UCDAVIS
VETERINARY MEDICINE
Veterinary Medical Teaching Hospital

WILLIAM R. PRITCHARD VETERINARY MEDICAL TEACHING HOSPITAL

VETERINARY CLINIC

INJURY AND ILLNESS PREVENTION PROGRAM

Annual Review Dates:

Updated: M. F. Oct 2021

UC DAVIS

Veterinary Medical Teaching Hospital

INJURY AND ILLNESS PREVENTION PROGRAM

This Injury and Illness Prevention Program has been prepared by the University of California, SVM: VMTH in accordance with University Policy (UCD Policy & Procedure Manual Section 290-15: Safety Management Program) and California Code of Regulations Title 8, Section 3203 (8 CCR, Section 3203).

WILLIAM R. PRITCHARD VETERINARY MEDICAL TEACHING HOSPITAL

MISSION STATEMENT:

The Veterinary Medical Teaching Hospital provides state of the art clinical care while serving as the primary clinical teaching experience for our DVM students and post graduate veterinarian residents.

UC DAVIS
Veterinary Medical Teaching Hospital

INJURY AND ILLNESS PREVENTION PROGRAM

TABLE OF CONTENTS

UCDAVIS VETERINARY MEDICINE
Veterinary Medical Teaching Hospital

I. Authorities and Responsible Parties

The authority and responsibility for the implementation and maintenance of the Injury and Illness Prevention Program (IIPP) is in accordance with University Policy (UCD Policy & Procedure Manual Section 290-15: Safety Management Program) and California Code of Regulations (9 CCR, Section 3203) and is held by the following individuals:

1. Name: **Joshua Stern**
   Title: Chief Veterinary Medical Officer (CVMO)
   Authority: Direct authority and responsibility for implementing and maintaining this IIPP.
   Signature: _____ Date: 10/04/2021

2. Name: **Joy Hoover**
   Title: VMTH Hospital Administrator
   Authority: Direct authority and responsibility for ensuring implementation of this IIPP.
   Signature: Joy Hoover Date: 10/04/21

3. Name: **Scott Cooling**
   Title: SVM Director of Facilities and Safety
   Authority: Authority and responsibility for designing, implementing and maintaining this IIPP.
   Signature: Scott Cooling Date: 10-04-2021

4. Name: **Maura Ferrero**
   Title: VMTH Safety Officer – Office of the Dean
   Authority: Authority and responsibility for designing, implementing and maintaining this IIPP.
   Signature: _____ Date: 10/04/2021

5. Name: **Krisztina Forward**
   Title: SVM Safety Officer – Office of the Dean
   Authority: Authority and responsibility for designing, implementing and maintaining this IIPP.
   Signature: Krisztina Forward Date: 10/1/2021

UC DAVIS

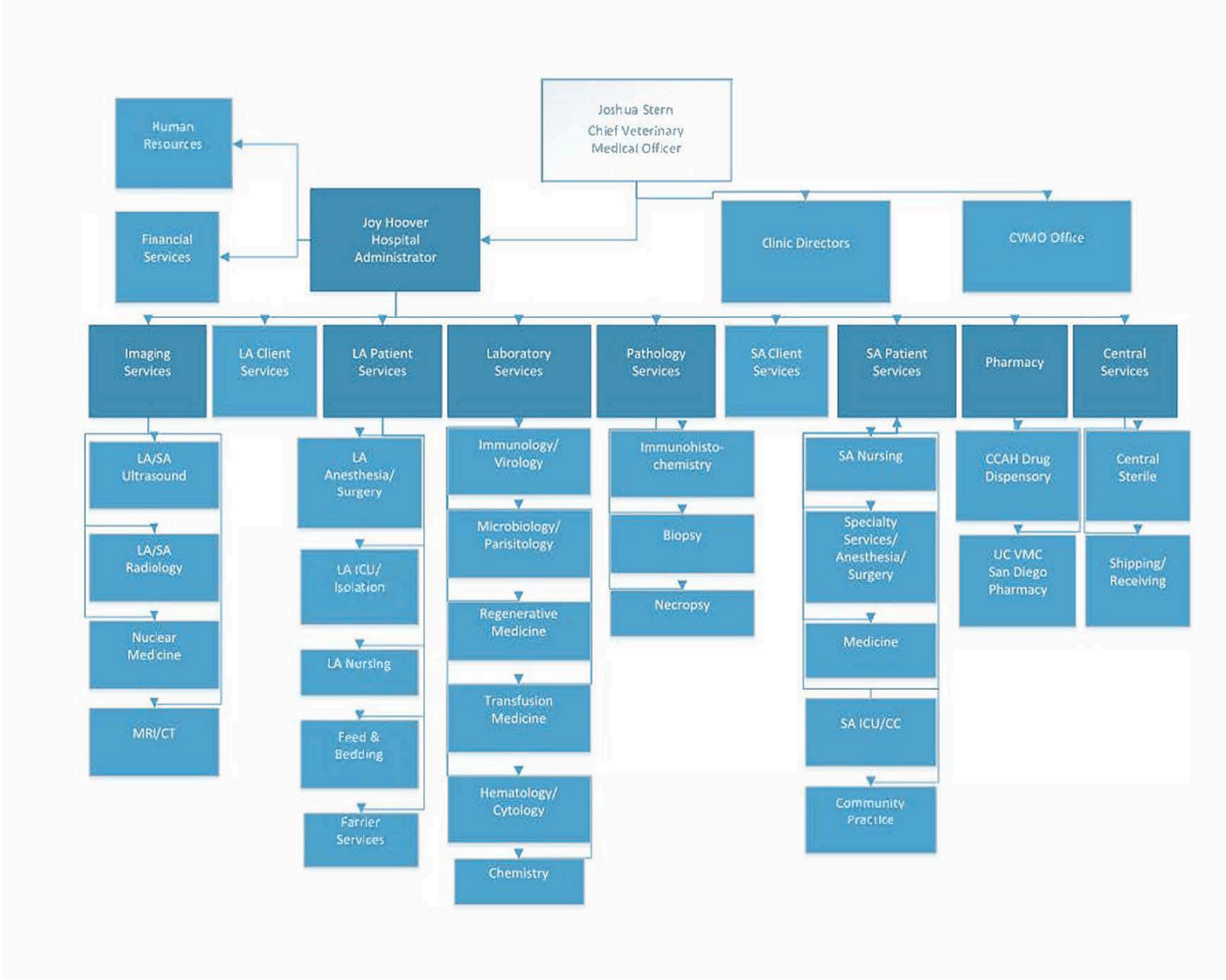
Veterinary Medical Teaching Hospital

VETERINARY CLINIC CONTACT INFORMATION

DIRECTORS OFFCE			
JOSHUA STERN	CHIEF VETERINARY MEDICAL OFFICER	(530)752-9963	
JOY HOOVER	VMTH HOSPITAL ADMINISTRATION	(309)264-7431	(530)752-9965
JANET HARLAN	VMTH EXECUTIVE OFFICER	(530)752-9963	
KATE HOPPER	VMTH DIRECTOR, SAC	(530)400-4347	(530)752-2467
BRET MCNABB	VMTH DIRECTOR, LAC	(530)304-4305	(530)752-0292
SCOTT COOLING	SVM DIRECTOR OF FACILITIES/SAFETY	(530)219-7060	
MAURA FERRERO	VMTH SAFETY OFFICER	(530)219-0632	
KRISZTINA FORWARD	SVM SAFETY OFFICER	(530)219-3543	

CLINIC	**MANAGER/SUPERVISOR**		
TAM VANDERBYL	LA SURGERY & ANESTHESIA SPVR	(530)979-0835	
ROBERT COLLINS	SA SURGERY AND ANESTHESIA MGR	(530)979-0879	
CHERYL PRIMAS	SA PATIENT CARE, ECC MGR	(530)979-0572	(530)752-1312
BRENDA KEEGAN	SA ICU/CC SPVR	(530)979-1412	
LORRIE SPRING	LA PATIENT CARE SPVR (OVERNIGHT)	(530)902-5916	
SOLI REDFIELD	LA PATIENT CARE, FEED AND BEDDING MGR	(530)752-6818	
ERICA WINANS	LA EQUINE ICU, ISO, NICU MGR	(916)207-8270	
SARAH BLASCZYNSKI	LA LIVESTOCK MGR	(530)979-0658	
TRACI ZALASKY	CLIENT SERVICES MGR	(530)752-1867	
DELAINA MATZ	CLIENT SERVICES SPVR	(530)979-6609	
KARLA GEACH	CLIENT SERVICES SPVR	(530)754-9546	

DIAGNOSTIC/SUPPORT SERVICE	**MANAGER/SUPERVISOR**		
CHRIS BRANDT	SVM CHIEF INFORMATION OFFICER	(530)754-4452	
JULIE BURGES	CLINICAL DIAGNOSIS LABORATORIES	(530)979-0711	
DANIELLE HOLT	RESEARCH AND DEVELOPMENT	(530)718-8431	
MANNY CARRILLO	CENTRAL SERVICES	(530)752-7816	
BECKY GRIFFEY	NECROPSY, ANATOMIC PATHOLOGY	(530)752-1369	
RICHARD LARSON	IMAGING SERVICES	(530)752-2369	
DAVID LISH	HUMAN RESOURCES	(530)752-8300	
BRENDA SISSOM	PERSONNEL/PAYROLL SUPERVISOR	(530)752-9972	
MONIQUE PEYTON	FINANCIAL SERVICES	(530)752-7284	
VALERIE WIEBE	PHARMACY	(530)752-0187	


Joshua Stern
Chief Veterinary Medical Officer
Human Resources
Financial Services
Joy Hoover Hospital Administrator
Clinic Directors
CVMO Office
Imaging Services
LA Client Services
LA Patient Services
Laboratory Services
Pathology Services
SA Client Services
SA Patient Services
Pharmacy
Central Services
LA/SA Ultrasound
LA/SA Radiology
Nuclear Medicine
MRI/CT
LA Anesthesia/ Surgery
LA ICU/ Isolation
LA Nursing
Feed & Bedding
Farrier Services
Immunology/ Virology
Microbiology/ Parisitology
Regenerative Medicine
Transfusion Medicine
Hematology/ Cytology
Chemistry
Immunohisto-chemistry
Biopsy
Necropsy
SA Nursing
Specialty Services/ Anesthesia/ Surgery
Medicine
SA ICU/CC
Community Practice
CCAH Drug Dispensory
UC VMC San Diego Pharmacy
Central Sterile
Shipping/ Receiving

FACILITY INFORMATION

Facility Name: **William R. Pritchard Veterinary Medical Teaching Hospital**

Director: **Dr. Joshua Stern**

Address: **One Garrod Drive, University of California, Davis 95616-8741**

Telephone Number: **(530)752-1393**

Buildings Occupied by Department

1. **Building:** **VMTH (Main) and Barns (B, C, D, Isolation)**
   Unit(s): Client Services, SAPCS, LAPCS, LA Surgery/Anesthesia, LA ICU, Pharmacy, Central Services, Lab Services
   Contact: Scott Cooling
   Phone: (530)219-7060

