Appendix
Title 29 Code of Federal Regulations, Parts 1900-1926 - OSHA
1910.1450 Occupational Exposure to Hazardous Chemicals in Laboratories.

1.677 § 1910.1450 Occupational exposure to hazardous chemicals in laboratories.
* (Section 1910.1450 was added by 55 FR 3327, Jan. 31, 1990)

(a) Scope and application.
(1) This section shall apply to all employers engaged in the laboratory
use of hazardous chemicals as defined below.
(2) Where this section applies, it shall supersede, for laboratories, the
requirements of all other OSHA health standards in 29 CFR part 1910,
subpart Z, except as follows:
(i) For any OSHA health standard, only the requirement to limit employee
exposure to the specific permissible exposure limit shall apply for
laboratories, unless that particular standard states otherwise or unless
the conditions of paragraph (a)(2)(iii) of this section apply.
(ii) Prohibition of eye and skin contact where specified by any OSHA
health standard shall be observed.
(iii) Where the action level (or in the absence of an action level, the
permissible exposure limit) is routinely exceeded for an OSHA regulated
substance with exposure monitoring and medical surveillance requirements
paragraphs (d) and (g)(1)(ii) of this section shall apply.
(3) This section shall not apply to:
(i) Uses of hazardous chemicals which do not meet the definition of
laboratory use, and in such cases, the employer shall comply with the
relevant standard in 29 CFR part 1910, subpart Z, even if such use occurs
in a laboratory.
(ii) Laboratory uses of hazardous chemicals which provide no potential for
employee exposure. Examples of such conditions might include:
(A) Procedures using chemically-impregnated test media such as
Dip-and-Read tests where a reagent strip is dipped into the specimen to be
tested and the results are interpreted by comparing the color reaction to
a color chart supplied by the manufacturer of the test strip; and
(B) Commercially prepared kits such as those used in performing pregnancy
tests in which all of the reagents needed to conduct the test are
contained in the kit.

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(b) Definitions -
"Action level" means a concentration designated in 29 CFR part 1910 for a
specific substance, calculated as an eight (8)-hour time-weighted average,
which initiates certain required activities such as exposure monitoring
and medical surveillance.
"Assistant Secretary" means the Assistant Secretary of Labor for
Occupational Safety and Health, U.S. Department of Labor, or designee.
"Carcinogen" (see "select carcinogen").
"Chemical Hygiene Officer" means an employee who is designated by the
employer, and who is qualified by training or experience, to provide
technical guidance in the development and implementation of the provisions of the Chemical Hygiene Plan. This definition is not intended to place limitations on the position description or job classification that the designated individual shall hold within the employer's organizational structure.

"Chemical Hygiene Plan" means a written program developed and implemented by the employer which sets forth procedures, equipment, personal protective equipment and work practices that (i) are capable of protecting employees from the health hazards presented by hazardous chemicals used in that particular workplace and (ii) meets the requirements of paragraph (e) of this section.

"Combustible liquid" means any liquid having a flashpoint at or above 100 deg. F (37.8 deg. C), but below 200 deg. F (93.3 deg. C), except any mixture having components with flashpoints of 200 deg. F (93.3 deg. C), or higher, the total volume of which make up 99 percent or more of the total volume of the mixture.

"Compressed gas" means:
(i) A gas or mixture of gases having, in a container, an absolute pressure exceeding 40 psi at 70 deg. F (21.1 deg. C); or
(ii) A gas or mixture of gases having, in a container, an absolute pressure exceeding 104 psi at 130 deg. F (54.4 deg C) regardless of the pressure at 70 deg. F (21.1 deg. C); or
(iii) A liquid having a vapor pressure exceeding 40 psi at 100 deg. F (37.8 C) as determined by ASTM D-323-72.

"Designated area" means an area which may be used for work with "select carcinogens," reproductive toxins or substances which have a high degree of acute toxicity. A designated area may be the entire laboratory, such as a laboratory hood.

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"Emergency" means any occurrence such as, but not limited to, equipment failure, rupture of containers or failure of control equipment which results in an uncontrolled release of a hazardous chemical into the workplace.

"Employee" means an individual employed in a laboratory workplace who may be exposed to hazardous chemicals in the course of his or her assignments.

"Explosive" means a chemical that causes a sudden, almost instantaneous release of pressure, gas, and heat when subjected to sudden shock, pressure, or high temperature.

"Flammable" means a chemical that falls into one of the following categories:
(i) "Aerosol, flammable" means an aerosol that, when tested by the method described in 16 CFR 1500.45, yields a flame protection exceeding 18 inches at full valve opening, or a flashback (a flame extending back to the valve) at any degree of valve opening;
(ii) "Gas, flammable" means:
(A) A gas that, at ambient temperature and pressure, forms a flammable mixture with air at a concentration of 13 percent by volume or less; or
(B) A gas that, at ambient temperature and pressure, forms a range of flammable mixtures with air wider than 12 percent by volume, regardless of the lower limit.

(iii) "Liquid, flammable" means any liquid having a flashpoint below 100 deg F (37.8 deg. C), except any mixture having components with flashpoints of 100 deg. C) or higher, the total of which make up 99 percent or more of the total volume of the mixture.

(iv) "Solid, flammable" means a solid, other than a blasting agent or explosive as defined in 1910.109(a), that is liable to cause fire through friction, absorption of moisture, spontaneous chemical change, or retained heat from manufacturing or processing, or which can be ignited readily and when ignited burns so vigorously and persistently as to create a serious hazard. A chemical shall be considered to be a flammable solid if, when tested by the method described in 16 CFR 1500.44, it ignites and burns with a self-sustained flame at a rate greater than one-tenth of an inch per second along its major axis.

"Flashpoint" means the minimum temperature at which a liquid gives off a vapor in sufficient concentration to ignite when tested as follows:

(i) Tagliabue Closed Tester (See American National Standard Method of Test for Flash Point by Tag Closed Tester, Z11.24 - 1979 (ASTM D 56-79)) - for liquids with a viscosity of less than 45 Saybolt Universal Seconds (SUS) at 100 deg. F (37.8 deg. C), that do not contain suspended solids and do not have a tendency to form a surface film under test; or

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(ii) Pensky-Martens Closed Tester (See American National Standard Method of Test for Flashpoint by Pensky-Martens Closed Tester, Z11.7 - 1979 (ASTM D 93-79)) - for liquids with a viscosity equal to or greater than 45 SUS at 100 deg. F (37.8 deg. C.), or that contain suspended solids, or that have a tendency to form a surface film under test; or

(iii) Setaflash Closed Tester (see American National Standard Method of test for Flash Point by Setaflash Closed Tester (ASTM D 3278-78)).

