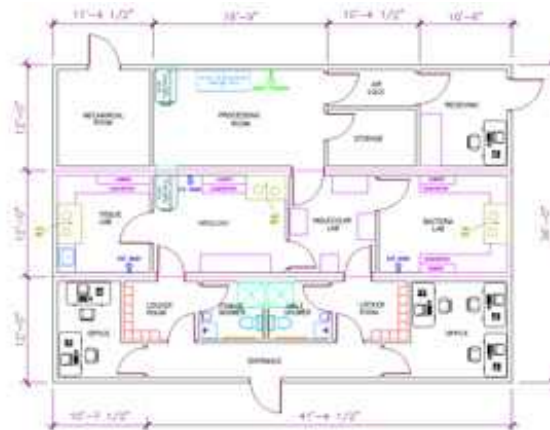


1.2 Verify Airflow

- **No entry into laboratory until airflow checked**
- **SOP to identify proper flow rate**
- **SOP to identify logging mechanism**
- **SOP to determine response plan if airflow not in compliance**

1.3 Entry into Laboratory Space

- Passage from outer area into anteroom and from anteroom into containment area
- Facility layout specific
- Location for Donning PPE



2. Working within the Laboratory

- 1. General procedures**
- 2. Use of personal protective equipment**
- 3. Use of BSC**
- 4. Proper use of centrifuges and microfuge**
- 5. Microfuge**
- 6. Minimization of aerosol production**
- 7. Sharps handling and disposal**
- 8. Vacuum protection**
- 9. Decontamination/disinfection (lab cleaning)**
 - 1. Lab**
 - 2. Equipment**
- 10. Waste collection and disposal**

2.1 General Procedures for working in a lab

- **The laboratory itself is the first layer of containment**
- **The use of good laboratory practices and appropriate microbiological techniques**
 - **Being aware**
 - **Proper planning**
 - **Understanding the proper care and use of equipment**
 - **Avoiding distractions as much as possible**
- **The laboratories must have SOPs for the general procedures within each laboratory which are based upon the risk assessment**

2.2 Use of PPE

- **Dependant upon all hazardous material to be worked with**
 - Biological
 - Chemical
 - Radiological
 - **Should be used in conjunction with engineered controls**
 - Radiation shielding and chemical fume hoods may be required
- 1. Gowns**
 - 2. Gloves**
 - 3. Eye and mucosal membrane protection**
 - 4. Respiratory Protection program**

2.2.1 Gowns

- **Laboratory coats or gowns should be worn when there is a potential for splashing or spraying**
- **Gowns should be closed in the front and provide the appropriate level of fluid-resistance**
- **Gowns should have tight fitting wrists or elasticized sleeves when working in a Biosafety Cabinet (BSC)**
 - **Water resistance gauntlets can also be used to provide additional arm protection.**
- **Hoods, caps and shoe covers provide splash and spill protection**
- **Closed toe shoes are suggested**

2.2.2 Gloves

- **Gloves should be worn when performing all laboratory procedures**
- **Vinyl or latex gloves are effective against skin exposure to infectious materials**
 - **Not intended to protect against needle or sharp penetration**
 - **Multiple layers of vinyl or latex gloves**
 - **Heavyweight rubber utility gloves**
 - **Gloves should be changed when visibly contaminated, torn or defective and upon completion of work**
- **The outside of the gloves is considered contaminated**
- **Gloves should be removed using aseptic techniques to protect the skin from contamination**



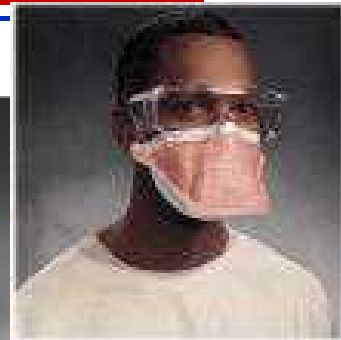
2.2.3 Eye and mucosal membrane protection

- **A face mask or goggles must be used**
 - When working with blood borne pathogens
 - Or when an infectious material may become aerosolized and work can not be conducted within a BSC
- **A full face mask provides additional protection from the unintentional touching of mouth, eyes and nose with a contaminated gloved hand**