2. **Building:** **Vet Med II**
   Unit(s): Nuclear Medicine, CAPE, CT/NMR, LA NICU etc.
   Contact: Scott Cooling
   Phone: (530)219-7060

3. **Building:** **Center for Companion Animal Health (CCAH)**
   Unit(s): Medical Oncology, Rad Oncology, CAPE, Community Practice, etc.
   Contact: Scott Cooling
   Phone: (530)219-7060

4. **Building:** **Vet Med 3A**
   Unit(s): Necropsy, Anatomic Pathology
   Contact: Scott Cooling
   Phone: (530)219-7060

5. **Building:** **VMSSAC**
   Unit(s): VMTH Finance/Personnel
   Contact: Scott Cooling
   Phone: (530)219-7060

6. **Building:** **Gourley Clinical Teaching Center**
   Unit(s): Community Surgery
   Contact: Scott Cooling
   Phone: (530)219-7060

II. System of Communications

1. Effective communications with **VMTH** employees have been established using the following methods:

- [x] Standard Operating Procedures
- [x] Safety Data Sheets
- [x] Monthly departmental operations meetings
- [x] Internal media (VIPER, SVM Safety Site)
- [x] EH&S Safety Nets
- [x] Training videos
- [x] Safety Newsletter
- [x] Handouts
- [x] Building Evacuation Plan (VMTH EAP)
- [x] E-mail
- [x] Posters and warning labels
- [x] Job Safety Analysis – Initial Hire
- [x] Job Safety Analysis – Annual Review
- [x] Other (list): Verbal Communications, Training Class Attendance

2. Employees are encouraged to report any potential health and safety hazard that may exist in the workplace. **Hazard Alert Forms (Appendix A)** are available to employees for this purpose. Forms are to be placed in the Safety Coordinator's departmental mail box. Employees have the option to remain anonymous when making a report.

3. Employees have been advised of adherence to safe work practices and the proper use of required personal protective equipment. Conformance will be reinforced by discipline for non-compliance in accordance with University policy (UCD Procedure 62 - Personnel Policies for Staff Members, Corrective Action).

VMTH SAFETY COMMITTEE:

The **VMTH Safety Committee** meets the 2nd Tuesday of every month. The committee is comprised of Supervisors and Mangers from both Small and Large Animal clinics. The committee meets to discuss urgent safety matters, injury statistics, and any new/changes to protocols/procedures/announcements that address safety issues encountered at the VMTH. Trainings, workshops, announcements, BSAS and other safety resources from UCD Safety Services are also shared during this meeting.

VMTH safety announcements/issues are also discussed at monthly **VMTH Managers/Supervisors** meetings. Minutes from these meetings are available on VIPER.

Occupational Health and Safety Hazards in the VMTH

GENERAL
Flooring - surface integrity, traction, debris
Walkways – width, obstacles
Stairs
Cabinets – stability and height
Furniture – ergonomics
Work areas – tool storage, adequate space, access, lighting, emergency exits
Electrical – adequate number of outlets and switch locations
Computer terminal – eye strain
Heavy Lifting – adequate mechanical devices available

FIRE
Identify fire hazards, combustibles, and heat producers

HAZARDOUS MATERIALS
Refer to Safety Data Sheets (SDS)
Cytotoxic Agents

PUBLIC HEALTH
Zoonotic diseases
Aerosol Infectious Agents
Eating in the work area
Animal bites and scratches
Air quality (dust, toxic fumes, temperature)

MEDICAL WASTE
Sharps
Biohazard waste
Pharmaceutical waste

X-RAY AND NUCLEAR MEDICINE
Radiation Exposure
Hazardous Chemicals (radioactive isotopes)

OTHER HAZARDS
Compressed gases
Anesthetic gases
Ladders
Power Tools
Autoclaves
Forklift and other vehicles
Toxic Therapeutic Agents
Working on elevated surfaces
Cranes and hoists

UCDAVIS EMERGENCY CONTACTS

AMBULANCE: **911**

FIRE – Hazardous Spills: **911**
From a Cellphone **(530)752-1234**

POLICE: **911**
From a Cellphone **(530)752-1230**

FACILITIES: **(530)752-1655**

HEALTH CARE:

- **OCCUPATIONAL HEALTH SERVICES:** (530)752-6051
  Cowell Hall – across from Russell Field
- **STUDENT HEALTH SERVICES:** (530)752-2300
  La Rue Road – across from the ARC
- **SUTTER URGENT CARE:** (530)750-5830
  (Monday-Friday 5:30pm-9:30pm);
  Sat & Sun (10:00am-5:30pm)
  2020 Sutter Place #101, Davis CA 95616
- **DAVIS URGENT CARE:** (530)759-9110
  Saturday & Sunday 8am-5pm
  4515 Fermi Place, Davis, CA 95616
- **SUTTER HOSPITAL EMERGENCY ROOM:** (530)757-5111
  (After-hours, 24 hours on weekends, holidays)
  2000 Sutter Place, Davis CA 95616

SAFETY:

SVM Safety Officer – Krisztina Forward	(530)219-3543
VMTH Safety Officer – Maura Ferrero	(530)219-0632
Environmental Health & Safety (Business hours):	(530)752-1493
Environmental Health & Safety (After hours/on-call):	(530)752-1230
Workers Compensation:	(530)752-7243
Cal/OSHA	(916)263-2800

LAB/SERVICE SUPERVISOR:_____
Name Phone#

09/20 kf

Occupational Risks at the Veterinary Medical Teaching Hospital (summary)

INJURY RISK	CAUSE	LOCATION	PREVENTION
Laceration	Scalpel	Surgery or Treatment Rooms	• Use scalpels in proper manner and dispose of blades properly • Use hemostat to remove old blade from handle
Laceration	Hoof knife	Large Animal Clinic, Field Service, Ferrier Shop	• Use only sharp hoof knives in proper manner • When not in use, carry a knife in a sheath
Laceration	Pathology knife	Pathology Necropsy Floor Gourley Teaching Center	• Use only sharp knives in a proper manner • Avoid hurried situations when working with knives
Laceration	Prep blade	Large Animal Clinic	• When not in use, close prep blade • Do not leave on table tops • Dispose of blades properly • Use plenty of soap when shaving patient
Needle Sticks	Hypodermic needles, catheter stylets	Small Animal Clinic and Large Animal Clinic Gourley Teaching Center	• If possible, do not recap needles • Dispose in sharps container immediately after use • Do not hold syringe or needle cap in mouth • Do not walk with a syringe with an uncovered needle • Do not carry used needles in your pockets • Do not leave needles on tables or in instrument packs • Use on animal only when the animal is properly restrained
Physical Injury	Lifting patients, restraining patients, lifting hay, shavings bales, removing horse shoes or trimming horse feet	Small Animal Clinic and Large Animal Clinic Gourley Teaching Center	• Use proper lifting techniques and think about back safety when lifting • Seek assistance when lifting large dogs or moving anesthetized or non-ambulatory horses • Use cart or assistance to move hay bales • Stay in shape
Physical Injury	Foot trauma, hand trauma	Large Animal Clinic	• Be aware of being stepped on while handling livestock • Stay alert when handling sedated animals • Use caution when using wheeled gurneys to carry large animals • Use caution when using livestock chutes, closing stall doors, and operating farm equipment
Physical Injury	Animal bite	Small Animal Clinic Gourley Teaching Center	• Use caution when extubating patients • Seek assistance when handling a fractious patient • Post “bite” tag on cage when necessary • Use muzzle when necessary

Occupational Risks at the Veterinary Medical Teaching Hospital (summary)

INJURY RISK	CAUSE	LOCATION	PREVENTION
Chemical Exposure	Disinfectants Anesthetics Pesticides Pharmaceuticals Antineoplastic Drugs	Small Animal Clinic and Large Animal Clinic Gourley Teaching Center	• Follow established protocols
Radiation Exposure	X-Ray generating equipment radioactive isotopes	Small Animal Radiology, Large Animal Radiology, Nuclear Medicine, CT Scan Gourley Teaching Center	• Follow established protocols
Zoonotic Diseases	Bacterial	Small Animal Clinic and Large Animal Clinic Gourley Teaching Center	• Wash hands, change soiled outer garments • Avoid eating food in the animal facilities • Avoid putting anything in mouth while working in the clinic • Avoid touching face with soiled hands • Wash hands after touching animals • Clean outside of biosample container before transporting to the lab • Follow posted applicable signs on cage or stalls
Zoonotic Diseases	Viral (Rabies)	Small Animal Clinic and Large Animal Clinic Gourley Teaching Center	• Use caution according to protocol when handling patients with neurologic disorders • Wear gloves when handling CSF samples • Clean outside of biosample container before transporting to the lab • Follow posted applicable signs on cage or stalls • Rabies titer every two years, booster as needed

Occupational Risks at the Veterinary Medical Teaching Hospital

The following guidelines are a sub-section of the Veterinary Medical Teaching Hospital's (VMTH) Injury Illness Prevention Program (IIPP) and is meant to serve as a quick reference for veterinarians and veterinary technicians. Those guidelines describe safety precautions that will be followed when working at the Veterinary Medical Teaching Hospital or satellite and ambulatory veterinary service locations. Special precautions are included for handling material or animals that may transmit zoonotic disease. Employees are expected to notify their supervisor if there is any question or concern with complying with these safety precautions.

Additional precautions must be taken if individuals are immunocompromised or pregnant. Immunocompromised or pregnant persons who are working with potentially infectious animals or materials should consult with the occupational health physician before contact with suspect animals.

Annual employee training on IIPP and zoonotic disease safety procedures will be completed and safety procedures will be reviewed and updated annually. Standard Operating Procedure (SOP) will be followed to determine the appropriate personal protective equipment (PPE). An Infectious Disease Control (IDC) protocol has been developed for employee compliance. Internal review of all potential or known exposures has been established in the IDC protocol.

All employees have a responsibility to be aware and follow all safety procedures when working with animal clients at the VMTH because the level of risk associated with working with animals suspected of carrying an infectious disease is variable. Routine precautions (IDC protocol) should be followed since animal's symptoms of disease in some cases are difficult to readily recognize. The actual risk of contagious disease depends on the patient's history, age, location, and environment. Employees will be trained on how to protect themselves from the routine occupational risks associated with veterinary medicine and will contact their supervisor or the supervisor in charge if there are questions or concerns.