Organic peroxides, which undergo autoaccelerating thermal decomposition, are excluded from any of the flashpoint determination methods specified above.

"Hazardous chemical" means a chemical for which there is statistically significant evidence based on at least one study conducted in accordance with established scientific principles that acute or chronic health effects may occur in exposed employees. The term "health hazard" includes chemicals which are carcinogens, toxic or highly toxic agents, reproductive toxins, irritants, corrosives, sensitizers, hepatotoxins, nephrotoxins, neurotoxins, agents which act on the hematopoietic systems, and agents which damage the lungs, skin, eyes, or mucous membranes. Appendices A and B of the Hazard Communication Standard (29 CFR 1910.1200) provide further guidance in defining the scope of health hazards and
determining whether or not a chemical is to be considered hazardous for purposes of this standard.
"Laboratory" means a facility where the "laboratory use of hazardous chemicals" occurs. It is a workplace where relatively small quantities of hazardous chemicals are used on a non-production basis. "Laboratory scale" means work with substances in which the containers used for reactions, transfers, and other handling of substances are designed to be easily and safety manipulated by one person. "Laboratory scale" excludes those workplaces whose function is to produce commercial quantities of materials. "Laboratory-type hood" means a device located in a laboratory, enclosure on five sides with a movable sash or fixed partial enclosed on the remaining side; constructed and maintained to draw air from the laboratory and to prevent or minimize the escape of air contaminants into the laboratory; and allows chemical manipulations to be conducted in the enclosure without insertion of any portion of the employee's body other than hands and arms. Walk-in hoods with adjustable sashes meet the above definition provided that the sashes are adjusted during use so that the airflow and the exhaust of air contaminants are not compromised and employees do not work inside the enclosure during the release of airborne hazardous chemicals. "Laboratory use of hazardous chemicals" means handling or use of such chemicals in which all of the following conditions are met:
(i) Chemical manipulations are carried out on a "laboratory scale;"
(ii) Multiple chemical procedures or chemicals are used;
(iii) The procedures involved are not part of a production process, nor in any way simulate a production process; and
(iv) "Protective laboratory practices and equipment" are available and in common use to minimize the potential for employee exposure to hazardous chemicals. "Medical consultation" means a consultation which takes place between an employee and a licensed physician for the purpose of determining what medical examinations or procedures, if any, are appropriate in cases where a significant exposure to a hazardous chemical may have taken place. "Organic peroxide" means an organic compound that contains the bivalent -O-O- structure and which may be considered to be a structural derivative of hydrogen peroxide where one or both of the hydrogen atoms has been replaced by an organic radical. "Oxidizer" means a chemical other than a blasting agent or explosive as defined in 1910.109(a), that initiates or promotes combustion in other materials, thereby causing fire either of itself or through the release of oxygen or other gases. "Physical hazard" means a chemical for which there is scientifically valid evidence that it is a combustible liquid, a compressed gas, explosive, flammable, an organic peroxide, an oxidizer pyrophoric, unstable
"Protective laboratory practices and equipment" means those laboratory procedures, practices and equipment accepted by laboratory health and safety experts as effective, or that the employer can show to be effective, in minimizing the potential for employee exposure to hazardous chemicals.

"Reproductive toxins" means chemicals which affect the reproductive chemicals which affect the reproductive capabilities including chromosomal damage (mutations) and effects on fetuses (teratogenesis).

"Select carcinogen" means any substance which meets one of the following criteria:

(i) It is regulated by OSHA as a carcinogen; or
(ii) It is listed under the category, "known to be carcinogens," in the Annual Report on Carcinogens published by the National Toxicology Program (NTP)(latest edition); or
(iii) It is listed under Group 1 ("carcinogenic to humans") by the International Agency for research on Cancer Monographs (IARC)(latest editions); or
(iv) It is listed in either Group 2A or 2B by IARC or under the category, "reasonably anticipated to be carcinogens" by NTP, and causes statistically significant tumor incidence in experimental animals in accordance with any of the following criteria:

(A) After inhalation exposure of 6 - 7 hours per day, 5 days per week, for a significant portion of a lifetime to dosages of less than 10 mg/m(3);
(B) After repeated skin application of less than 300 (mg/kg of body weight) per week; or
(C) After oral dosages of less than 50 mg/kg of body weight per day.

"Unstable (reactive)" means a chemical which is the pure state, or as produced or transported, will vigorously polymerize, decompose, condense, or will become self-reactive under conditions of shocks, pressure or temperature.

"Water-reactive" means a chemical that reacts with water to release a gas that is either flammable or presents a health hazard.

(c) Permissible exposure limits. For laboratory uses of OSHA regulated substances, the employer shall assure that laboratory employees' exposures to such substances do not exceed the permissible exposure limits specified.

(d) Employee exposure determination

(1) Initial monitoring. The employer shall measure the employee's exposure to any substance regulated by a standard which requires monitoring if there is reason to believe that exposure levels for that substance routinely exceed the action level (or in the absence of an action level, the PEL).

(2) Periodic monitoring. If the initial monitoring prescribed by paragraph (d)(1) of this section discloses employee exposure over the action level (or in the absence of an action level, the PEL), the employer shall
immediately comply with the exposure monitoring provisions of the relevant standard.

(3) Termination of monitoring. Monitoring may be terminated in accordance with the relevant standard.

(4) Employee notification of monitoring results. The employer shall, within 15 working days after the receipt of any monitoring results, notify the employee of these results in writing either individually or by posting results in an appropriate location that is accessible to employees.

(e) Chemical hygiene plan - General. (Appendix A of this section is non-mandatory but provides guidance to assist employers in the development of the Chemical Hygiene Plan.)

(1) Where hazardous chemicals as defined by this standard are used in the workplace, the employer shall develop and carry out the provisions of a written Chemical Hygiene Plan which is:

(i) Capable of protecting employees from health hazards associated with hazardous chemicals in that laboratory and

(ii) Capable of keeping exposures below the limits specified in paragraph (c) of this section.

(2) The Chemical Hygiene Plan shall be readily available to employees, employee representatives and, upon request, to the Assistant Secretary.