2.2.4 Respiratory Protection

- **Respiratory protection is used to provide protection from particles entry into the mouth, nose and lungs**
- **N95/N100 Respirator**
 - Disposable
 - Classified by:
 - Filter efficiency – 95% (N95), 99% (N99), 99.97% (N100)
 - Series – N (not oil resistant), R (oil resistant), P (oil proof)
- **Powered Air Purifying Respirator (PAPR)**
 - Tight-fitting and loose-fitting models
 - Disposable hood
 - Breathing tube
 - Motor/blower unit
 - Cartridges
 - Nickel Cadmium (NiCad) battery pack
 - Used when
 - Persons with facial hair or facial anomalies that interfere with the seal cannot wear an N95 respirator
 - High-risk aerosol generating procedures present
- **Surgical masks are not respirators**
 - Provide droplet protection, not aerosol protection
 - Provide patient protection
 - Keeps hands out of mouth



2.2.4 Respiratory Protection (con't)

- **Medical evaluation**
 - Determine individual's fitness to use a respirator
 - Physician or other healthcare provider
 - Medical evaluation questionnaire
 - Physical exam at physician's discretion
- **Fit test**
 - Accepted/approved qualitative or quantitative protocol
 - When
 - Prior to initial use
 - Annually
 - Whenever different respirator is worn
 - Whenever a problem reported
 - Whenever a change (e.g. facial change, weight loss) is reported
- **Training**
 - Criteria for respirator selection
 - Limitations of respirator types
 - Proper method for donning
 - Checking face piece for seal and proper operation
 - Respirator maintenance



Types of Cabinets

	Personnel	Product	Environment
Chemical Fume Hoods	X		
Laminar Flow Clean Benches		X	
Class I Biological Safety Cabinet	X		X
Class II Biological Safety Cabinet	X	X	X
Class III Biological Safety Cabinet	X	X	X
Isolators	X	X	X

2.3 Use of BSC

- 1. Start Up**
- 2. Decontamination**
- 3. Proper Use**
- 4. Work Techniques**
 - Waste Collection
 - Spill Clean up
- 5. Final purging and Wipe down**
- 6. Shut down**
- 7. Maintenance and Routine Cleaning**



2.3.1 Start up

- 1. For class II B2 cabinets, the cabinets are controlled by the HVAC system and are therefore on at all times**
- 2. For laboratories containing other types of BSC, before work starts the BSC should be powered for at least 1 minute before starting use**
- 3. Sash alarms should not be powered off at any time**
- 4. Gauges should be checked to insure cabinet is operating within the certified parameters**