Risk Assessment of Zoonotic Diseases by Species

Zoonotic information by species can be found on the EH&S website at:
https://safetyservices.ucdavis.edu/units/occupational-health/surveillance-system/zoonotic-diseases

Risk Assessment of Zoonotic Disease by Species:

- Birds
  http://safetyservices.ucdavis.edu/article/care-and-use-birds-owls-and-raptors
- Camels & Llamas
  http://safetyservices.ucdavis.edu/article/care-and-use-camelids-camels-llamas
- Cats
  http://safetyservices.ucdavis.edu/article/care-and-use-cats
- Cattle
  http://safetyservices.ucdavis.edu/article/care-and-use-cattle
- Dogs
  http://safetyservices.ucdavis.edu/article/care-and-use-dogs
- Elephants
  http://safetyservices.ucdavis.edu/article/care-and-use-elephants
- Fish
  http://safetyservices.ucdavis.edu/article/care-and-use-fish
- Goats
  http://safetyservices.ucdavis.edu/article/care-and-use-goats
- Horses
  http://safetyservices.ucdavis.edu/article/care-and-use-horses
- Primates
  http://safetyservices.ucdavis.edu/article/care-and-use-nonhuman-primates
- Rabbits
  http://safetyservices.ucdavis.edu/article/care-and-use-laboratory-rabbits
- Reptiles
  http://safetyservices.ucdavis.edu/article/care-and-use-reptiles
- Rodents (Rat, Mouse, Guinea Pig, Hamster)
  http://safetyservices.ucdavis.edu/article/care-and-use-laboratory-rodents
- Sheep
  http://safetyservices.ucdavis.edu/article/care-and-use-sheep
- Swine
  http://safetyservices.ucdavis.edu/article/care-and-use-swine

III. System for Assuring Employee Compliance with Safe Work Practices

Employees have been advised of adherence to safe work practices and the proper use of required personal protective equipment. Conformance will be reinforced by discipline for non-compliance in accordance with University policy (UCD Procedure 62 - Personnel Policies for Staff Members, Corrective Action).

The following methods are used to reinforce conformance with this program:

1. Distribution of Policies

2. Training Programs

3. Safety Performance Evaluations

   Performance evaluations at all levels must include an assessment of the individual's commitment to and performance of the accident prevention requirements of his/her position. The following are examples of factors considered when evaluating an employee's safety performance.

   - Adherence to defined safety practices.
   - Use of provided safety equipment.
   - Reporting unsafe acts, conditions, and equipment.
   - Offering suggestions for solutions to safety problems.
   - Planning work to include checking safety of equipment and procedures before starting.
   - Early reporting of illness or injury that may arise as a result of the job.
   - Providing support to safety programs.

4. Statement of non-compliance will be placed in performance evaluations if employee neglects to follow proper safety procedures, and documented records are on file that clearly indicate training was provided for the specific topic, and that the employee understood the training and potential hazards.

5. Corrective action for non-compliance will take place when documentation exists that proper training was provided, the employee understood the training, and the employee knowingly neglected to follow proper safety procedures. Corrective action includes, but is not limited to, the following: Letter of Warning, Suspension, or Dismissal.

IV. Hazard Identification, Evaluation, and Inspection

Job Hazard Analyses and worksite inspections have been established to identify and evaluate occupational safety and health hazards.

1. Job Safety Analysis:

Job Safety Analysis (JSA) identifies and evaluates individual employee work functions, potential health or injury hazards, and specifies appropriate safe practices, personal protective equipment, and tools/equipment. JSA's have been completed for the following job categories:

A. **VMTH – Main Building**
- Laboratory staff, Administrative staff, Teaching Faculty, Research Faculty

B. **VETMED II**
- Laboratory staff, Administrative staff, Teaching Faculty, Research Faculty

C. **Center for Companion Animal Health (CCAH)**
- Laboratory staff, Administrative staff, Teaching Faculty, Research Faculty

D. **VET MED 3A**
- Laboratory staff, Administrative staff, Teaching Faculty, Research Faculty

E. **VMSSAC**
- Administrative staff

F. **GOURLEY TEACHING CENTER**
- Clinical Areas and Support

Job Safety Analysis (JSA) templates are located in VIPER – VMTH Safety Site.
Completed Job Safety Analysis are located in the IIPP Binder for each service area.

Hazard Evaluation/Job Safety Analysis

Hazard evaluation/job safety analysis have been conducted for the following job types, work stations or specific individuals

Job Type: **Pathology: SRAs, Lab Assistants, Office Staff**

Individuals: _____

Job Type: **Radiology Personnel**

Individuals: _____

Job Type: **Pharmacy/Central Service, Storekeeper Staff**

Individuals: _____

Job Type: **Laboratory: SRA's, CLT's, Lab Assistants**

Individuals: _____

Job Type: **Clerical/Administrative**

Individuals: _____

Job Type: **Clinical Areas (Nursing) and Clinical Support**

Individuals: **(Diagnostics)**

The Hazard Evaluation Forms/Job Safety Analysis identifying and documenting the occupational safety and health hazards are maintained in the following locations:

VMTH IIPP binders, located in the Service Supervisors Offices (VMTH)

Code of Safe Practices: Each supervisor has a copy posted in the area

Posted Safety Notices: Each supervisor has a copy posted in the area

HAZARD ALERT FORM

Department:_____

I. Unsafe Condition or Hazard

Name: (optional)_____ Job:_____

Title: (optional)_____

Location of Hazard:_____

Building:_____ Floor:_____ Room:_____

Date and time the condition or hazard was observed:

_____

Description of unsafe condition or hazard:_____

_____

_____

What changes would you recommend to correct the condition or hazard?

_____

_____

Employee Signature: (optional)_____

Date:_____

II. Management/Safety Committee Investigation

Name of person investigating unsafe condition or hazard:

_____

Results of investigation (What was found? Was condition unsafe or a hazard?): (Attach additional sheets if necessary.)

_____

_____

_____

_____

Proposed action to be taken to correct hazard or unsafe condition: (Complete and attach a Hazard Correction Report, IIPP Appendix E)

_____

_____

_____

Signature of Investigating Party:_____

Date:_____

IIPP-Appendix A Sept 2010ln

Completed copies of this form should be routed to the appropriate supervisor and department Safety Coordinator, and must be maintained in department files for at least three years.

UCDAVIS VETERINARY MEDICINE
Veterinary Medical Teaching Hospital

2. Worksite Inspections

Worksite inspections are conducted to identify and evaluate potential hazards. Types of worksite inspections include both periodic scheduled worksite inspections as well as those required for accident investigations, injury and illness cases, and unusual occurrences. Inspections are conducted at the following worksites:

1) Location: **VMTH – All Service Units**
   Frequency: **Annual**
   Responsible Person: **Service Supervisors/M. Ferrero**
   Records Location: **Service Office**

2) Location: **Vet Med II**
   Frequency: **Annual**
   Responsible Person: **Service Supervisors/M. Ferrero**
   Records Location: **Service Office**

3) Location: **CCAH**
   Frequency: **Annual**
   Responsible Person: **Service Supervisors/M. Ferrero**
   Records Location: **Service Office**

4) Location: **Vet Med 3A**
   Frequency: **Annual**
   Responsible Person: **Service Supervisors/M. Ferrero**
   Records Location: **Service Office**

5) Location: **Gourley Teaching Center**
   Frequency: **Annual**
   Responsible Person: **Service Supervisors/M. Ferrero**
   Records Location: **Service Office**

Template **Worksite Inspection Forms** are located in **VIPER – VMTH Safety Site.** Completed Worksite Inspection Forms are located in the **IIPP Binder.**

WORKSITE INSPECTION FORM

General Office Environment

Location: _____ Date: _____

Inspector: _____ Phone: _____

Department: _____

Administration and Training

Yes ☐ No ☐ NA ☐	1.	Are all safety records maintained in a centralized file for easy access? Are they current?
Yes ☐ No ☐ NA ☐	2.	Have all employees attended Injury & Illness Prevention Program training? If not, what percentage has attended? _____
Yes ☐ No ☐ NA ☐	3.	Does the department have a completed Emergency Action Plan? Are employees being trained on its contents?
Yes ☐ No ☐ NA ☐	4.	Are chemical products used in the office being purchased in small quantities? Are Material Safety Data Sheets needed?
Yes ☐ No ☐ NA ☐	5.	Are the Cal/OSHA information poster, Workers' Compensation bulletin, annual accident summary posted?
Yes ☐ No ☐ NA ☐	6.	Are annual workplace inspections performed and documented?

General Safety

Yes ☐ No ☐ NA ☐	7.	Are exits, fire alarms, pullboxes clearly marked and unobstructed?
Yes ☐ No ☐ NA ☐	8.	Are aisles and corridors unobstructed to allow unimpeded evacuations?
Yes ☐ No ☐ NA ☐	9.	Is a clearly identified, unobstructed, charged, currently inspected and tagged, wall-mounted fire extinguisher available as required by the Fire Department?
Yes ☐ No ☐ NA ☐	10.	Are ergonomic issues being addressed for employees using computers or at risk of repetitive motion injuries?
Yes ☐ No ☐ NA ☐	11.	Is a fully stocked first-aid kit available? Is the location known to all employees in the area?
Yes ☐ No ☐ NA ☐	12.	Are cabinets, shelves, and furniture over five feet tall secured to prevent toppling during earthquakes?
Yes ☐ No ☐ NA ☐	13.	Are books and heavy items and equipment stored on low shelves and secured to prevent them from falling on people during earthquakes?
Yes ☐ No ☐ NA ☐	14.	Is the office kept clean of trash and recyclables promptly removed?

Electrical Safety

Yes ☐ No ☐ NA ☐	15.	Are plugs, cords, electrical panels, and receptacles in good condition? No exposed conductors or broken insulation?
Yes ☐ No ☐ NA ☐	16.	Are circuit breaker panels accessible and labeled?
Yes ☐ No ☐ NA ☐	17.	Are surge protectors being used? If so, they must be equipped with an automatic circuit breaker, have cords no longer than 15 feet in length, and be plugged directly into a wall outlet.
Yes ☐ No ☐ NA ☐	18.	Is lighting adequate throughout the work environment?
Yes ☐ No ☐ NA ☐	19.	Are extension cords being used correctly? They must not run through walls, doors, ceiling, or present a trip hazard.
Yes ☐ No ☐ NA ☐	20.	Are portable electric heaters being used? If so, they must be UL listed, plugged directly into a wall outlet, and located away from combustible materials.