(3) The Chemical Hygiene Plan shall include each of the following elements and shall indicate specific measures that the employer will take to ensure laboratory employee protection;

(i) Standard operating procedures relevant to safety and health considerations to be followed when laboratory work involves the use of hazardous chemicals;

(ii) Criteria that the employer will use to determine and implement control measures to reduce employee exposure to hazardous chemicals including engineering controls, the use of personal protective equipment and hygiene practices; particular attention shall be given to the selection of control measures for chemicals that are known to be extremely hazardous;

(iii) A requirement that fume hoods and other protective equipment are functioning properly and specific measures that shall be taken to ensure proper and adequate performance of such equipment;

(iv) Provisions for employee information and training as prescribed in paragraph (f) of this section;

(v) The circumstances under which a particular laboratory operation, procedure or activity shall require prior approval from the employer or the employer's designee before implementation;

(vi) Provisions for medical consultation and medical examinations in accordance with paragraph (g) of this section;

(vii) Designation of personnel responsible for implementation of the Chemical Hygiene Plan including the assignment of a Chemical Hygiene Officer, and, if appropriate, establishment of a Chemical Hygiene
Committee; and
(viii) Provisions for additional employee protection for work with particularly hazardous substances. These include "select carcinogens," reproductive toxins and substances which have a high degree of acute toxicity. Specific consideration shall be given to the following provisions which shall be included where appropriate:
(A) Establishment of a designated area;
(B) Use of containment devices such as fume hoods or glove boxes;
(C) Procedures for safe removal of contaminated waste; and
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(D) Decontamination procedures.
(4) The employer shall review and evaluate the effectiveness of the Chemical Hygiene Plan at least annually and update it as necessary.
(f) Employee information and training.
(1) The employer shall provide employees with information and training to ensure that they are apprised of the hazards of chemicals present in their work area.
(2) Such information shall be provided at the time of an employee's initial assignment to a work area where hazardous chemicals are present and prior to assignments involving new exposure situations. The frequency of refresher information and training shall be determined by the employer.
(3) Information. Employees shall be informed of:
(i) The contents of this standard and its appendices which shall be made available to employees;
(ii) the location and availability of the employer's Chemical Hygiene Plan;
(iii) The permissible exposure limits for OSHA regulated substances or recommended exposure limits for other hazardous chemicals where there is no applicable OSHA standard;
(iv) Signs and symptoms associated with exposures to hazardous chemicals used in the laboratory; and
(v) The location and availability of known reference material on the hazards, safe handling, storage and disposal of hazardous chemicals found in the laboratory including, but not limited to, Material Safety Data Sheets received from the chemical supplier.
(4) Training.
(i) Employee training shall include:
(A) Methods and observations that may be used to detect the presence or release of a hazardous chemical (such as monitoring conducted by the employer, continuous monitoring devices, visual appearance or odor of hazardous chemicals when being released, etc.);
(B) The physical and health hazards of chemicals in the work area; and
(C) The measures employees can take to protect themselves from these hazards, including specific procedures the employer has implemented to protect employees from exposure to hazardous chemicals, such as appropriate work practices, emergency procedures, and personal protective
equipment to be used.
(ii) The employee shall be trained on the applicable details of the employer's written Chemical Hygiene Plan.

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(g) Medical consultation and medical examinations.
(1) The employer shall provide all employees who work with hazardous chemicals an opportunity to receive medical attention, including any follow-up examinations which the examining physician determines to be necessary, under the following circumstances:
(i) Whenever an employee develops signs or symptoms associated with a hazardous chemical to which the employee may have been exposed in the laboratory, the employee shall be provided an opportunity to receive an appropriate medical examination.
(ii) Where exposure monitoring reveals an exposure level routinely above the action level (or in the absence of an action level, the PEL) for an OSHA regulated substance for which there are exposure monitoring and medical surveillance requirements, medical surveillance shall be established for the affected employee as prescribed by the particular standard.
(iii) Whenever an event takes place in the work area such as a spill, leak, explosion or other occurrence resulting in the likelihood of a hazardous exposure, the affected employee shall be provided an opportunity for a medical consultation. Such consultation shall be for the purpose of determining the need for a medical examination.
(2) All medical examinations and consultations shall be performed by or under the direct supervision of a licensed physician and shall be provided without cost to the employee, without loss of pay and at a reasonable time and place.
(3) Information provided to the physician. The employer shall provide the following information to the physician:
(i) The identity of the hazardous chemical(s) to which the employee may have been exposed;
(ii) A description of the conditions under which the exposure occurred including quantitative exposure data, if available; and
(iii) A description of the signs and symptoms of exposure that the employee is experiencing, if any.
(4) Physician's written opinion.
(i) For examination or consultation required under this standard, the employer shall obtain a written opinion from the examining physician which shall include the following:
(A) Any recommendation for further medical follow-up;
(B) The results of the medical examination and any associated tests;
(C) Any medical condition which may be revealed in the course of the examination which may place the employee at increased risk as a result of exposure to a hazardous workplace; and
(D) A statement that the employee has been informed by the physician of the results of the consultation or medical examination and any medical condition that may require further examination or treatment.
(ii) The written opinion shall not reveal specific findings of diagnoses unrelated to occupational exposure.
(h) Hazard identification.
(1) With respect to labels and material safety data sheets:
(i) Employers shall ensure that labels on incoming containers of hazardous chemicals are not removed or defaced.
(ii) Employers shall maintain any material safety data sheets that are received with incoming shipments of hazardous chemicals, and ensure that they are readily accessible to laboratory employees.
(2) The following provisions shall apply to chemical substances developed in the laboratory:
(i) If the composition of the chemical substance which is produced exclusively for the laboratory's use is known, the employer shall determine if it is a hazardous chemical as defined in paragraph (b) of this section. If the chemical is determined to be hazardous, the employer shall provide appropriate training as required under paragraph (f) of this section.
(ii) If the chemical produced is a byproduct whose composition is not known, the employer shall assume that the substance is hazardous and shall implement paragraph (e) of this section.
(iii) If the chemical substance is produced for another user outside of the laboratory, the employer shall comply with the Hazard Communication Standard (29 CFR 1910.120) including the requirements for preparation of material safety data sheets and labeling.
(i) Use of respirators. Where the use of respirators is necessary to maintain exposure below permissible exposure limits, the employer shall provide, at no cost to the employee, the proper respiratory equipment. Respirators shall be selected and used in accordance with the requirements of 29 CFR 1910.134.
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(j) Recordkeeping.
(1) The employer shall establish and maintain for each employee an accurate record of any measurements taken to monitor employee exposures and any medical consultation and examinations including tests or written opinions required by this standard.
(2) The employer shall assure that such records are kept, transferred, and made available in accordance with 29 CFR 1910.20.
(k) Dates
(1) Effective date. This section shall become effective May 1, 1990.
(2) Start-up dates.
(i) Employers shall have developed and implemented a written Chemical Hygiene Plan no later than January 31, 1991.
(ii) Paragraph(a)(2) of this section shall not take effect until the
employer has developed and implemented a written Chemical Hygiene Plan.

