

Medical Technology Department
Armstrong Atlantic State University

LABORATORY SAFETY MANUAL

PUBLIC SAFETY.....	921-5555
CHATHAM COUNTY, ALL EMERGENCIES.....	911
OSHA, SAVANNAH OFFICE.....	(912) 652-4393
ARMSTRONG PLANT OPERATIONS.....	927-5329
STUDENT AFFAIRS (ACCIDENT REPORTS).....	927-5271
POISON CONTROL.....	(800) 222-1222

LABORATORY SAFETY MANUAL

INTRODUCTION.....	3
RULES OF CONDUCT.....	3
UNIVERSAL PRECAUTIONS AND INFECTION CONTROL	
Accidental Exposure.....	5
Personal Protection.....	6
Glove Use.....	6
Handwashing.....	6
Eye Safety.....	6
Laboratory Dress Code.....	6
Hair.....	7
HBV Immunization.....	7
BIOLOGICAL WASTE DISPOSAL AND SPILL MANAGEMENT	
Decontamination Procedures.....	8
CHEMICAL HAZARDS AND PRECAUTIONS	
Storage.....	8
Labeling.....	9
Usage.....	9
Spills Management.....	9
Waste Disposal.....	9
Mercury.....	9
FIRE POLICIES AND PROCEDURES	
Fire Control Measures.....	10
Fire Prevention.....	10
OTHER HAZARDS	
Electrical.....	11
Compressed Gases.....	11
Glass Handling.....	12
Centrifuges.....	12
Autoclaves.....	12
SAFETY AND FIRST AID	
Exits and Aisles.....	13
Reporting of Accidents and Exposures.....	13
First Aid.....	13
A REMINDER ABOUT SAFETY.....	14
Access to Student Laboratory Policy.....	15
FORMS	
Accident Report.....	16
Venipuncture/Fingerstick Report.....	17
APPENDICES	
Hand Washing Policy.....	18
Student Self Testing Policy.....	20
Certification of Receipt.....	21
Laboratory Safety Equipment Orientation.....	22

INTRODUCTION

Because we care for you and want to provide a safe environment for all of us to work in, various policies and procedures are established to ensure safety. These are based on recommendations from the National Centers for Disease Control and Prevention (CDC) and on guidelines by the Occupational Safety and Health Administration (OSHA) and Clinical Laboratory Standards Institute (CLSI) GP17-A Clinical Laboratory Safety Approved Guidelines.

Safety practices in the student laboratory will be enforced. Violations of the safety rules will result in appropriate disciplinary action consistent with the AASU School of Health Professions Policy on Standards, Suspensions and Dismissal. This may include dismissal from the program.

Please carefully and thoroughly read and study this manual. By practicing all safety rules you will significantly lessen chances of injury and/or infection. Let's keep our laboratory accident free.

Management of Student Laboratory Safety Program

The student laboratory safety program is overseen and managed by the Department Head with input from department faculty, the Department Medical Advisor, and the AASU Safety Compliance Officer. Policies and procedures along with the safety handbook are reviewed annually. All students and instructors are required to review in depth the contents of this safety handbook and sign a Certificate of Receipt testifying that they have read the manual and been given an opportunity to ask questions and obtain clarification on the policies and procedures therein. This handbook contains the Exposure Control Plan (ECP), the Chemical Hygiene Plan (CHP), Work Practice Controls (WPC), and other pertinent CDC and OSHA lab safety components.

All students and faculty must complete the “Board of Regents of the University of Georgia (USG) Environmental Affairs/”Right-to-Know” world-wide web on-line training program at www.usg.edu/ehs/training/rtkbasic and submit the certificate document to the MT Department Head.