VMTH Facility and Safety Audit (Annual)

Service:	
Service Manager/Supervisor:	
Building:	
Room Numbers:	

DOCUMENTS								
#	Y	N	N/A					
1				VMTH Injury and Illnes Prevention Plan (IIPP)				
2				VMTH Emergency Action Plan (EAP)				
3				VMTH Medical Waste Management Plan (MWMP)				
4				VMTH Hazard Communications Plan (HCP) and/or Lab Safety Manual				
5				VMTH Infectious Disease Control Manual (SAC/LAC) and Posters				
6				VMTH Heat Illness Prevention Manual				
7				UC Chemicals (Formerly CIS) - Annual	CERTIFICATION DATE:			
8				Certified Unified Program Agency (CUPA) Self-Audit	CERTIFICATION DATE:			
9				Laboratory Hazard Assessment Tool (LHAT) - Annual	CERTIFICATION DATE:			
10				Service Area Specific Standard Operating Procedures (SOPs)				
11				Service Area Specific SafetyNets (Compressed gas, needle/syringe safety, ergonomics, etc)				
12				SafetyNet #13 - Chemical Spill Response				
13				SafetyNet #127 - Biological Spill Response				
14				Safety Data Sheets (SDS)				
15				IACUC Protocols	IACUC #		EXPIRES:	
16				Laser Use Authorization (LUA)	LUA #:		EXPIRES:	
17				Radiological Use Authorication (RUA)	RUA #:		EXPIRES:	
18				Bloodborne Pathogen Plan (BBP)				
19				Biological Use Authorization (BUA)	BUA #:		EXPIRES:	

SIGNAGE				
#	Y	N	N/A	
20				Hazard Notice Signs on all entrances - includes hazard logos
21				Emergency Contact Information posted in communal areas
22				Recognized Chemical Carcinogen (RCC) Forms posted
23				Hazard Communications SDS, Labels, and Emergencies Poster

TRAINING AND DOCUMENTATION				
#	Y	N	N/A	
24				VMTH Injury and Illness Prevention (IIPP) & Emergency Action Plan (EAP) Training - LMS
25				Job Safety Analysis (JSA) / Hazard Assessment for each employee - On-site
26				VMTH Safety Trainings - LMS
27				Hazard Communications Training + Addendum / Global harmonized System Training - LMS

28				Heat Illness Prevention Training for all work related activities performed outdoors - LMS
29				VMTH Chemical Spill Training - LMS
30				Service Area Specific Standard Operating Procedures (SOPs) - On-site
31				Animal Care and Use (ACU101)
32				Biosafety Cabinet Training - LMS (Initial training)
33				Fume Hood Safety Training - LMS (Initial training)
34				Fundamentals of Lab Safety - LMS
35				Respirator Fit Testing - Annual
36				Risk Assessments/Health Surveillance - OHSS
37				Injury Reporting and Employer's First Report (EFR)
38				VMTH Safety Checklist

GENERAL SAFETY				
#	Y	N	N/A	
39				Ceiling tiles are in good repair
40				Chemical Spill Kits - Accessible and available
41				Emergency eyewash/showers station accessible
42				Emergency eyewash/showers stations - tested annually and monthly
43				Emergency eyewash/showers stations free of obstruction
44				Fire Extinguishers accessible and charged
45				First Aid Kit available and restocked
46				Floor are in good repair to prevent slip, trips, and falls
47				Food and drinks are prohibited in patient care areas
48				Furnishings should be easily decontaminated
49				Furniture taller than 5 feet are anchored to the wall to preventing tipping
50				Heavy items stored on lower shelves
51				Lab air should be negative to the hallway
52				Laboratory workers - minimum attire requirements: long pants, closed toe/heel shoes
53				Personal Protective Equipment (PPE) available and used as needed (face shields, gloves, lab coats, Tyvek, respirator, safety glasses, splash goggles, boots, booties, bonnets, masks, etc.)
54				Refrigerators/freezers appropriately labeled according to use
55				Respirator users have been medically cleared and fit tested annually by EH&S
56				Sink is available for hand washing (soap and paper towels)
57				Sinks labeled "Industrial Water - Do Not Drink"
58				Work area is cleaned and uncluttered

EQUIPMENT				
#	Y	N	N/A	
59				Biological Safety Cabinets (BSC) certified annually by TSS
60				Compressed gas cylinders - Capped when not in use
61				Compressed gas cylinders - Labeled (Content, hazards)
62				Compressed gas cylinders - Stored upright, adequately secured, and properly segregated. Double-chained to an immovable object to prevent tipping/falling.
63				Fume Hoods are not used for storage; Uncluterred at all times
64				Fume Hoods certified annually by Facilities
65				Moving parts of equipment properly guarded

66				Refrigerators/Freezers - Properly labeled for flammables or non-flammables
67				Safety Information posted on equipment

FIRE AND ELECTRICAL SAFETY				
#	Y	N	N/A	
68				Aisles, exits, adjoining hallways free of obstruction
69				Electrical cords not a trip hazard
70				Electrical panels unobstructed by carts, tables, chairs,
71				Extension cords used for temporary operations only. Unplugged when not in use.
72				Fire doors are unobstructed and easily closed
73				Fire extinguisher fully charged; pin and/or security seal intact
74				Fire extinguisher maintenance tag is current; checked annually and monthly
75				Fire extinguisher properly mounted
76				Flammable Cabinets have self-closing doors
77				Flammable liquids exceeding 10 gallons must be stored inside a flammable cabinet
78				Heating devices (microwaves, coffee makers, toasters, ovens, heaters, refrigerators) cannot be connected to a surge protector. These items must be plugged directly into a wall outlet.
79				Plugs, cords, and receptables are in good condition (no frayed cords; no electrical tape)
80				Power strips are not daisy-chained

HAZARDOUS MATERIALS				
#	Y	N	N/A	
81				Biomedical waste (red bag) properly disposed of
82				Biomedical waste containers have tight fitting lids, with stickers on each side, and bags don't cover the stickers. Nothing is stored on top of the containers.
83				Cabinets and rooms containing campus-regulated carcinogens, biohazards, and radioactive materials labeled?
84				Carcinogens are handled safely to reduce employee exposure
85				Chemicals are inventoried on UC Chemicals
86				Chemicals are labelled to indentify content and hazards
87				Chemicals separated by hazard class and stored to prevent spills (Acids, bases, oxidizers, flammables, etc.)
88				Hazardous material storage shelves have lip or guard
89				Hazardous waste materials disposed of by EH&S - properly tagged/dated/labeled/sealed for disposal
90				Sharps containers appropriately labelled
91				Sharps container's contents not passed the fill line and nothing is stores on top of the containers
92				Waste containers are properly labelled and filled with labeled contents (medical, pharmaceutical, chemotherapy or hazardous waste)

BIOLOGICAL SAFETY CABINETS (BSC)

Building/Room: _____ EH&S Class: _____ Last Certified: _____ UCD #: ___

Building/Room: _____ EH&S Class: _____ Last Certified: _____ UCD #: ___

FUMEHOOD

Building/Room: _____ Velocity: _____ Last Tested: _____

Building/Room: _____ Velocity: _____ Last Tested: _____

REGULATED CARCINOGEN

Type: _____ Quantity: _____

Type: _____ Quantity: _____

COMPRESSED GAS

Type: _____ Quantity: _____

Type: _____ Quantity: _____

FLAMMABLES

Cabinet	Room		
☐	☐	Type: _____	Quantity: _____
☐	☐	Type: _____	Quantity: _____

PERSONAL PROTECTIVE EQUIPMENT (PPE)

Booties	Boots	Bonnet	Earplugs	Face Shields	Gloves	Gowns
Mask	Respirator	Safety Glasses	Splash Goggles	Shoe Covers	Sleeves	Tyvek

Others: _____

COMMENTS

CORRECTIVE ACTION ITEMS

FOLLOW-UP

VMTH Documentation Required

(Personnel trained as well)

Department: _____ Building: _____

Service Supervisor: _____ Room Number: _____

DOCUMENTS:	YES	NO	N/A
Copy of Injury and Illness Prevention Plan (IIPP) with location of the main document stated			
(Job Safety Analysis (JSA), VMTH Injury Reporting Instructions, Visitor Training Records, etc.)			
Copy of the Emergency Action Plan (EAP) with location of the main document stated			
Copy of the Medical Waste Management Plan (MWMP) reflecting annual update			
SVM/VMTH Biowaste Handling and Disposal Training Records			
Chemical Hygiene Plan (CHP) reflecting annual update			
Hazard Communication Plan (HCP) reflecting annual updated			
Safety Data Sheets (SDS)			
Chemical Inventory System (CIS) reflecting annual update			
Certified Unified Program Agency (CUPA) audit reflecting annual update			
Chemical Use Authorization (CUA) audit reflecting annual update			
Copy of the Laboratory Safety Manual			
Service Specific Operating Procedures (SOPs) (Bleach, Accel, chemo, etc.)			
Service Specific SafetyNets (compressed gas, needle/syringe safety, ergonomics, etc.)			
Animal Use Protocols (ACU 101 online training)			
Risk Assessments/Health Surveillance (Online)			
Infectious Disease Control Manuals and Posters (IDC)			
Controlled Substances Log			
Emergency Contact Documentation (Posted)			
SafetyNet #13 (Posted in EVERY ROOM USED and WITH KIT) Document training on Spill Response			
SafetyNet #127 (Posted in EVERY ROOM USED and WITH KIT)			
Laser Use Authorization (LUA)			
Radiological Use Authorization (RUA)			
Hazard Notice on Door to Laboratory (Current information)			
Room Hazard Postings (Carcinogen, Biohazard, Radioactive storage, etc.)			
Biosafety Cabinet Training (Only taken once online through EH&S)			
Fume Hood Safety Training (Only taken once online through EH&S)			
Recognized Chemical Carcinogen Form (Posted Also) (RCC)			
Blood Borne Pathogen Plan (BBPP)			
Aerosol Transmissible Disease Plan (ATD-L)			
Biological Use Authorization (BUA)			
Chemotherapy/Cytotoxic Agents Handling/Disposal Training			
Laboratory Hazard Assessment Tool (LHAT)			
Global Harmonized System Training (GHS)			

V. Accident Investigation

University Policy requires that work-related injuries and illnesses be reported to Workers' Compensation within 24 hours of occurrence and state regulation requires all accidents be investigated. (UC Davis Policy and Procedure Manual 370-20 Risk Management)

1. **VMTH employees** will immediately notify their supervisor when occupationally-related injuries and illnesses occur, or when employees first become aware of such problems.

2. **SVM students (non-Paid)** will immediately report to a supervisor, faculty clinician, course instructor or a service staff member with any instructional lab or class-related injuries or illnesses.

3. **Supervisors** will investigate all accidents, injuries, occupational illnesses, and near-miss incidents to identify the causal factors or attendant hazards. Appropriate repairs or procedural changes will be implemented promptly to mitigate the hazards implicated in these events.

   Employees: The Employee First Reporting (EFR) is a web based application that allows employees to report work-related injury, illness, or exposure.

   To submit and manage new claims, please visit: **https://ehs.ucop.edu/efr**

   - For information on how to submit a claim, please visit: https://ucdavis.app.box.com/s/zbvneap61pxk6978b5tmlfc00boess86

   - For information on how to complete an employer investigation, please visit: https://ucdavis.app.box.com/s/0p2m1gj8mn7onazx680ojyer1cwms7ox

   Students (non-paid): Complete SVM Student Injury/Report Form, and student and/or staffs ***submit forms as follows:***
   - If the injury occurred in the **VMTH (Summer Rotations, or 4th year):**
   - Student Affairs Office in the VMTH
   - Contact: Lauren Issvoran; lgissvoran@ucdavis.edu; 530-752-0773

   - If the injury occurred **elsewhere (1st-3rd year, not on Summer Rotation):**
   - Academic Programs in VMA
   - Contact: Amanda Steidlmayer; arsteidlmayer@ucdavis.edu; 530-754-0132

   VMTH Bite and Scratch Report through PerfectForms are located on the desktops of all SAC and LAC computers. You must submit an EFR or Student Injury Report Form ***in conjunction*** with the Bite and Scratch Report.