I Appendices. The information contained in the appendices is not intended, by itself, to create any additional obligations not otherwise imposed or to detract from any existing obligation.

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Title 29 Code of Federal Regulations, Parts 1900-1926 - OSHA

Appendix A to _ 1910.1450 - National Research Council Recommendations Concerning Chemical Hygiene in Laboratories (Non-Mandatory)

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Foreword
As guidance for each employer's development of an appropriate laboratory
Chemical Hygiene Plan, the following non-mandatory recommendations are
provided. They were extracted from "Prudent Practices" for Handling
Hazardous Chemicals in Laboratories" (referred to below as "Prudent
Practices"), which was published in 1981 by the National Research Council
and is available from the National Academy Press, 2101 Constitution Ave.,
NW., Washington DC 20418.

"Prudent Practices" is cited because of its wide distribution and
acceptance and because of its preparation by members of the laboratory
community through the sponsorship of the National Research Council.
However, none of the recommendations given here will modify any
requirements of the laboratory standard. This Appendix merely presents
pertinent recommendations from "Prudent Practices", organized into a form
convenient for quick reference during operation of a laboratory facility
and during development and application of a Chemical Hygiene Plan. Users
of this appendix should consult "Prudent Practices" for a more extended
presentation and justification for each recommendation.

"Prudent Practices" deal with both safety and chemical hazards while the
laboratory standard is concerned primarily with chemical hazards.

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Therefore, only those recommendations directed primarily toward control of
toxic exposures are cited in this appendix, with the term "chemical
Hygiene" being substituted for the word "safety". However, since
conditions producing or threatening physical injury often pose toxic risks
as well, page references concerning major categories of safety hazards in
the laboratory are given in section F.
The recommendations from "Prudent Practices" have been paraphrased,
combined, or otherwise reorganized, and headings have been added. However,
their sense has not been changed.

Corresponding Sections of the Standard and this Appendix
The following table is given for the convenience of those who are
developing a Chemical Hygiene Plan which will satisfy the requirements of
paragraph (e) of the standard. It indicates those sections of this
appendix which are most pertinent to each of the sections of paragraph (e)
and related paragraphs.

Paragraph and topic in laboratory standard Relevant appendix section
(e)(3)(i) Standard operating procedures for handling
toxic chemicals.
C, D, E
(e)(3)(ii) Criteria to be used for implementation of
measures to reduce exposures
D
(e)(3)(iii) Fume hood performance C4b
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(including emergency procedures).
D10, D9
(e)(3)(v) Requirements for prior approval of
laboratory activities.
E2b, E4b
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examinations.
D5, E4f
(e)(3)(vii) Chemical hygiene responsibilities. B
(e)(3)(viii) Special precautions for work with
particularly hazardous substances.
E2, E3, E4
In this appendix, those recommendations directed primarily at
administrators and supervisors are given in sections A - D. Those
recommendations of primary concern to employees who are actually handling
laboratory chemicals are given in section E. (Reference to page numbers
in "Prudent Practices" are given in parentheses.)

A. General Principles for Work with Laboratory Chemicals
In addition to the more detailed recommendations listed below in sections
B-E, "Prudent Practices" expresses certain general principles, including
the following:
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1. It is prudent to minimize all chemical exposures. Because few
laboratory chemicals are without hazards, general precautions for handling
all laboratory chemicals should be adopted, rather than specific
guidelines for particular chemicals (2,10). Skin contact with chemicals
should be avoided as a cardinal rule (198).
2. Avoid underestimation of risk. Even for substances of no known
significant hazard, exposure should be minimized; for work with substances
which present special hazards, special precautions should be taken (10,
37, 38). One should assume that any mixture will be more toxic than its
most toxic component (30, 103) and that all substances of unknown toxicity
are toxic (3, 34).
3. Provide adequate ventilation. The best way to prevent exposure to
airborne substances is to prevent their escape into the working atmosphere
by use of hoods and other ventilation devices (32, 198).
4. Institute a chemical hygiene program. A mandatory chemical hygiene
program designed to minimize exposures is needed; it should be a regular,
continuing effort, not merely a standby or short-term activity (6,11). Its
recommendations should be followed in academic teaching laboratories as
well as by full-time laboratory workers (13).
5. Observe the PELs, TLVs. The Permissible Exposure Limits of OSHA and
the Threshold Limit Values of the American Conference of Governmental
Industrial Hygienists should not be exceeded (13).

B. Chemical Hygiene Responsibilities
Responsibility for chemical hygiene rests at all levels (6, 11, 21) including the:
1. Chief executive officer, who has ultimate responsibility for chemical hygiene within the institution and must, with other administrators, provide continuing support for institutional chemical hygiene (7, 11).
2. Supervisor of the department or other administrative unit, who is responsible for chemical hygiene in that unit (7).
3. Chemical hygiene officer(s), whose appointment is essential (7) and who must:
   (a) Work with administrators and other employees to develop and implement appropriate chemical hygiene policies and practices (7);
   (b) Monitor procurement, use, and disposal of chemicals used in the lab (8);
   (c) See that appropriate audits are maintained (8);
   (d) Help project directors develop precautions and adequate facilities (10);
   (e) Know the current legal requirements concerning regulated substances (50); and
   (f) Seek ways to improve the chemical hygiene program (8, 11).

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4. Laboratory supervisor, who has overall responsibility for chemical hygiene in the laboratory (21) including responsibility to:
   (a) Ensure that workers know and follow the chemical hygiene rules, that protective equipment is available and in working order, and that appropriate training has been provided (21, 22);
   (b) Provide regular, formal chemical hygiene and housekeeping inspections including routine inspections of emergency equipment (21, 171);
   (c) Know the current legal requirements concerning regulated substances (50, 231);
   (d) Determine the required levels of protective apparel and equipment (156, 160, 162); and
   (e) Ensure that facilities and training for use of any material being ordered are adequate (215).
5. Project director or director of other specific operation, who has primary responsibility for chemical hygiene procedures for that operation (7).
6. Laboratory worker, who is responsible for:
   (a) Planning and conducting each operation in accordance with the institutional chemical hygiene procedures (7, 21, 22, 230); and
   (b) Developing good personal chemical hygiene habits (22).