General Rules of Conduct

Within the "lab" you are part of a team. As with any team, each of the members must fully cooperate with each other. Each team member should contribute to the orderly utilization of the laboratory. This should include but not be limited to such things as proper replacement of supplies and reagents to their original location and good housekeeping. A clean and neat laboratory setting presents an air of professionalism, is conducive to good work, quality assurance, and at the same time, promotes a safe environment. Therefore, we expect you to:

1. Always follow the safety rules.
2. Be on time and ready to work at the assigned start of each lab session. Directions given by the lab instructors will not be repeated for any student who arrives late. Your fellow students may, if they wish, provide such instructions.
3. Handle all glassware, equipment and specimens with care.
4. Label all reagents and specimens properly and legibly.
5. Be mindful of your fellow students. Coordinate with other students when sharing of equipment or reagents. Help your fellow students when appropriate.
6. Keep a clean working area. Books, clothes, etc., and paper should not clutter the area. Keep cabinet doors and drawers closed. Keep chairs/tables recessed under cabinets when not in use.
7. Follow the guidelines for waste disposal (some items are discarded in regular trash cans, others are not). Avoid excess biohazardous waste.
8. Strive toward efficiency and accuracy
9. Do not leave until you have cleaned up your work area and returned supplies and equipment to the appropriate areas. Disinfect your work area before and after each lab session.
10. Treat laboratory reports as confidential medical information, which is not to be shared with unauthorized persons.
11. Use good penmanship. Reports are to be legible and neat. If an error was made, draw one line through the incorrect entry, initial and write the correct entry above it. Reports are considered "legal documents".
12. No personal items such as pictures, CD players, radios etc. are permitted to be posted or utilized in the lab or classroom.

UNIVERSAL PRECAUTIONS AND INFECTION CONTROL

In August 1987, CDC published a document entitled "Recommendations for Prevention of HIV Transmission in Health-Care Settings". The document recommended that blood and body fluid precautions be consistently used for all patients regardless of their bloodborne infection status. This extension of blood and body fluid precautions to all patients is referred to as "Universal Blood and Body Fluid Precautions" or "Universal Precautions." Under universal precautions, blood and certain body fluids of all patients are considered potentially infectious for human immunodeficiency virus (HIV), hepatitis B virus (HBV), and other blood borne pathogens.

Universal precautions are intended to prevent parenteral, mucous membrane, and non-intact skin exposures (Occupational Exposure) of health-care workers to blood borne pathogens. Immunization with HBV vaccine is recommended as an important adjunct to universal precautions for health-care workers who have exposures to blood.

Universal precautions apply to blood and to other body fluids containing visible blood. Universal precautions also apply to semen, vaginal secretions, cerebrospinal fluid (CSF), synovial fluid, pleural fluid, peritoneal fluid, pericardial fluid, and amniotic fluid.

Universal precautions do not apply to feces, nasal secretions, sputum, sweat, tears, urine, and vomitus unless they contain visible blood.

Protective barriers reduce the risk or exposure of the health-care worker's skin or mucous membranes to potentially infective materials. For universal precautions, protective barriers reduce the risk of exposure to blood, body fluids containing visible blood, and other fluids to which universal precautions apply. Examples of protective barriers include gloves, gowns, masks, and protective eyewear. These items are referred to as Personal Protective Equipment (PPE). Universal precautions are intended to supplement rather than replace recommendations for routine infection control, such as handwashing and using gloves to prevent gross microbial contamination of hands.

ACCIDENTAL EXPOSURE

Anyone exposed to blood, bloody fluid or other potentially infectious material should immediately report such incident to one of the laboratory instructors or professors. Do not leave the laboratory. The laboratory instructor or professor will utilize the MMWR PEP algorithm (May 15, 1998) (refer to back side of Accident Report Form) to determine the PEP recommendation in conjunction with discussion with the individual and Department Head if deemed necessary.

Personal Protection

There will be:

NO SMOKING

NO EATING OR DRINKING; this includes chewing gum or candy

NO APPLICATION OF COSMETICS

Glove Use

Gloves should reduce the incidence of contamination of hands, but they cannot prevent penetrating injuries due to needles or other sharp instruments. The CDC recommends that laboratory personnel wear gloves when handling and/or processing blood and body fluids. Students will be informed of the laboratory courses in which gloves are required. Gloves, if visibly contaminated with blood, should be discarded in the biological hazard bags after each laboratory period. **Gloves must be worn at all times if hands have cuts, scratches or any other breaks in skin.**

Handwashing

**See Appendix for Hand Washing Policy (p.18)

Eye Safety

1. Wear protective eye and face shields when designated.
2. Contact lenses do not provide eye protection. The capillary space between the contact lenses and the cornea may trap any material present on the surface of the eye. Caustic chemicals trapped in this space cannot be washed off the surface of the cornea. If the material in the eye is painful, or the contact lens is displaced, muscle spasms will make it very difficult, if not impossible, to remove the lens. For this reason, contact lenses must not be worn by persons exposed to caustic chemicals unless goggles and/or plastic facemasks are also worn to provide full protection.