4. **Note:** Serious occupational injuries, illnesses, or exposures must be reported to Cal/OSHA by an EH&S representative within eight hours after they have become known to the supervisor. These include injuries/illnesses/exposures that cause permanent disfigurement or require hospitalization for a period in excess of 24 hours. Please refer to VMTH Policy and Procedures in Reporting Work Related Fatalities and Serious Injuries and Illnesses for instructions on reporting.

Resource: EH&S SafetyNet #121

UCDAVIS VETERINARY MEDICINE Veterinary Medical Teaching Hospital	Veterinary Medical Teaching Hospital Policy and Procedure Manual	
	Reporting Work Related Fatalities and Serious Injuries or Illnesses Date 7/21/15 – Reviewed 09/16/21	Policy # Supersedes None

I. **POLICY:** The employer is to report any fatality or any serious injury or illness related to employment to Cal/OSHA immediately (as soon as possible) but no later than eight (8) hours. During working hours Occupational Health will provide notification if the employee is seen there. If the injured employee goes to a hospital then the manager should report the incident directly to EHS.

After-hours the supervisor calls the UC Davis Police Dispatch line who will contact an Environmental Health and Safety (EHS) representative. A representative will call back the reporting supervisor for details.

In each circumstance a manager should be informed immediately.

II. PURPOSE: To ensure compliance with Cal/OSHA reporting requirements.

III. NON-COMPLIANCE: Failure to fulfill all reporting requirements may result in a $5,000 fine being assessed against the VMTH.

IV. DEFINITIONS:

Immediately - as soon as practicably possible but no later than eight (8) hours after the employer knows or with diligent inquiry would have known of the death or serious injury illness or injury.

Serious injury or illness means any injury or illness occurring in a place of employment or in connection with any employment which:

a) requires inpatient hospitalization for a period in excess of 24 hours for other than medical observation or;
b) in which an employee suffers a loss of any member of the body or suffers any serious degree of permanent disfigurement;
c) loss of a member of the body- includes any loss of bone in a finger, including that which is required to treat a wound;

d) does not include any injury or illness or death caused by accident on a public street or highway.

V. PROCEDURES:

During Business Hours – Employee goes to Occupational Health

1. Report incident to manager.
    a. Manager should inform:
        i. SVM/VMTH Safety Officer
        ii. Hospital Administrator
        iii. Human Resources Manager
2. Safety Officer will ensure incident reported to EHS and Cal/OSHA
3. Supervisor should prepare the following information and send to Safety Officer to complete the incident reporting.
   An injury form can be used:
    a. Time/date of accident
    b. Employer's address and contact phone number
    c. Name and job title of person reporting incident
    d. Name of person to contact at site of accident
    e. Name and address of injured employee
    f. Nature of injury
    g. Location where injured employee was moved to
    h. Description of accident
        i. Comment if the accident scene has been altered (for investigatory purposes)

After-Hours – Employee goes to Hospital

1. Report incident to manager.
    a. Manager or supervisor should inform:
        i. SVM/VMTH Safety Officer and
        ii. Hospital Administrator or
        iii. Human Resources Manager
2. Contact UC Davis Police Dispatch at 530.752.1230 *immediately* and inform them to contact EHS regarding serious injury/illness/death

   a. Provide call back number for EHS
3. Report pertinent information to EH&S representative.
   a. Document name and time of call
4. Supervisor should prepare the following information and send to Manager and Safety Officer to complete the incident reporting.
   An injury form can be used:
   a. Time/date of accident
   b. Employer's address and contact phone number
   c. Name and job title of person reporting incident
   d. Name of person to contact at site of accident
   e. Name and address of injured employee
   f. Nature of injury
   g. Location where injured employee was moved to (hospital)
   h. Description of accident
      Comment if the accident scene has been altered (for investigatory purposes)

In the event of a death of the employee Human Resources will inform campus HR/Benefits and Payroll regarding death benefit payments.

VI. **RESPONSIBILITY:** Every supervisor is responsible for reading, understanding, and complying with the terms of this policy.

VII. **HISTORY OF POLICY:** Developed by Human Resources Manager on 7/21/15 and reviewed by management team on 09/16/21. For more information on Injury Reporting, refer to UC Safety Services, SVM Safety Website, and VMTH EAP.

VI. Hazard Correction

Hazards discovered either as a result of a scheduled periodic inspection or during normal operations must be corrected by the supervisor in control of the work area, or by cooperation between the department in control of the work area and the supervisor of the employees working in that area. Supervisors of affected employees are expected to correct unsafe conditions as quickly as possible after discovery of a hazard, based on the severity of the hazard.

Specific procedures that can be used to correct hazards include, but are not limited to, the following:

- Tagging unsafe equipment "Do Not Use Until Repaired," and providing a list of alternatives for employees to use until the equipment is repaired.
- Stopping unsafe work practices and providing retraining on proper procedures before work resumes.
- Reinforcing and explaining the need for proper personal protective equipment and ensuring its availability.
- Barricading areas that have chemical spills or other hazards and reporting the hazardous conditions to appropriate parties.

Supervisors should use the **Hazard Correction Report** to document corrective actions, including projected and actual completion dates.

If an imminent hazard exists, work in the area must cease, and the appropriate supervisor must be contacted immediately. If the hazard cannot be immediately corrected without endangering employees or property, all personnel need to leave the area except those qualified and necessary to correct the condition. These qualified individuals will be equipped with necessary safeguards before addressing the situation.

UCDAVIS | SAFETY SERVICES

Biological and Biohazards Spill Response

SafetyNet #127

A. Summary

This Safety Net outlines the steps to take after a spill of any infectious agent or recombinant DNA material has occurred in your laboratory or in nearby areas such as in a corridor. Although any laboratory that uses hazardous materials is required to have an appropriate spill clean-up kit available and to provide spill clean-up training, responding effectively and safely to a spill requires judgment and risk assessment. If you are not comfortable with the situation or are not confident of your abilities (even if you are thoroughly trained), or if you think that clean-up might entail unacceptably elevated risk, discuss the spill with the Biological Safety Office staff at EH&S before going further. No matter what action you decide to take, moderate to high-hazard spills as noted below must be reported to the Biological Safety Office before you attempt to clean them up, and under NIH and UC Davis rules all spills of all biological materials including spills of Risk Group (RG) 1, RG2, or RG3 agents or any recombinant DNA materials must be reported to the Biological Safety Office (530 752 1493) within 24 hours of the event. You can report the spill by telephone or by usingthe online system.

This SafetyNet constitutes the standard UC Davis biohazardous spill response training document, and includes a risk-related spill response matrix and a spill response instruction summary page intended for laboratory posting. Before posting the matrix and instruction sheets please highlightthe matrix as appropriate to the types of biological agents handled in your laboratory.

B. Spill Risk Assessment

Evaluate the spill to determine the level of risk it represents, so that you can decide whether you or anyone in your group has the training, knowledge, and equipment needed to clean up the spill and to decontaminate all contaminated surfaces so that 100% of the spilled material is removed or inactivated. Your risk assessment should also help you to determine whether an immediate response with absorbent material is necessary to prevent the spill from seeping into places that willbe particularly difficult to clean. Consider:

- Biohazard potential of the spilled material (Risk Group (RG) classification, agent infectious route, agent infectious dose)
- Spill volume
- Spill location
- Extent of visible spatter (cryptic spatter is likely to be even more extensive)
- Additional risks (e.g., does the spill include broken glass?)
- Skill, experience, and health status of trained personnel
- Availability of Personal Protective Equipment (PPE)

1. Moderate to high-hazard spills that must be reported to the Biological Safety Office *before* clean-up but *after* necessary personal decontamination include:

- Any spill >500 ml
- Any spill from a fermentor at Biological Safety Level 1--Large Scale (BSL1--LS) or above
- Any spill in a Biological Safety Level (BSL) 3 laboratory
- Any viable cultured RG2 agent of any volume outside a biological safety cabinet
- Any viable cultured RG2 agent ≥10 ml inside a biological safety cabinet
- Any spill of biological or biohazardous materials or agents in a publicly accessible area such asa corridor
- Spills of a RG2 or RG3 agent or rDNA construct inside a centrifuge that occurred during operation, in an unsealed rotor or carrier
- Spills of a RG2 or RG3 agent inside a refrigerator, especially spills discovered when the door is opened
- Any spill for which no person trained to clean up is currently available

C. Biological Safety Office Telephone Contact Information for Immediate Assistance

SPILL TIME AND LOCATION	TELEPHONE NUMBER TO CALL	REQUEST ASSISTANCE FROM:
Normal business hours		
From the Davis or Sacramento campuses	530 752-1493	Biological Safety Office

SPILL TIME AND LOCATION	TELEPHONE NUMBER TO CALL	REQUEST ASSISTANCE FROM:
After hours and on weekends		
From the Davis Campus	911 dispatch	EH&S 24/7 on-call
From the Sacramento Campus	911 dispatch	EH&S 24/7 on-call

1. Spill kit: a biological or biohazardous spill kit should include the following items:

- Bleach or other approved disinfectant specific to your agents or materials
- Spray bottle
- Appropriate container to dilute disinfectant, if needed
- Gloves (assorted sizes)
- Eye protection/face shield and other appropriate PPE as noted below
- Paper towels (at least one full package)
- Long forceps or egg tongs (or both—egg tongs are better for picking up broken glass, forceps may be better for pushing paper towels into tight corners, and for retrieving disinfectant-soaked paper towels)
- Red biohazard bags or clear autoclave bags, as appropriate for the spilled materials
- Empty, appropriately marked sharps container for disposing broken glass (clear white without biohazard label for RG1 materials, red with a biohazard label for medical waste including human and non-human primate source materials and RG2 and RG3 infectious agents)
- A dust pan and brush for spills of dry RG1 material such as transgenic plants

Store these materials in a container of appropriate size (e.g. Nalgene tub, five-gallon paint bucket) inan easily accessible location, and verify the integrity and completeness of the contents at least twiceper year (ensure that the gloves are not degraded, that the disinfectant is not expired, that the spraybottle, paper towels, sharps container, eye protection, and forceps have not been diverted to other uses, etc). Be sure to label the container and the outside of the storage cabinet prominently.

D. To Clean Up a Biological or Biohazardous Spill

First Priority: Assess yourself and other laboratory occupants for potential personal contamination. If any personal contamination with a RG2 or RG3 agent or contaminated material is found or believed to have occurred:

1. Remove all contaminated clothing, quickly. Place contaminated clothing in a red biohazard/autoclave bag to be autoclaved later. **Do not contaminate public areas with contaminated clothing**. *In anticipation of such emergencies, the PI should provide a fire protection or other blanket that can be used to cover someone who must remove biohazardous spill-contaminated clothing or who must use an emergency shower following achemical splash.*
2. Flood the skin with flowing water for approximately 15 minutes and wash using soap and water. Do not use hot water and do not scrub so vigorously that you abrade the skin.
3. If aerosol formation is believed to have been associated with the incident leave the contaminated area immediately. Post the contaminated area to prevent entry until it is safe.
4. Seek medical attention promptly: contact Occupational Health Services (530 752 6051) and EH&S (530 752 1493). On weekends and after normal work hours call 911.
5. **For eye splashes**, hold the eyes open and irrigate with plenty of water at an eyewash stationfor at least 15 minutes. Seek medical attention promptly: contact Occupational Health Services (530 752 6051) and EH&S (530 752 1493). On weekends and after normal work hours call 911.