C. The Laboratory Facility
1. Design. The laboratory facility should have:
   (a) An appropriate general ventilation system (see C4 below) with air intakes and exhausts located so as to avoid intake of contaminated air (194);
(b) Adequate, well-ventilated stockrooms/storerooms (218, 219).
(c) Laboratory hoods and sinks (12, 162);
(d) Other safety equipment including eyewash fountains and drench showers (162, 169); and
(e) Arrangements for waste disposal (12, 240).
2. Maintenance. Chemical-hygienic-related equipment (hoods, incinerator, etc.) should undergo continual appraisal and be modified if inadequate (11, 12).

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3. Usage. The work conducted (10) and its scale (12) must be appropriate to the physical facilities available and, especially, to the quality of ventilation (13).

4. Ventilation - (a) General laboratory ventilation. This system should:
Provide a source of air for breathing and for input to local ventilation devices (199); it should not be relied on for protection from toxic substances released into the laboratory (198); ensure that laboratory air is continually replaced, preventing increase of air concentrations of toxic substances during the working day (194); direct air flow into the laboratory from non-laboratory areas and out to the exterior of the building (194).
(b) Hoods. A laboratory hood with 2.5 linear feet of hood space per person should be provided for every 2 workers if they spend most of their time working with chemicals (199); each hood should have a continuous monitoring device to allow convenient confirmation of adequate hood performance before use (200, 209). If this is not possible, work with substances of unknown toxicity should be avoided (13) or other types of local ventilation devices should be provided (199). See pp. 201-206 for a discussion of hood design, construction, and evaluation.
(c) Other local ventilation devices. Ventilated storage cabinets, canopy hoods, snorkels, etc. should be provided as needed (199). Each canopy hood and snorkel should have a separate exhaust duct (207).
(d) Special ventilation areas. Exhaust air from glove boxes and isolation rooms should be passed through scrubbers or other treatment before release into the regular exhaust system (208). Cold rooms and warm rooms should have provisions for rapid escape and for escape in the event of electrical failure (209).
(e) Modifications. Any alteration of the ventilation system should be made only if thorough testing indicates that worker protection from airborne toxic substances will continue to be adequate (12, 193, 204).
(f) Performance. Rate: 4-12 room air changes/hour is normally adequate general ventilation if local exhaust systems such as hoods are used as the primary method of control (194).
(g) Quality. General air flow should not be turbulent and should be relatively uniform throughout the laboratory, with no high velocity or static areas (194, 195); airflow into and within the hood should not be excessively turbulent (200); hood face velocity should be adequate.
(typically 60-100 lfm) (200, 204).

(h) Evaluation. Quality and quantity of ventilation should be evaluated on installation (202), regularly monitored (at least every 3 months) (6, 12, 14, 195), and reevaluated whenever a change in local ventilation devices is made (12, 195, 207). See pp 195-198 for methods of evaluation and for calculation of estimated airborne contaminant concentrations.

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D. Components of the Chemical Hygiene Plan

1. Basic Rules and Procedures (Recommendations for these are given in section E, below)

2. Chemical Procurement, Distribution, and Storage
   (a) Procurement. Before a substance is received, information on proper handling, storage, and disposal should be known to those who will be involved (215, 216). No container should be accepted without an adequate identifying label (216). Preferably, all substances should be received in a central location (216).
   (b) Stockrooms/storerooms. Toxic substances should be segregated in a well-identified area with local exhaust ventilation (221). Chemicals which are highly toxic (227) or other chemicals whose containers have been opened should be in unbreakable secondary containers (219). Stored chemicals should be examined periodically (at least annually) for replacement, deterioration, and container integrity (218-19). Stockrooms/storerooms should not be used as preparation or repackaging areas, should be open during normal working hours, and should be controlled by one person (219).
   (c) Distribution. When chemicals are hand carried, the container should be placed in an outside container or bucket. Freight-only elevators should be used if possible (223).
   (d) Laboratory storage. Amounts permitted should be as small as practical. Storage on bench tops and in hoods is inadvisable. Exposure to heat or direct sunlight should be avoided. Periodic inventories should be conducted, with unneeded items being discarded or returned to the storeroom/stockroom (225-6, 229).

3. Environmental Monitoring

   Regular instrumental monitoring of airborne concentrations is not usually justified or practical in laboratories but may be appropriate when testing or redesigning hoods or other ventilation devices (12) or when a highly toxic substance is stored or used regularly (e.g., 3 times/week) (13).