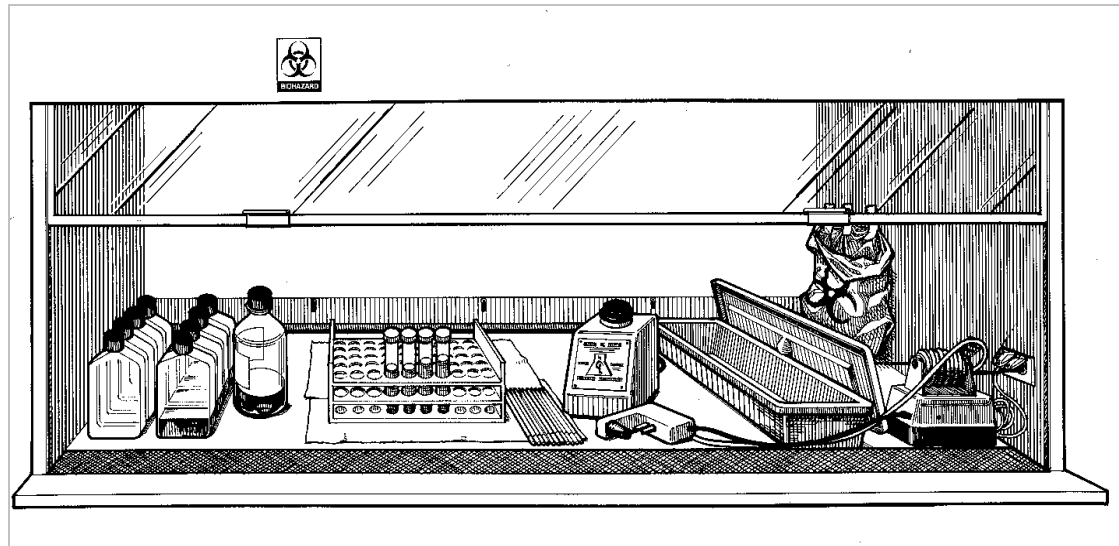
2.3.2 Decontamination

- **The BSC should be wiped down with a proper disinfectant**
- **The SOP will identify the proper disinfectant and contact time**
 - **E.g. A bleach solution with a following ethanol wipe down**



2.3.3 Proper Use of BSC

- **Place all needed equipment into the BSC**
- **Do not over crowd or block airflow**
- **Place the equipment so is it possible to work from a clean side to a dirty side**
- **Wait for the airflow to resume, approximately 2 to 3 minutes, before starting work**



2.3.4 Work Techniques

- **The laboratory SOP must define the proper work technique for working within the BSC**
 - **Must be specific to the work to be conducted**
 - **Must include the required PPE, address the use of flames in BSC, blocking airflow, arm movement, sash level, etc**
- **Waste Collection**
 - **Any waste should be disposed of within the BSC to avoid contamination outside the BSC**
 - **SOP must define proper waste handling**
- **Spill Clean up**
 - **Work should be halted as soon as possible after a spill occurs**
 - **Clean the spill as soon as safely possible**
 - **Broken glass or other sharps should be disposed of in sharps disposal with forceps or tongs**
 - **The laboratory SOP must detail the procedure for spill response**
 - **The SOP should include response to spills within the BSC grill and spills on persons working in the BSC**

2.3.5 Final purging and Wipe down

- **All biohazardous waste should be placed into a proper container and removed from the BSC**
- **The BSC should be wiped down with the proper disinfectant**
 - **Chemical Disinfectant**
 - **UV light***



* The US CDC, NIH and NSF agree that UV lamps are neither recommended nor required in BSC

2.3.6 Shut Down

- **For hard ducted BSC, turn off only the lights**
- **Other BSCs may be powered off after use**



2.3.7 Routine maintenance and routine cleaning

- **BSC require routine maintenance and cleaning**
- **The laboratory SOP must include the process for routine cleaning and decontamination for maintenance**



2.4 Proper use of centrifuges and microfuge

- **The laboratory SOP must define the proper use of centrifuges**
 - Utilize aerosol containment devices
 - Follow preventive maintenance procedures
- **The laboratory SOP must define the proper use of microfuges**
 - Should be used in a aerosol-proof containment device



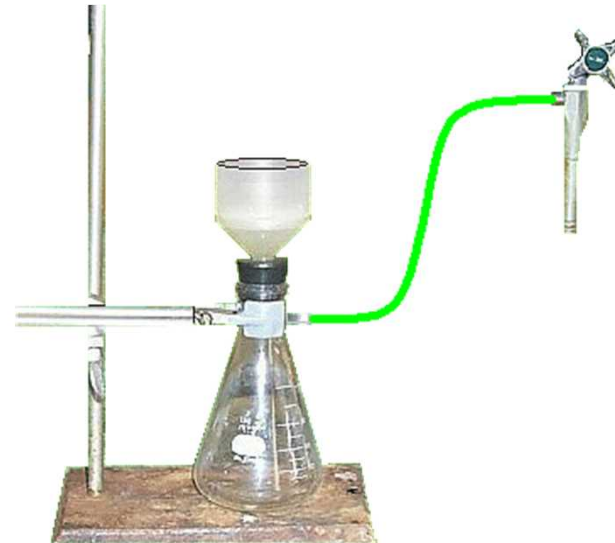
2.5 Sharps Handling



- Utilize safe sharp devices
- Minimize sharps and glass as much as possible
- Keep hands away from needles and use mechanical methods for needle removal
- Never bend, recap or manipulate sharps by hand
- Dispose of entire unit into sharps container and collect reusable sharps in labeled, leak-proof container
- Do not overfill containers
- The laboratory SOP must detail the proper methods for sharp handling and disposal