Second Priority: Clean up the spill:

1. Wear appropriate PPE to clean spills (as detailed in the response matrix that accompanies this SafetyNet).
2. If the spill involved broken glass, pick up the large pieces with the forceps or egg tongs and dispose in a hard-walled sharps container. Handle broken glass with care!
3. Distribute paper towels around the periphery of the spill, then towards the center. Use the forceps or egg tongs to push paper towels into recesses where spilled material may have flowed.
4. Dilute your disinfectant to the appropriate concentration in a spray bottle (if available).
5. When the spill is fully covered with paper towels, spray or very carefully pour 10% bleach or other approved disinfectant on the paper towels. Avoid generating further aerosols or flooding the spill so much that untreated material may flow
6. **Allow at least 30 minutes contact time.**

7. Pick up the paper towels with large forceps or egg tongs and put them in the appropriate waste bag. Change gloves and put used gloves in bag as well. *Avoid direct contact with the contaminated paper towels, even with gloved hands*
8. Spray or carefully pour 10% bleach or other approved disinfectant on the surface residue. Wipe up the residue with paper towels and place in appropriate bag. Small bits and pieces of broken glass should be entrained in the wet paper towels and discarded into the waste bag. Pieces too large or heavy to entrain must be discarded in a sharps container.
9. Repeat step "8" at least once.
10. Seal and transport the waste collection bag to the appropriate autoclave or medical waste accumulation site.
11. If broken glass was disposed in a sharps container, seal the container permanently, decontaminate the exterior with the sprayed liquid disinfectant, and transport the sealed container to a medical waste accumulation site or request a sharps pickup on the Safety Services website (Davis campus)
12. Clean and disinfect the forceps or egg tongs and any other non disposable items before returning them to the spill kit. If possible, autoclave the forceps or egg tongs before returning them to the kit.
13. Report the spill to your supervisor and to the Biological Safety Office if you have not already done so.

E. Guidelines and Rules to Help Prevent Spills

- Practice manipulations involving biohazardous materials and agents by handling similar volumesof non-hazardous materials with the same tools and containers in the same working environment (e.g., biological safety cabinet) until you are adept and comfortable with the entireprocedure.
- Always transport biohazardous materials outside of a biological safety cabinet in secure secondary containment.
- Always use sealed rotors or carriers to spin biohazardous materials in a centrifuge.
- Always store biohazardous liquids in refrigerators in a manner that prevents spillage if the container is tipped (secondary containment is important).
- Always ensure that the bottom drain is closed before working at a biological safety cabinet.
- Always transport biohazardous materials in publicly accessible areas in secondary leakproof containment, with sufficient absorbent material to absorb the entire liquid contents of the primary container. Label secondary containers with the universal biohazard symbol.

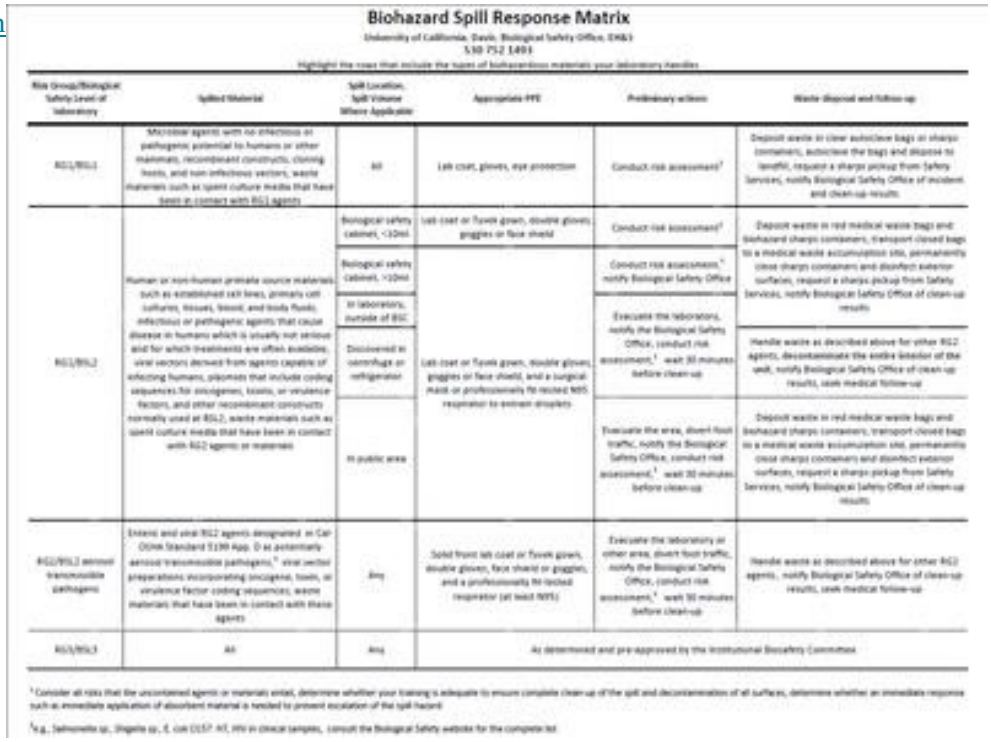
F. Tips to Help Handle Spills

- Study the attached Spill Response Matrix in advance so that you know how to handle location-specific spills.

- Mark the dilution container in the spill kit in advance to show how much disinfectant to add and how much diluent to add in addition, to avoid delays when the time comes to handle a spill.
- Keep a pair of shoes at the lab just for use in the lab. If you routinely change shoes when you arrive at the lab and change back when you leave for the day you won't track everyday contaminants to your automobile or home, and if you need to remove your "lab" shoes becauseof spill contamination you will still have shoes available to leave the lab.
- Conduct periodic hands-on drills with volumes of spilled water similar to fluid volumes in use inthe laboratory to ensure that all laboratory staff members are well-experienced in the location of the spill kit and in spill handling. Practice clean-up in typical and atypical spill situations.

Please use the links to see their full-page versions.

Bioh



Biohazard Spill Response Matrix

University of California, Davis, Biological Safety Office, EH&S
530 752 1493

Highlight the rows that include the types of biohazardous materials your laboratory handles

Risk Group/Biological Safety Level of laboratory	Spilled Material	Spill Location, Spill Volume Where Applicable	Appropriate PPE	Preliminary actions	Waste Disposal and follow-up
RG1/BSL1	Microbial agents with no infectious or pathogenic potential to humans or other mammals, recombinant constructs, cloning hosts, and non-infectious vectors, waste materials such as spent culture media that have been in contact with RG1 agents	All	Lab coat, gloves, eye protection	Conduct risk assessment[2]	Deposit waste in clear autoclave bags or sharps containers, autoclave the bags and dispose to landfill, request a sharps pickup from Safety Services, notify Biological Safety Office of incident and clean-up results
RG1/BSL2	Human or non-human primate source materials such as established cell lines, primary cell cultures, tissues, blood, and body fluids; infectious or pathogenic agents that cause disease in humans which is usually not serious and for which treatments are often available; viral vectors derived from agents capable of infecting humans; plasmids that include coding sequences for oncogenes, toxins, or virulence factors, and other recombinant constructs normally used at BSL2; waste materials such as spent culture media that have been in contact with RG2 agents or materials	Biological safety cabinet, <10ml	Lab coat or Tyvek gown, double gloves, goggles or face shield	Conduct risk assessment[2]	Deposit waste in red medical waste bags and biohazard sharps containers, transport closed bags to a medical waste accumulation site, permanently close sharps containers and disinfect exterior surfaces, request a sharps pickup from Safety Services, notify Biological Safety Office of clean-up results
		Biological safety cabinet, >10ml	Lab coat or Tyvek gown, double gloves, goggles or face shield, and a surgical mask or professionally fit-tested N95 respirator to contain droplets	Conduct risk assessment,[2] notify Biological Safety Office	
		In laboratory, outside of BSC		Evacuate the laboratory, notify the Biological Safety Office, conduct risk assessment,[2] wait 30 minutes before clean-up	Handle waste as described above for other RG2 agents, decontaminate the outer breaker of the vial, notify Biological Safety Office of clean-up results, seek medical follow-up
		Discovered in centrifuge or refrigerator			
		In public area		Evacuate the area, divert foot traffic, notify the Biological Safety Office, conduct risk assessment,[2] wait 30 minutes before clean-up	Deposit waste in red medical waste bags and biohazard sharps containers, transport closed bags to a medical waste accumulation site, permanently close sharps containers and disinfect exterior surfaces, request a sharps pickup from Safety Services, notify Biological Safety Office of clean-up results
RG2/BSL2 aerosol transmissible pathogens	Enteric and viral RG2 agents designated in Cal-OSHA Standard 5199 App. D as potentially aerosol transmissible pathogens,[3] viral vector preparations incorporating oncogene, toxin, or virulence factor coding sequences, waste materials that have been in contact with these agents	Any	Solid front lab coat or Tyvek gown, double gloves, face shield or goggles, and a professionally fit-tested respirator (at least N95)	Evacuate the laboratory or other area, divert foot traffic, notify the Biological Safety Office, conduct risk assessment,[2] wait 30 minutes before clean-up	Handle waste as described above for other RG2 agents, notify Biological Safety Office of clean-up results, seek medical follow-up
RG3/BSL3	All	Any	As determined and pre-approved by the Institutional Biosafety Committee		

[2] Consider all risks that the uncontained agents or materials entail, determine whether your training is adequate to ensure complete clean-up of the spill and decontamination of all surfaces, determine whether an immediate response such as immediate application of absorbent material is needed to prevent escalation of the spill hazard

[3] e.g., Salmonella sp., Shigella sp., E. coli O157: H7, HIV in clinical samples; consult the Biological Safety website for the complete list

Biohazardous Spill Clean-up

1. If this is a moderate to high hazard spill reportable to the Biological Safety Office *before clean-up* (through the EH&S main number 530 752 1493), have you reported it?
2. Have you confirmed that appropriate PPE is available?
3. Have you checked yourself and others nearby the spill for spatter or shoe contamination?
4. Have you alerted the lab personnel and passersby (for spills in corridors) and evacuated the lab if appropriate?
5. Have you located the spill kit and verified that you have everything you need?
6. For spills outside of the biological safety cabinet, have you allowed 30 minutes settling time?
7. Are you trained in biohazardous spill clean-up?