Laboratory Dress Code

Personal appearance can be perceived as a reflection of one's professional competence in the judgment of patients, physicians, and other health care practitioners. Therefore, this department expects that each student will present with appropriate attire, hairstyle, and personal hygiene to project a professional image.

Students will wear long (full length) fluid impermeable cuffed lab coats at all times in the student lab and may be purchased from the Medical Technology department. The absence of a coat is cause for dismissal from the student laboratory. If you leave the laboratory, your coat is to be removed, and left in the laboratory. "Scrubs" or uniforms must be worn under lab coats.

The following are considered unacceptable attire in the laboratory but may not be limited to the items below:

1. Open-toed, or any sandal type shoes
2. Shoes without socks or stockings
3. Shorts

An example of acceptable attire is:

Long white laboratory coat, closed-toed shoes with rubber soles and socks or stockings and covered legs (“scrubs” or uniforms). A “long” scrub-skirt is acceptable but one which covers the knees when sitting down.

Hair

All hair shall be secured back and off the shoulders. No caps or hats are allowed.

Nails

Nails should be of a length that will not puncture gloves. This means that nails should not be longer than 1/8 inch.

HBV Immunization

OSHA recommends that all health care workers who might be exposed to blood in an occupational setting should receive hepatitis B vaccine, preferably during their period of professional training and before any occupational exposures could occur.

The Program Faculty will provide information about an immunization program, which is available to students. All students are encouraged to participate in the program. Students will be required to sign a form indicating participation or lack of participation in the immunization program.

BIOLOGICAL WASTE DISPOSAL AND SPILL MANAGEMENT

All materials exposed to blood and body fluids are to be discarded into the Biohazard containers on the benchtops, which will then be closed with a twist tie and placed into the large medical waste container in the prep room. These will be picked up by the Biohazardous waste company and autoclaved offsite. **No disposable materials used in laboratory work should be discarded into regular trashcans!**

The instructor(s) will communicate verbally, the specific procedures concerning the day-to-day cleaning of countertops, glassware, equipment, etc.

Decontamination Procedures

1. Spilled cultures or blood/sera
 - a. Flood with disinfectant (Vesophene II), place paper towel on top
 - b. Time 5 min
 - c. Wipe up with paper towels - gloved hands!
 - d. Discard into biohazard bag

2. Skin - Blood/sera and cultures
 - a. Wash and scrub thoroughly with soap for at least 60 seconds and rinse with water.

Chemical Hygiene Plan (CHP)

Although limited in number and frequency of utilization, there are several chemicals and various reagents used in the student laboratory which may pose a serious risk if not used correctly or if accidental exposure occurs.

OSHA requires that employees have the "Right-to-Know" about chemical hazards in the work environment and be informed of the type of hazard, precautions, and other pertinent information associated with the use of chemicals. Thus, this CHP will include information on proper labeling, storage, disposal, and handling of chemicals. The MT Department maintains MSDS (Material Safety Data Sheets) in the student laboratory. **Students, on a semester basis, will be required to review the MSDS book and sign an acknowledgement sheet.**

Storage

1. Caustic chemicals, i.e., ammonia solution, liquid phenol, acids, strong bases, etc., should be stored no higher than counter top level to minimize the possibility of facial and upper body burns in the event of spills or breakage of containers. It is also good practice to use the smallest sized container compatible with the need.

2. Store containers so that removal of one does not injure others.

3. Strong acids must be stored separately from strong oxidizing agents, (sulfuric, nitric, perchloric, acetic anhydride).

Labeling

1. ALL reagents must be labeled indicating:
 - a. CONTENT - date prepared - initials of preparer
 - b. CAUTION
 - c. TYPE HAZARD - (poison, irritant, carcinogen)
 - d. PRECAUTIONS (avoid skin contact, use only in enclosed area, use only in ventilated area)
 - e. INSTRUCTIONS FOR ACCIDENT
 - i. Read Label
 - ii. Wash Exposed Area
 - iii. Report to Instructor

Usage

1. PROTECTION: If large quantities of acids must be used, work in the fume hood.
2. WEAR: Aprons and eye protection (glasses or face shield) and gloves when handling highly corrosive materials.
3. DO NOT PIPET BY MOUTH OR INHALE: Transfer by a mechanical device or pouring of smaller quantities. DON'T SNIFF.
4. DILUTION: With great care - add reagents SLOWLY: run down sides to allow gentle mixing, rotate containers to mix thoroughly. Do not allow mixtures to overheat. ADD ACID TO WATER - NEVER WATER TO ACID.