2.6 Vacuum protection

- **Vacuum pumps must be protected from contamination using a filter**
- **The risk assessment will aid in the definition of the filter type and location**
- **The laboratory SOP must detail the proper use and type of filter used**



2.7 Chemical Storage

- The laboratory SOP must process the storage, labeling and handling techniques for hazardous chemicals within the laboratory
- The storage and handling methods should be based upon the risk assessment
- Identify proper methods of disposal
 - Incineration
 - Permissible limits for sewer disposal



2.9 Spill Response

- The laboratory SOP should define the proper spill response based upon the material spilled and other specifics include sharps handling
- The SOP must be developed based upon a risk assessment
 - Should identify the PPE
 - Should identify the proper disinfectants
- Precautions for each disinfecting agent defined within the SOP should also be listed
- Spill may exceed lab ability for clean-up
 - Fumigation by biosafety office may be necessary



3 Exit Procedures

The laboratory SOP must detail the exit procedures for each laboratory.

- 1. Secure infectious materials**
- 2. Waste disposal/decontamination**
- 3. Disinfection of work surfaces**
- 4. Doff, disposal/decontamination of PPE**
- 5. Hand washing**
- 6. Exit**
- 7. Consider emergency evacuation procedures**



3.1 Waste Disposal/Decontamination

- **All waste should be placed into a biohazard disposal bag**
 - **This bag should be clearly labeled as containing biohazardous material and be water tight**
 - **Any sharps to be disposed of should be placed into a sharps container which is also properly labeled**
 - **A sharp container should be resistant to perforation by any sharps within the container and be resistant to spills**
 - **Sharps should be able to be placed inside the container without opening the lib.**
- **The container and all contents must be autoclaved before removal from containment**
- **If an autoclave is not available within the containment area, the biohazard container should be placed into a second outer bag**
- **The outer bag should be sealed and submerged into a decontamination dunk tank or decontaminated before removed from containment**

3.2 Disinfection of work surfaces

- **The surface area of the laboratory should be disinfected with the proper disinfecting agent**
- **Each disinfecting agent has different properties**
 - **Concentration**
 - **Age of effectiveness**
 - **Contact time**
 - **Impact to the biological agent**
- **Disinfecting agents may also corrode equipment and surfaces.**
- **The laboratory SOP will define the exact disinfecting agent, contact time and procedure**
- **The SOP should also define the hazards associated with the disinfecting agent and proper handling and storage techniques**
- **MSDS should be available for all disinfectants**

3.3 Disposal/Decontamination of PPE

- **PPE should be removed as directed in the SOP before exiting the lab or anteroom**
- **Disposable PPE should be placed into a biohazard container**
- **Reusable PPE should be decontaminated based upon manufactures recommendations and stored**



3.4 Hand washing

- **All personnel should wash their hands prior to leaving the anteroom or containment area**
- **If soap and water are not present, a chemical hand cleanser may also be used**



3.5 Exit

- **Before exiting the laboratory area**
 - Double check all equipment is in the proper state
 - All doors are closed
 - All biohazards are properly disposed of or stored
- **Sign out where required**
- **The laboratory area should be secured as determined by the SOP**



4 Autoclaving

- **An autoclave is a device which uses extreme heat in the form of steam and pressure to sterilize items**
- **Add water to a sealed container**
- **Items should be placed loosely within the autoclave**
- **The laboratory SOP must define the time and pressure required to fully sterilize items**
 - **The proper loading and unloading procedures**
 - **The SOP should also identify those which can not be autoclaved**
 - **The SOP must also define the verification methods for use within the laboratory**

5 Movement of equipment in and out

- **The laboratory should have been designed to allow for large equipment movement in and out**
- **Equipment must be decontaminated before removal from the laboratory**
- **The decontamination procedure must be identified with the equipment SOP**
- **The method of decontamination must consider:**
 - **The contaminants**
 - **The physics of the equipment**
 - **The reason for its removal from the laboratory**

6 Animal Biosafety Procedures

- 1. *Animal Care and Handling (1999 manual?)***
CEPSCA
- 2. Animal care worker**
- 3. Cage cleaning / waste disposal**
- 4. Animal Disposal**