If you answered "yes" to questions 1-7 and it is appropriate for you to clean up the spill, you may proceed as outlined below:

A. Wear appropriate PPE to clean spills.
B. If the spill involved broken glass, pick up the large pieces with the forceps or egg tongs and dispose in a hard-walled sharps container. Handle with care!
C. Distribute paper towels around the periphery of the spill, then towards the center. Use the forceps or egg tongs to push paper towels into recesses where spilled material may have flowed.
D. Dilute your disinfectant to the appropriate concentration in a spray bottle (if available).
E. When the spill is fully covered with paper towels, spray or very carefully pour 10% bleach or other approved disinfectant on the paper towels. Avoid generating further aerosols or flooding the spill so much that untreated material may flow.
F. **Allow at least 30 minutes contact time.**
G. Pick up the paper towels with large forceps or egg tongs and put them in the appropriate waste bag. Change gloves and put used gloves in bag as well. *Avoid direct contact with the contaminated paper towels, even with gloved hands.*
H. Spray or carefully pour 10% bleach or other approved disinfectant on the surface residue. Wipe up the residue with paper towels and place in appropriate bag. Small bits and pieces of broken glass should be entrained in the wet paper towels and discarded into the waste bag. Pieces too large or heavy to entrain must be discarded in a sharps container.
I. Repeat step 'H' at least once.
J. Seal and transport the waste collection bag to the appropriate autoclave or medical waste accumulation site.
K. If broken glass was disposed in a sharps container, seal the container permanently, decontaminate the exterior with the sprayed liquid disinfectant, and transport the sealed container to a medical waste accumulation site or request a sharps pickup on the Safety Services website (Davis campus).
L. Clean and disinfect the forceps or egg tongs and any other non-disposable items before returning them to the spill kit. If possible, autoclave the forceps or egg tongs before returning them to the kit.
M. Report the spill to your supervisor and to the Biological Safety Office.

Biohazardous Spill Clean-Up

Contact

Biological Safety Office
biosafety@ucdavis.edu 530-752-1493
FAX: 530-752-4527

For more information, please visit safetyservices.ucdavis.edu/safetynets

UCDAVIS VETERINARY MEDICINE
Veterinary Medical Teaching Hospital

UCDAVIS | SAFETY SERVICES

Guidelines for Chemical Spill Control

SafetyNet #13 Revised:

2/10/2021

NOTE: If 500 mL (~1 pint) or more of a hazardous material or **any amount** of an extremely hazardous substance is spilled **or when in doubt**, **call the UC Davis Fire Department at 9-1-1**. Evacuate the room,close the door, and wait for emergency personnel.

A. General Steps to Follow

1. If the substance spilled is flammable, turn off all ignition sources before securing the room.
2. In case of chemical contact with skin or eyes, flood the affected area immediately with water; continue for at least 15 minutes. Seek medical assistance at Occupational Health Services located atthe Cowell building or the Student Health and Wellness Center for skin irritation, contact with an extremely toxic substance, any eye injury, or any adverse reaction.
3. All contaminated clothing must be removed immediately. Clothes must be laundered before reuseor disposed of as hazardous waste.
4. Prevent any chemical spill from entering a storm drain. If a spill enters a storm drain, call EH&S immediately 530-752-1493.

B. *Liquid* Spills

When incidental to one's duties, small liquid spills (~500 mL or less) may be cleaned up by laboratory personnel. It is good laboratory practice to keep spill absorbents on hand. A good, general purpose spill absorbent is available from the Central Storehouse (Fisher Scientific, Cat. No.: NC9571649, DRIZORB Absorbent). Spill cleanup kits for solvents, acids, bases (caustics), mercury, hydrofluoric acid, and othersare commercially available from sources such as J.T. Baker and Lab Safety Supply.

1. Put on the appropriate personal protective equipment (PPE) before attempting to clean thespill.
2. Place the appropriate absorbent material around the spill to prevent the spill from spreading. Inmost cases, general purpose inert spill absorbents (DRIZORB (listed above), vermiculite, cat litter, or spill pillows) are sufficient. Do not allow spills to enter a drain.
    i. **Strong Acids:** Most strong acids may be absorbed and then neutralized with aqueous solutions of sodium bicarbonate, calcium hydroxide (slaked lime), or sodium carbonate (soda ash). (Note: DO NOT attempt to absorb hydrofluoric acid (HF). Skip this step and neutralize immediately only if you are familiar with proper neutralization procedures forHF: otherwise, **call the UC Davis Fire Department at 9-1-1**)
    ii. **Caustic Solutions and Flammable Liquids:** Caustic solutions and flammable liquids may be absorbed with an inert absorbent such as vermiculite, cat litter, or spill pillow.

iii. **Cryogenic Liquid:** DO NOT attempt to blot cryogenic liquid spills with unprotected hands. Evacuate the space and allow the liquid to evaporate. If the cryogenic fluid evaporates toa flammable, toxic or asphyxiating gas, turn off all ignition sources, secure the room, evacuate, and call 9-1-1.

iv. **Formaldehyde:** Formaldehyde spills may be absorbed with an inert absorbent (DRIZORB(listed above), vermiculite, cat litter, or spill pillow).

v. **Mercury:** For mercury spills, see SafetyNet #16, "Guidelines for Mercury Spill Control", for more information.

3. Cover the spill with the absorbent, starting from the outer edges and working towards thecenter until the spill is completed covered. Allow the absorbent to soak up the spill.
4. Use a broom and dust pan to collect the absorbed spill material. If any broken glass is present,use tongs or broom and dust pan to collect. Dispose of broken glassware in the sharps container.
5. Place absorbed spill material in double plastic bags or plastic containers with secure lids and dispose of as hazardous waste. See SafetyNet #8, "Guidelines for Disposal of Chemical Waste" for more information. If the absorbent has been used for a flammable or volatile compound, itmust be stored in a well-ventilated area away from sources of ignition while awaiting pickup. Afume hood is a good temporary storage area.
6. Decontaminate the spill area with the appropriate neutralizer or solution.

C. *Solid* spills

Solid spills are not usually emergencies. If the material spilled is toxic, use dampened cloths or papertowels to transfer it to plastic bags. Brushing dry material may cause dust to become airborne.

Contact

Research Safety
researchsafety@ucdavis.edu530-
752-1493
FAX: 530-752-4527

For more information, please visit safetyservices.ucdavis.edu/safetynets

VII. Health and Safety Training

Health and safety training, covering both general work practices and job-specific hazard training is the responsibility of the Principal Investigator and immediate Supervisor(s) as applicable to the following criteria:

1. Supervisors are provided with training to become familiar with the safety and health hazards to which employees under their immediate direction and control may be exposed.

2. All new employees receive training prior to engaging in responsibilities that pose potential hazard(s). Here is a list of minimal training requirements for all new employees:

    - Learning Management System (LMS): For LMS, supervisors email sdps@ucdavis.edu and request to add the employee under a specific supervisor and list the courses needed.
        - Animal Care and Use 101
        - Hazard Communications
        - Heat Illness Prevention
        - UC Davis Hazard Communications Addendum
        - VMTH Back Safety
        - VMTH BioWaste Handling and Disposal
        - VMTH Chemical Safety and Spill Control
        - VMTH Compressed Gas Cylinder
        - VMTH Discharge and Pick-up Procedures for Deceased Pets
        - VMTH Fire Extinguisher
        - VMTH General Safety
        - VMTH IIPP and EAP (Combined course)
        - VMTH Large Animal Carcass Delivery to Anatomic Pathology
        - VMTH Sharps Safety
        - VMTH Small Animal Carcass Delivery to Anatomic Pathology

    ★ Additional service specific area training will be the responsibility of the supervisors. ★

3. All employees given new job assignments receive training on the hazards of their new responsibilities prior to actually assuming those responsibilities.

4. Training is provided whenever new substances, processes, procedures or equipment (which represent a new hazard) are introduced to the workplace. Standard Operating Procedures (SOP's) should be available to all employees either through a handout or on InfoShare.

5. Volunteers and Visitors of the VMTH must follow UC Davis Policy and Procedure Guidelines (UCD PPM 380-08). For more information, please see supplemental documents on VIPER or visit the VMTH Directors Office.

Guidelines for Safe Work Practices

1. Report all unsafe conditions and accidents to supervisors or the safety coordinator

2. All used needles, glass slides, catheter stylets, pipettes, scalpel blades, etc. must be disposed of in the sharps container.

3. Avoid recapping used needles, and after use, place them directly in to a sharps container whenever possible.

4. Clean up fecal material, urine, and other things on the floors that may cause slipping and falling as soon as possible.

5. Avoid carrying items that obscure your view when walking up or down the stairs.

6. Clean up all spills immediately. Refer to MSDS sheets when appropriate.

7. Look at the elevator floor and adjacent hallway floor before entering or exiting the elevator to avoid tripping.

8. Avoid any behavior that will tend to have an adverse influence on the safety of employees.

9. No one shall knowingly be permitted to work if their alertness is impaired by fatigue, illness or other causes that might expose the employee or others to injury.

10. Safety devices on equipment shall not be deactivated or removed.

11. Only authorized, trained employees shall operate potentially dangerous equipment such as the forklift, tractors, autoclaves, surgery tables, etc.

12. When lifting heavy objects, use the large muscles of the leg instead of the smaller back muscles. Don't hesitate to request assistance if necessary.

13. All tools and equipment must be kept in good working order. Damaged tools or equipment shall be tagged "defective", and shall not be used.

14. Electrical cords shall be protected from animals, water, and heavy traffic.

15. No smoking is allowed in the buildings or adjacent to the barns or haystacks.

16. Do not handle or restrain animals if you are not trained to do so or if you feel uncomfortable with a particular animal.

17. Radiograph badges are to be worn whenever you are involved in taking radiographs.

18. No one under the 18 years of age may be involved in taking radiographs.

19. Gloves are to be worn when: handling infectious material, handling tissue specimens, bathing or treating animals with insecticides or other toxic substances; administering Brucella vaccine.

Interim Workplace Guidelines

Applicable to COVID-19 and other Pandemic type illnesses
California approved emergency temporary Cal/OSHA standards on COVID-19 infection prevention on November 30, 2020 (8CCR 3205). These new temporary standards require employers to establish, implement, and maintain an effective written COVID-19 Prevention Program (CPP). Additionally, employers are required to provide effective training and instruction to employees on how COVID-19 is spread, infection prevention techniques, and information regarding COVID-19-related benefits that affected employees may be entitled to under applicable federal, state, or local laws.

More information can be found on the CalOSHA website: Cal/OSHA Interim Guidelines on Protecting Workers from COVID-19

In compliance with the new temporary standards, UC Davis has provided the following resources that should act as addendums to departmental Injury and Illness Prevention Programs:

1. UC Davis Campus Ready Plan: https://campusready.ucdavis.edu/
2. COVID-19 Prevention Plan: https://campusready.ucdavis.edu/cpp
3. UC Davis PPM, Interim 290-01, Public Health Policy: https://ucdavispolicy.ellucid.com/documents/view/1587/active

Mandated training compliance is achieved via:
1. "Return to Campus" e-learning course: https://campusready.ucdavis.edu/training
2. Documented annual review of departmental Injury and Illness Prevention Programs and the contents of this addendum.