4. Housekeeping, Maintenance, and Inspections

   (a) Cleaning. Floors should be cleaned regularly (24).
   (b) Inspections. Formal housekeeping and chemical hygiene inspections should be held at least quarterly (6, 21) for units which have frequent personnel changes and semiannually for others; informal inspections should be continual (21).
   (c) Maintenance. Eye wash fountains should be inspected at intervals of not less than 3 months (6). Respirators for routine use should be
inspected periodically by the laboratory supervisor (169). Other safety equipment should be inspected regularly. (e.g., every 3-6 months) (6, 24, 171). Procedures to prevent restarting of out-of-service equipment should be established (25).
(d) Passageways. Stairways and hallways should not be used as storage areas (24). Access to exits, emergency equipment, and utility controls should never be blocked (24).
5. Medical Program
(a) Compliance with regulations. Regular medical surveillance should be established to the extent required by regulations (12).
(b) Routine surveillance. Anyone whose work involves regular and frequent handling of toxicologically significant quantities of a chemical should consult a qualified physician to determine on an individual basis whether a regular schedule of medical surveillance is desirable (11, 50).
(c) First aid. Personnel trained in first aid should be available during working hours and an emergency room with medical personnel should be nearby (173). See pp. 176-178 for description of some emergency first aid procedures.
6. Protective Apparel and Equipment
These should include for each laboratory:
(a) Protective apparel compatible with the required degree of protection for substances being handled (158-161);
(b) An easily accessible drench-type safety shower (162, 169);
(c) An eyewash fountain (162)
(d) A fire extinguisher (162-164);
(e) Respiratory protection (164-9), fire alarm and telephone for emergency use (162) should be available nearby; and
(f) Other items designated by the laboratory supervisor (156, 160).
7. Records
(a) Accident records should be written and retained (174).
(b) Chemical Hygiene Plan records should document that the facilities and precautions were compatible with current knowledge and regulations (7).
(c) Inventory and usage records for high-risk substances should be kept as specified in sections E3e below.
(d) Medical records should be retained by the institution in accordance with the requirements of state and federal regulations (12).
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8. Signs and Labels
Prominent signs and labels of the following types should be posted:
(a) Emergency telephone numbers of emergency personnel/facilities, supervisors, and laboratory workers (28);
(b) Identity labels, showing contents of containers (including waste receptacles) and associated hazards (27, 48);
(c) Location signs for safety showers, eyewash stations, other safety and first aid equipment, exits
and areas where food and beverage consumption and storage are permitted (24); and
(d) Warnings at areas or equipment where special or unusual hazards exist (27).
9. Spills and Accidents
(a) A written emergency plan should be established and communicated to all personnel; it should include procedures for ventilation failure (200), evacuation, medical care, reporting, and drills (172).
(b) There should be an alarm system to alert people in all parts of the facility including isolation areas such as cold rooms (172).
(c) A spill control policy should be developed and should include consideration of prevention, containment, cleanup, and reporting (175).
(d) All accidents or near accidents should be carefully analyzed with the results distributed to all who might benefit (8, 28).
10. Information and Training Program
(a) Aim: To assure that all individuals at risk are adequately informed about the work in the laboratory, its risks, and what to do if an accident occurs (5, 15).
(b) Emergency and Personal Protection Training: Every laboratory worker should know the location and proper use of available protective apparel and equipment (154, 169).
Some of the full-time personnel of the laboratory should be trained in the proper use of emergency equipment and procedures (6).
Such training as well as first aid instruction should be available to (154) and encouraged for (176) everyone who might need it.
(c) Receiving and stockroom/storeroom personnel should know about hazards, handling equipment, protective apparel, and relevant regulations (217).
(d) Frequency of Training: The training and education program should be a regular, continuing activity - not simply an annual presentation (15).
(e) Literature/Consultation: Literature and consulting advice concerning Appendix -21 chemical hygiene should be readily available to laboratory personnel, who should be encouraged to use these information resources (14).
11. Waste Disposal Program.
(a) Aim: To assure that minimal harm to people, other organisms, and the environment will result from the disposal of waste laboratory chemicals (5).
(b) Content (14, 232, 233, 240): The waste disposal program should specify how waste is to be collected, segregated, stored, and transported and include consideration of what materials can be incinerated. Transport from the institution must be in accordance with DOT regulations (244).
(c) Discarding Chemical Stocks: Unlabeled containers of chemicals and solutions should undergo prompt disposal; if partially used, they should not be opened (24, 27).
Before a worker's employment in the laboratory ends, chemicals for which that person was responsible should be discarded or returned to storage
(d) Frequency of Disposal: Waste should be removed from laboratories to a central waste storage area at least once per week and from the central waste storage area at regular intervals (14).

(e) Method of Disposal: Incineration in an environmentally acceptable manner is the most practical disposal method for combustible laboratory waste (14, 238, 241). Indiscriminate disposal by pouring waste chemicals down the drain (14, 231, 242) or adding them to mixed refuse for landfill burial is unacceptable (14). Hoods should not be used as a means of disposal for volatile chemicals (40, 200).

Disposal by recycling (233, 243) or chemical decontamination (40, 230) should be used when possible.

E. Basic Rules and Procedures for Working with Chemicals
The Chemical Hygiene Plan should require that laboratory workers know and follow its rules and procedures. In addition to the procedures of the subprograms mentioned above, these should include the rules listed below.

1. General Rules
The following should be used for essentially all laboratory work with chemicals:

(a) Accidents and spills - Eye Contact: Promptly flush eyes with water for a prolonged period (15 minutes) and seek medical attention (33, 172). Ingestion: Encourage the victim to drink large amounts of water (178). Skin Contact: Promptly flush the affected area with water (33, 172, 178) and remove any contaminated clothing (172, 178). If symptoms persist after washing, seek medical attention (33). Clean-up. Promptly clean up spills, using appropriate protective apparel and equipment and proper disposal (24, 33). See pp. 233-237 for specific clean-up recommendations.

(b) Avoidance of "routine" exposure: Develop and encourage safe habits (23); avoid unnecessary exposure to chemicals by any route (23); Do not smell or taste chemicals (32). Vent apparatus which may discharge toxic chemicals (vacuum pumps, distillation columns, etc.) into local exhaust devices (199).

Inspect gloves (157) and test glove boxes (208) before use. Do not allow release of toxic substances in cold rooms and warm rooms, since these have contained recirculated atmospheres (209).

(c) Choice of chemicals: Use only those chemicals for which the quality of the available ventilation system is appropriate (13).

(d) Eating, smoking, etc.: Avoid eating, drinking, smoking, gum chewing, or application of cosmetics in areas where laboratory chemicals are present (22, 24, 32, 40); wash hands before conducting these activities (23, 24).

Avoid storage, handling, or consumption of food or beverages in storage
areas, refrigerators, glassware or utensils which are also used for laboratory operations (23, 24, 226).

(e) Equipment and glassware: Handle and store laboratory glassware with care to avoid damage; do not use damaged glassware (25). Use extra care with Dewar flasks and other evacuated glass apparatus; shield or wrap them to contain chemicals and fragments should implosion occur (25). Use equipment only for its designed purpose (23, 26).

(f) Exiting: Wash areas of exposed skin well before leaving the laboratory (23).

(g) Horseplay: Avoid practical jokes or other behavior which might confuse, startle or distract another worker (23).

(h) Mouth suction: Do not use mouth suction for pipeting or starting a siphon (23, 32).

(i) Personal apparel: Confine long hair and loose clothing (23, 158). Wear shoes at all times in the laboratory but do not wear sandals, perforated shoes, or sneakers (158).

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(j) Personal housekeeping: Keep the work area clean and uncluttered, with chemicals and equipment being properly labeled and stored; clean up the work area on completion of an operation or at the end of each day (24).

(k) Personal protection: Assure that appropriate eye protection (154-156) is worn by all persons, including visitors, where chemicals are stored or handled (22, 23, 33, 154).

Use appropriate gloves when the potential for contact with toxic materials exists (157); inspect the gloves before each use, wash them before removal, and replace them periodically (157). (A table of resistance to chemicals of common glove materials is given p. 159). Use appropriate (164-168) respiratory equipment when air contaminant concentrations are not sufficiently restricted by engineering controls (164-5), inspecting the respirator before use (169).