Spills Management

1. Clothing: Take it off - get it away from skin contact (including belts and shoes).
2. Wash: Wash area immediately.
3. Contain spills: (Secondary to personnel safety). Use sand or absorbent material to control spread of liquids. Wash down area thoroughly after clean-up.

Waste Disposal

Liquids should be flushed from the sink with copious amounts of water. Sand or absorbent from spills should be placed in a sealed can.

CHEMICAL WASTES MUST BE LABELED AS HAZARDOUS

Mercury

1. Avoid or minimize spills of elemental mercury as much as possible. Avoid skin contact.
2. When a mercury thermometer is broken, clean up spills with a pipet or "sweeper". Ventilate area well to remove Hg vapors.
3. Chronic exposure and absorption may lead to a metallic taste in the mouth, a "lead line" (grey line) around gums, and neurologic problems.

FIRE POLICIES AND PROCEDURES

Priorities in case of fire:

1. Notify instructor
2. Use RACE acronym to:
 - a. REMOVE – Remove anyone from danger. This is essential because a small fire can rapidly become a conflagration.
 - b. ALARM – Activate fire alarm
 - c. CONTAIN - Contain fire, close any doors etc
 - d. EXTINGUISH – Fight the fire with appropriate materials.
3. Evacuate area and/or building

Fire Control Measures

1. Solid combustibles: Water, CO₂ or dry chemical extinguisher can be used
2. Flammable liquids: Contain and control with sand, CO₂ and/or dry chemical.
DO NOT USE WATER
3. Electric fires: SHUT DOWN CIRCUIT
USE CO₂ OR DRY CHEMICAL
DO NOT USE WATER ON ELECTRICAL FIRES
4. Flammable gases: SHUT OFF SOURCE IF POSSIBLE, "BLOW OUT" WITH CO₂. KEEP OTHER FLAMES AWAY FROM GAS CYLINDERS.

Fire Prevention

1. Be aware of ignition sources - open flames, heating elements and spark gaps (motors, light switches friction and static).
2. Do not use flammable liquids in presence of ignition sources and conversely keep ignition sources away from areas where flammable liquids are used and/or stored.
3. Flammable liquids give off vapors, which may also burn or explode.
 - a. Be sure flammable liquids are properly stored. Quantities of one gallon or over in safety cans. Bulk storage should be stored in well ventilated areas. Small quantities in use should be stored in well-ventilated areas.
 - b. Do not store any flammable liquids in areas exposed to direct sunlight.

OTHER HAZARDS

ELECTRICAL

1. Report all tingles, shocks, or observed potential shock hazards to the instructor (big shocks are often preceded by small ones).
2. ALL instruments must be grounded (exceptions are those with non-conductive plastic cases and controls--such as microscopes).
3. DO NOT WORK ON - OR ATTEMPT TO REPAIR - ANY INSTRUMENT WHILE IT IS PLUGGED IN! unless instructed to do so.
4. Remove rings, watches, or other jewelry when working on instruments.
5. When working on the electrical components of instruments, be aware of what both hands are touching.

COMPRESSED GASES

1. Cylinders of compressed gas must be secured at all times so they cannot fall.
2. Valve safety covers should be in place until pressure regulators or needle valves are ready to be attached.
3. The contents of cylinders must be identified with decals stencils, glued, or wired-on tags, or other markings on the cylinders. Color codes alone or tags hung around the necks of the cylinders are not acceptable. Cylinders lacking proper identification must not be accepted from the vendor.
4. Cylinders should be moved on hand trucks, carts, dollies, etc.; they must never be rolled or dragged.
5. Do not attempt to repair cylinders or cylinder valves or to force stuck or frozen cylinder valves.
6. Empty cylinders must be marked EMPTY with grease pencils on a piece of adhesive stuck on the cylinder in order to distinguish from full cylinders.
7. Keep compressed gas cylinders away from heat. If a fire occurs, gas cylinders should be cooled. Heating will weaken a cylinder wall and it will either blow up or take off like a torpedo.
8. Never permit oil, grease, or lubricants to be used on valves, regulators, gauges, or gas fittings.