Please contact Safety Services with any questions or for additional information at 530-752-1493 or safetyservices.ucdavis.edu

Additional Campus Resources:
- Centrally Funded Supplies
- Reporting COVID-19
- Download Worksite Signs
- Remote Work Resources

UC Davis Safety Services also provides COVID-19 related resources and information pertaining to campus.

The School of Veterinary Medicine has developed a COVID-19 SOP to help labs adjust their staffing and research hours, develop guidelines for cleaning and physical distancing and lastly contact tracing. Each department has also established a worksite plan. Both the SOP and Departmental worksite plan are available upon request from your respective department.

In addition, SVM also has developed a LMS training designed to enable UC Davis research to resume as soon as possible while maintaining adherence to public health guidance and maintaining appropriate hazard mitigation strategies: SVM Resumption of Research .

The VMTH has developed a worksite plan (available upon request) and a LMS training designed to address objectives for interacting with clients safely, in both small and large animal patient care and meeting requirements determined by Yolo County and California Department of Public Health as we return to work: VMTH Worksite Plan (COVID-19 Safety Training).

SafetyNets Masterlist

SafetyNet	Title
SafetyNet # 1	EPA's Refrigerant Recycling Rule
SafetyNet # 2	Oxyacetylene Safety Update
SafetyNet # 3	Sharps Safety Guidelines
SafetyNet # 5	Eye and Face Safety Protection for Laboratory Workers
SafetyNet # 6	Drain Disposal Guidelines
SafetyNet # 8	Chemical Waste Disposal Guidelines
SafetyNet # 9	Radioactive Waste Disposal Guidelines
SafetyNet # 10	Limiting Exposure to Radiation Guidelines
SafetyNet # 12	Why Didn't the Custodian Pick Up My Trash?
SafetyNet # 13	Guidelines for Chemical Spill Control
SafetyNet # 14	Safe Use of Nitric Acid
SafetyNet # 16	Guidelines for Mercury Spill Control
SafetyNet # 17	Personal Computer Workstation Checklist
SafetyNet # 18	Safe Use of Perchloric Acid
SafetyNet # 21	Minimizing Aerosol Exposure
SafetyNet # 22	Safe Use of Phenol
SafetyNet # 23	Peroxide Formation in Chemicals
SafetyNet # 24	Hydrogen Sulfide
SafetyNet # 26	Effective Use of Autoclaves
SafetyNet # 27	Controlling Laboratory Ergonomic Risk Factors
SafetyNet # 29	Back Belts
SafetyNet # 30	Building Temperature Extremes
SafetyNet # 31	Use of Refrigerators and Freezers in Laboratories
SafetyNet # 33	Hazardous Materials Information and Training
SafetyNet # 34	Managing Chemical Waste Streams To Reduce Disposal Cost
SafetyNet # 35	How to Use a Chemical Fume Hood Safely
SafetyNet # 36	Bloodborne Pathogen Standard
SafetyNet # 37	Radioactive Spills, Splashes, and Decontamination
SafetyNet # 38	Guidelines for Pesticide Retention and Disposal
SafetyNet # 39	Safety Training Tips
SafetyNet # 41	What You Should Know to Protect Your Wrists and Hands from Repetitive Motion Injury
SafetyNet # 42	General Guidelines for Storage and Management of Laboratory Chemicals
SafetyNet # 43	Identification and Segregation of Chemical Waste
SafetyNet # 44	Alternatives to Chromic/Sulfuric Acid for Cleaning Laboratory Glassware
SafetyNet # 45	Glossary of SDS Terms
SafetyNet # 46	Lifting
SafetyNet # 48	Photographic Chemicals
SafetyNet # 49	Pesticide Storage
SafetyNet # 50	Guidelines for the Selection of Chemical-Resistant Gloves

SafetyNet	Title
SafetyNet # 51	Selecting Chemical Disinfectants
SafetyNet # 52	Emergency Medical Care
SafetyNet # 53	Ethidium Bromide Solutions Detoxification
SafetyNet # 54	Pregnancy and the University Workplace
SafetyNet # 56	How to Monitor Your Lab for Radioactive Contamination
SafetyNet # 58	Safety Precautions for Cryogenic Liquids
SafetyNet # 60	Compressed Gas Safety
SafetyNet # 61	How to Maintain an Inventory for Radioactive Materials in Your Laboratory
SafetyNet # 63	Ozone Emissions
SafetyNet # 64	Guidelines for Evaluating Safety Performance
SafetyNet # 66	Emergency Eyewash and Shower Testing and Use
SafetyNet # 67	Dosimetry: Personnel Monitoring for Radiation Workers
SafetyNet # 68	Use of Chlorine Compounds as Disinfectants
SafetyNet # 70	Safe Use of Hydrofluoric Acid
SafetyNet # 71	Radiation and Human Health
SafetyNet # 72	Chemical Substitutes
SafetyNet # 73	Laser Protective Eyewear
SafetyNet # 74	The Principal Investigator's Laser Safety Training Responsibilities
SafetyNet # 75	Laser Warning Signs and Labeling
SafetyNet # 76	Safe Laser Practices
SafetyNet # 77	Standard Operating Procedures for Lasers or Laser Systems
SafetyNet # 78	Radiation Safety Requirement for Persons Using Radiation-Producing Machines
SafetyNet # 83	Non-Structural Seismic Safety
SafetyNet # 84	Asbestos
SafetyNet # 85	Antimicrobials are Pesticides
SafetyNet # 88	The Respiratory Protection Program
SafetyNet # 96	Keyboard and Mouse Use
SafetyNet # 99	Indoor Air Quality
SafetyNet # 100	Electric and Magnetic Fields (EMF)
SafetyNet # 103	Min/Max Thermometer Information Sheet
SafetyNet # 104	Safe Use and Management of Picric Acid
SafetyNet # 106	Hazards of Ultraviolet Radiation
SafetyNet # 107	Pregnancy and Reproductive Hazards in the Workplace: Physical and Biological Hazards
SafetyNet # 108	Pregnancy and Reproductive Hazards in the Workplace: Chemical and Radiological Hazards
SafetyNet # 109	Power Outages
SafetyNet # 110	Guidelines for Completing the Chemical Waste Label
SafetyNet # 111	Required Postings

SafetyNet	Title
SafetyNet # 112	Hearing Conservation
SafetyNet # 113	Release of Equipment
SafetyNet # 114	Confined Space Program
SafetyNet # 115	Machine Guarding
SafetyNet # 116	Principal Investigator's Training Responsibilities For Animal Care and Use
SafetyNet # 118	Laboratory Security Tips for Hazardous Materials Users
SafetyNet # 119	Use of Non-EPA Regulated Scintillation Cocktails
SafetyNet # 120	Preparing for a CUPA Inspection
SafetyNet # 121	Reporting Work-related Fatalities and Serious Injuries or Illnesses
SafetyNet # 122	Proper Disposal of Universal and Electronic Wastes
SafetyNet # 123	Heat Illness Prevention
SafetyNet # 124	Empty Container Management
SafetyNet # 125	Safety Management Program Guidelines for Department Safety Coordinators (DSCs)
SafetyNet # 126	Guidelines for Export Compliance
SafetyNet # 127	Biological and Biohazardous Spill Response
SafetyNet # 128	Solvent Stills
SafetyNet # 129	Safety Management Program Guidelines for Department Chairs
SafetyNet # 130	Safety Management Program Guidelines for Supervisors
SafetyNet # 131	Safety Program Guidelines for Principal Investigators
SafetyNet # 132	Nanotechnology: Guidelines for Safe Research Practices
SafetyNet # 133	Fall Protection
SafetyNet # 134	Forklift Certification and Safety
SafetyNet # 135	Procedures for Safe Use of Pyrophoric/Water Reactive Reagents
SafetyNet # 136	Excavation/Trenching/Shoring
SafetyNet # 137	Guidelines for Arc and Flash Lamp Safety
SafetyNet # 138	Portable Torch Safety
SafetyNet # 139	Guidelines for Handling Formaldehyde
SafetyNet # 140	Guidelines for Handling Dichloromethane (Methylene Chloride)
SafetyNet # 141	Crane and Hoist Safety
SafetyNet # 142	Guidance for Complying With the Chemical Facility Anti-Terrorism Standard (CFATS)
SafetyNet # 143	Cal/OSHA Inspections
SafetyNet # 144	Laser Pointer Safety
SafetyNet # 145	Safe Operation of Livestock Squeeze Chute Functions
SafetyNet # 146	Microtome Use Hazards and Precautions
SafetyNet # 147	Safe Handling of Wooden Pallets
SafetyNet # 148	Office Safety and Training

VII. Recordkeeping and Documentation

Documents related to the IIPP – VMTH are maintained in the **Service Supervisor's** offices:

Building: VMTH, VM2, VM3A, CCAH, VMSSAC, GOURLEY **Room: Service Offices**

The following documents will be maintained within the department's **IIPP Binder** for at least the length of time indicated below:

1. Hazard Alert/Correction Forms
   Retain for three (3) years.

2. Employee Job Safety Analysis forms
   Retain for the duration of each individual's employment.

3. Worksite Inspection Forms
   Retain for three (3) years.

4. Accident/Incident Reports/Investigation Forms
   Retain for three (3) years.

5. Chemical Hygiene Plan/Hazard Communications
   Retain and updated annually.

The following documents will be maintained within the department's **IIPP Training Records Binder-Supervisors Copy** for at least the length of time indicated below:

1. Employee Safety Training Attendance Records
   Retain for three (3) years.

2. Employee Annual Safety Review
   Retain for duration of employment plus three (3) years

IX. Resources

1. UCOP: Environment, Health, and Safety
    - Risk Services - EH&S

2. California Code of Regulations Title 8, Section 3203, (8CCR §3203), Injury and Illness Prevention Program

3. UCOP Academic Personnel Policy
    - APM 016 - University Policy on Faculty Conduct and Administration Discipline
    - APM 150 - University Policy on Academic Appointees

4. Occupational Health Surveillance System (OHSS)
    - Risk Assessment
    - Medical Assessment
    - Health Questionaire

5. UC Davis Personnel Policies for Staff Members, Corrective Action, UCD Procedure 62

6. UC Davis Policy and Procedure Manual, Section 290-15, Safety Management Program

7. UC Davis Safety Services
    - SafetyNets
    - Safety Data Sheets

8. UC Davis Institutional Animal Care and Use Committee (IACUC)

9. UC Davis Respiratory Protection Program

10. UC Davis EH&S Safety Manuals/Plans/Forms:
    - Biosafety Manual
    - Bloodborne Pathogen Exposure Control Plan
    - Heat Illness Prevention Manual
    - Laboratory Safety Manual
    - Laser Safety
    - Radiation Safety Manual
    - Respiratory Protection

11. Learning Management System (LMS)

12. SVM Safety Site on VIPER – VMTH Resources