Use any other protective and emergency apparel and equipment as appropriate (22, 157-162).

Avoid use of contact lenses in the laboratory unless necessary; if they are used, inform supervisor so special precautions can be taken (155).

Remove laboratory coats immediately on significant contamination (161).

(l) Planning: Seek information and advice about hazards (7), plan appropriate protective procedures, and plan positioning of equipment before beginning any new operation (22, 23).

(m) Unattended operations: Leave lights on, place an appropriate sign on the door, and provide for containment of toxic substances in the event of failure of a utility service (such as cooling water) to an unattended operation (27, 128).

(n) Use of hood: Use the hood for operations which might result in release of toxic chemical vapors or dust (198-9).

As a rule of thumb, use a hood or other local ventilation device when working with any appreciably volatile substance with a TLV of less than 50
Confirm adequate hood performance before use; keep hood closed at all times except when adjustments within the hood are being made (200); keep materials stored in hoods to a minimum and do not allow them to block vents or air flow (200). Leave the hood "on" when it is not in active use if toxic substances are stored in it or if it is uncertain whether adequate general laboratory ventilation will be maintained when it is "off" (200).

(o) Vigilance: Be alert to unsafe conditions and see that they are corrected when detected (22).

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(p) Waste disposal: Assure that the plan for each laboratory operation includes plans and training for waste disposal (230).
Deposit chemical waste in appropriately labeled receptacles and follow all other waste disposal procedures of the Chemical Hygiene Plan (22, 24). Do not discharge to the sewer concentrated acids or bases (231); highly toxic, malodorous, or lachrymatory substances (231); or any substances which might interfere with the biological activity of waste water treatment plants, create fire or explosion hazards, cause structural damage or obstruct flow (242).

(q) Working alone: Avoid working alone in a building; do not work alone in a laboratory if the procedures being conducted are hazardous (28).

2. Working with Allergens and Embryotoxins
(a) Allergens (examples: diazomethane, isocyanates, bichromates): Wear suitable gloves to prevent hand contact with allergens or substances of unknown allergenic activity (35).
(b) Embryotoxins (34-5) (examples: organomercurials, lead compounds, formamide): If you are a woman of childbearing age, handle these substances only in a hood whose satisfactory performance has been confirmed, using appropriate protective apparel (especially gloves) to prevent skin contact.
Review each use of these materials with the research supervisor and review continuing uses annually or whenever a procedural change is made.
Store these substances, properly labeled, in an adequately ventilated area in an unbreakable secondary container.
Notify supervisors of all incidents of exposure or spills; consult a qualified physician when appropriate.

3. Work with Chemicals of Moderate Chronic or High Acute Toxicity
Examples: diisopropylfluorophosphate (41), hydrofluoric acid (43), hydrogen cyanide (45).
Supplemental rules to be followed in addition to those mentioned above (Procedure B of "Prudent Practices", pp. 39-41):
(a) Aim: To minimize exposure to these toxic substances by any route using all reasonable precautions (39).
(b) Applicability: These precautions are appropriate for substances with
moderate chronic or high acute toxicity used in significant quantities (39).
(c) Location: Use and store these substances only in areas of restricted access with special warning signs (40, 229).

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Always use a hood (previously evaluated to confirm adequate performance with a face velocity of at least 60 linear feet per minute) (40) or other containment device for procedures which may result in the generation of aerosols or vapors containing the substance (39); trap released vapors to prevent their discharge with the hood exhaust (40).
(d) Personal protection: Always avoid skin contact by use of gloves and long sleeves (and other protective apparel as appropriate) (39). Always wash hands and arms immediately after working with these materials (40).
(e) Records: Maintain records of the amounts of these materials on hand, amounts used, and the names of the workers involved (40, 229).
(f) Prevention of spills and accidents: Be prepared for accidents and spills (41).
Assure that at least 2 people are present at all times if a compound in use is highly toxic or of unknown toxicity (39).
Store breakable containers of these substances in chemically resistant trays; also work and mount apparatus above such trays or cover work and storage surfaces with removable, absorbent, plastic backed paper (40). If a major spill occurs outside the hood, evacuate the area; assure that cleanup personnel wear suitable protective apparel and equipment (41).
(g) Waste: Thoroughly decontaminate or incinerate contaminated clothing or shoes (41). If possible, chemically decontaminate by chemical conversion (40). Store contaminated waste in closed, suitably labeled, impervious containers (for liquids, in glass or plastic bottles half-filled with vermiculite) (40).

4. Work with Chemicals of High Chronic Toxicity
(Examples: dimethylmercury and nickel carbonyl (48), benzo-a-pyrene (51), N-nitrosodiethylamine (54), other human carcinogens or substances with high carcinogenic potency in animals (38).)
Further supplemental rules to be followed, in addition to all these mentioned above, for work with substances of known high chronic toxicity (in quantities above a few milligrams to a few grams, depending on the substance) (47). (Procedure A of "Prudent Practices" pp. 47-50).
(a) Access: Conduct all transfers and work with these substances in a "controlled area": a restricted access hood, glove box, or portion of a lab, designated for use of highly toxic substances, for which all people with access are aware of the substances being used and necessary precautions (48).
(b) Approvals: Prepare a plan for use and disposal of these materials and obtain the approval of the laboratory supervisor (48).
(c) Non-contamination/Decontamination: Protect vacuum pumps against Appendix -26
contamination by scrubbers or HEPA filters and vent them into the hood (49). Decontaminate vacuum pumps or other contaminated equipment, including glassware, in the hood before removing them from the controlled area (49, 50).

Decontaminate the controlled area before normal work is resumed there (50).

d) Exiting: On leaving a controlled area, remove any protective apparel (placing it in an appropriate, labeled container) and thoroughly wash hands, forearms, face, and neck (49).

e) Housekeeping: Use a wet mop or a vacuum cleaner equipped with a HEPA filter instead of dry sweeping if the toxic substance was a dry powder (50).

(f) Medical surveillance: If using toxicologically significant quantities of such a substance on a regular basis (e.g., 3 times per week), consult a qualified physician concerning desirability of regular medical surveillance (50).

(g) Records: Keep accurate records of the amounts of these substances stored (229) and used, the dates of use, and names of users (48).

(h) Signs and labels: Assure that the controlled area is conspicuously marked with warning and restricted access signs (49) and that all containers of these substances are appropriately labeled with identity and identity (50).