6.1 Animal Care workers

- **Animal care workers should be giving proper training**
 - Handling
 - Risks
 - PPE
- **Each laboratory must have a unique SOP for each species**
 - A supplemental SOP for working with infected animals
- **PPE for animal care workers should include:**
 - Protection from allergens
 - Infectious agents
 - Injuries acquired from the animals
- **Medical surveillance program**

6.2 Cage cleaning/waste disposal

- **Cage cleaning releases aerosols which may include infectious agents and are also a strong source of allergens**
- **Respiratory protection should be used while cleaning cages which have not been sterilized via autoclave**
- **Cage cleaning may also be preformed in a BSC**
- **The laboratory SOP must define how the cages are to be cleaned and sterilized**
- **The SOP must also define the method for waste disposal and transport**

6.3 Animal Disposal

- **Autoclaving animals larger than mice not recommended**
 - To sterilize a mouse with an autoclave 1.5 hours of time is required
- **Decontamination of the animal storage container via autoclave or chemical decontamination prior to transport to an incinerator or chemical digester**
- **The laboratory SOP must define the methods for decontamination and disposal of animals**



7 Transport of Infectious Materials

- **CSIR must develop a policy for movement of material in and out of the containment space**
- **This should include:**
 - **The validation requirements if the material is to be used outside of a BSL-3 laboratory**
 - **The procedures for transporting material between BSL-3 laboratories**

7.1 Transport Between BSL-3 lab space

- **Use leak proof non-breakable primary container**
- **Place into similar secondary container**
- **Label as biohazard**
- **Decon outer container before removal from containment**



7.2 Transportation of material outside

- **Prior to movement outside of BSL-3 laboratory space:**
 - **Infectious material must be inactivated**
 - **The inactivation methods must be verified**
- **The inactivation and validation methods must be defined within the SOP**



8 Communication and Data Transmission

- **Communication and data as part of biosafety and biosecurity can include:**
 - Information regarding the laboratory airflow
 - Power grid
 - Security system
 - Personnel procedures
 - The SOPs
- **Most biosafety information should be available for all persons working within the laboratory area**
- **Biosecurity information should be protected to a level appropriate to the information**

9 Lab Status when not in use

- **CSIR needs to work with the laboratory engineers to determine the engineered control limitations**
- **The laboratory must remain negative, but a risk assessment along with the engineering limitation can be used to determine how negative**
- **SOPs should also identify equipment and other systems which can be shutdown when the laboratory space is not in use**
- **The SOP must also define the proper procedures for restoring the laboratory to operational levels prior to use**
- **CSIR must also define the proper methods for laboratory decontamination and scheduled maintenance cycles**
 - **The decontamination method should be developed based upon a risk assessment**

10 Incident Response Plan

- **Each facility must develop an incident response plan which includes the procedures for handling incidents within the BSL-3 laboratory space**
- **The response plan should be scoped to include:**
 - **Large level disasters**
 - **Infrastructure disruptions**
 - **Medical emergencies**
 - **Biosecurity incidents**
- **A specific SOP should be developed to define the response mechanism for each incident within the laboratory**
- **The SOPs should be developed based upon the risk assessment**
- **Plans should be practices and reviewed on a periodic basis**
- **Training should include all agencies involved in the response**

11 Medical Surveillance

- **Each facility should define the medical surveillance program for any employees with access to the laboratory and infectious material (including animal care takers)**
- **The medical surveillance program should be developed based upon the hazards and the facilities limitations**
 - **The surveillance program requirements should fall out of a risk assessment**
- **The program should identify:**
 - **The pre-screening requirements**
 - **The suggested/required immunizations**
 - **Monitoring procedures for symptoms**
 - **Post-exposure practice and procedures**
 - **Provide information to the workers as well as healthcare providers as to the potential exposures**
 - **Emergency care options**

Summary

- **CSIR define policies and general procedures**
- **Laboratories to develop and implement SOPs**
- **Priority Procedures**
 - **Entry Procedures**
 - **Proper PPE Procedures**
 - **Respiratory Protection**
 - **Decontamination Procedures**
 - **Incident Response Procedures**
 - **Medical Surveillance**