(i) Spills: Assure that contingency plans, equipment, and materials to minimize exposures of people and property in case of accident are available (233-4).

(j) Storage: Store containers of these chemicals only in a ventilated, limited access (48, 227, 229) area in appropriately labeled, unbreakable, chemically resistant, secondary containers (48, 229).

(k) Glove boxes: For a negative pressure glove box, ventilation rate must be at least 2 volume changes/hour and pressure at least 0.5 inches of water (48). For a positive pressure glove box, thoroughly check for leaks before each use (49). In either case, trap the exit gases or filter them through a HEPA filter and then release them into the hood (49).

(l) Waste: Use chemical decontamination whenever possible; ensure that containers of contaminated waste (including washings from contaminated flasks) are transferred from the controlled area in a secondary container under the supervision of authorized personnel (49, 50, 233).

5. Animal Work with Chemicals of High Chronic Toxicity

(a) Access: For large scale studies, special facilities with restricted access are preferable (56).

(b) Administration of the toxic substance: When possible, administer the substance by injection or gavage instead of in the diet. If administration is in the diet, use a caging system under negative pressure or under laminar air flow directed toward HEPA filters (56).

(c) Aerosol suppression: Devise procedures which minimize formation and dispersal of contaminated aerosols, including those from food, urine, and...
feces (e.g., use HEPA filtered vacuum equipment for cleaning, moisten contaminated bedding before removal from the cage, mix diets in closed containers in a hood) (55, 56).
(d) Personal protection: When working in the animal room, wear plastic or rubber gloves, fully buttoned laboratory coat or jumpsuit and, if needed because of incomplete suppression of aerosols, other apparel and equipment (shoe and head coverings, respirator) (56).
(e) Waste disposal: Dispose of contaminated animal tissues and excreta by incineration if the available incinerator can convert the contaminant to non-toxic products (238); otherwise, package the waste appropriately for burial in an EPA-approved site (239).
F. Safety Recommendations
The above recommendations from "Prudent Practices" do not include those which are directed primarily toward prevention of physical injury rather than toxic exposure. However, failure of precautions against injury will often have the secondary effect of causing toxic exposures. Therefore, we list below page references for recommendations concerning some of the major categories of safety hazards which also have implications for chemical hygiene:
G. Material Safety Data Sheets
Material safety data sheets are presented in "Prudent Practices" for the chemicals listed below. (Asterisks denote that comprehensive material safety data sheets are provided).
*Aceyl peroxide (105)
*Acrolein (106)
*Acrylonitrile
Ammonia (anhydrous)(91)
*Aniline (109)
*Benzene (110)
*Benzo[a]pyrene (112)
*Bis(chloromethyl) ether (113)
Boron trichloride (91)
Boron trifluoride (92)
Bromine (114)
*Tert-butyl hydroperoxide (148)
*Carbon disulfide (116)
Carbon monoxide (92)
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*Carbon tetrachloride (118)
*Chlorine (119)
Chlorine trifluoride (94)
*Chloroform (121)
Chloromethane (93)
*Diethyl ether (122)
Diisopropyl fluorophosphate (41)
*Dimethylformamide (123)
*Dimethyl sulfate (125)
*Dioxane (126)
*Ethylene dibromide (128)
*Fluorine (95)
*Formaldehyde (130)
*Hydrazine and salts (132)
Hydrofluoric acid (43)
Hydrogen bromide (98)
Hydrogen chloride (98)
*Hydrogen cyanide (133)
*Hydrogen sulfide (135)
Mercury and compounds (52)
*Methanol (137)
*Morpholine (138)
*Nickel carbonyl (99)
*Nitrobenzene (139)
Nitrogen dioxide (100)
N-nitrosodiethylamine (54)
*Peracetic acid (141)
*Phenol (142)
*Phosgene (143)
*Pyridine (144)
*Sodium azide (145)
*Sodium cyanide (147)
Sulfur dioxide (101)
*Trichloroethylene (149)
*Vinyl chloride (150)

Appendix -29

Title 29 Code of Federal Regulations, Parts 1900-1926 - OSHA
Appendix B to _ 1910.1450 - References (Non-Mandatory)
The following references are provided to assist the employer in the development of a Chemical Hygiene Plan. The materials listed below are offered as non-mandatory guidance. References listed here do not imply specific endorsement of a book, opinion, technique, policy or a specific solution for a safety or health problem. Other references not listed here may better meet the needs of a specific laboratory.

(a) Materials for the development of the Chemical Hygiene Plan:
3. Flury, Patricia A., Environmental Health and Safety in the Hospital

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(b) Hazardous Substances Information:
1. American Conference of Governmental Industrial Hygienists, Threshold Limit Values for Chemical Substances and Physical Agents in the Workroom Environment with Intended Changes, 6500 Glenway Avenue, Bldg. D-7, Cincinnati, Ohio 45211-4438 (latest edition).
10. Patty, F.A., Industrial Hygiene and Toxicology, John Wiley & Sons,
Inc., New York, NY (Five Volumes).
11. Registry of Toxic Effects of Chemical Substances, U.S. Department of
Health and Human Services, Public Health Service, Centers for Disease
Control, National Institute for Occupational Safety and Health, Revised
Annually, for sale from Superintendent of documents US. Govt. Printing
Office, Washington, DC 20402.
12. The Merck Index: An Encyclopedia of Chemicals and Drugs. Merck and
14. Sittig, Marshall, Handbook of Toxic and Hazardous Chemicals, Noyes
Appendix -31
(c) Information on Ventilation:
1. American Conference of Governmental Industrial Hygienists Industrial
Ventilation (latest edition), 6500 Glenway Avenue, Bldg. D-7, Cincinnati,
Ohio 45211-4438.
2. American National Standards Institute, Inc. American National Standards
Fundamentals Governing the Design and Operation of Local Exhaust Systems
3. Imad, A.P. and Watson, C.L. Ventilation Index: An Easy Way to Decide
Safety Standard for Laboratories in Health Related Institutions, NFPA,
56c, 1980.
National Fire Protection Association, Batterymarch Park, Quincy, MA 02269.
5. Scientific Apparatus Makers Association (SAMA), Standard for Laboratory
(d) Information on Availability of Referenced Material:
1. American National Standards Institute (ANSI), 1430 Broadway, New York,
NY 10018.
2. American Society for Testing and Materials (ASTM), 1916 Race Street,
Philadelphia, PA 19103.
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