GLASS HANDLING

1. Do not use broken or chipped glassware. Check with the instructor.
2. Do not leave pipets sticking out of bottles, flasks, or beakers.
3. Do not attempt to remove stoppers on glass tubing by forcing. If they are stuck, cut them off.
4. Hot Glass - heated containers should be handled with an asbestos glove.

CENTRIFUGES

1. Do not operate centrifuges unless the cover is closed (including serofuges). Keep hair, beards, neck ties, hair ribbons, or other frilly or dangling items out of the way. (Do not get wrapped up in your work).
2. Do not centrifuge uncovered tubes of specimens (blood, urine, sputum) or of flammable liquids. Spinning creates a vacuum and volatilizes liquids. (contaminated items become aerosols - flammable liquids become bombs, etc.)
USE CAPS.

AUTOCLAVES

1. Don't operate until you have been checked off for it's proper operation.
2. Don't open until both temperature and pressure are back to normal.
3. Follow instructions exactly.
4. Use asbestos gloves when putting items in or removing items from the autoclave. (The sides and door may be hot in addition to the material being autoclaved).
5. Loosen caps of any containers to allow equalization of pressures inside containers. This prevents explosions, boil-overs, and implosions.

SAFETY AND FIRST AID

EXITS AND AISLES

Aisles and exit routes must not be obstructed in any way. Therefore, keep the stools pushed under or next to the bench. Keep book bags and other personal items where they will not be an obstruction hazard.

Reporting of Accidents and Exposures

Report all accidents of any type to the Instructor immediately. This includes electrical shocks, chemical spills, bodily exposure to blood and body fluids contaminated with blood and all other types of exposures and/or injuries.

The instructor, in consultation with the Program Director, if necessary, will evaluate the exposure, counsel the student, and treat the exposure as deemed appropriate. If deemed necessary, the student will be referred to a physician for consultation/medical treatment. An Accident Report Form must be completed and provided to the student.

First Aid

A first aid cabinet is located in the laboratory. Notify the instructor when items are used so supplies may be replaced.

A REMINDER ABOUT SAFETY

YOU - are the only one who can practice safe procedures for your own protection and that of your fellow workers.

YOU - have the responsibility to:

BE AWARE OF SAFETY HAZARDS

FOLLOW POLICIES AND PROCEDURES DESIGNED TO HELP PROTECT YOU

TO REPORT ALL INCIDENTS OR ACCIDENTS SO THAT STEPS MAY BE TAKEN TO PREVENT RECURRENCE

WE - have the responsibility for providing as safe working conditions as possible for you.

WE - have the responsibility for educating you as fully as possible to the potential hazards and of precautionary measures.

WE - have the responsibility of enforcing policies for safe practices. This manual is part of that effort.

SO

BE CAREFUL

FOR YOUR SAKE AND OURS

ACCESS TO STUDENT LABORATORY POLICY

Laboratory tasks and assignments are planned such that students should be able to accomplish the requirements within the time period of regularly scheduled laboratory sessions. However, if extenuating circumstances or other situations limit a student from completing assignments and gaining adequate competencies, the laboratory may be used outside of regularly scheduled times with certain provisions.

No procedure utilizing blood or body fluid specimens may be conducted outside of regularly scheduled laboratory sessions. A faculty/staff member must be present in the building during the time the lab is requested for use.

Students desiring access to the student laboratory outside of regularly scheduled laboratory sessions must have prior approval by the course instructor for each individual utilization. Once approval is acquired, students may obtain a key from the department secretary. The student is responsible for the security of the laboratory during the period of use. In other words, no other individuals are to be permitted entry without instructor approval.

By accepting entry into the student laboratory during periods outside of class, the student agrees not to tamper with or use other equipment or laboratory materials other than that necessary and/or as approved for the purpose of entry granted by the instructor.

For this policy, students must sign in and sign out using the form located with the department secretary. Instructor approval must also be acquired by signature.

ARMSTRONG ATLANTIC STATE UNIVERSITY

Medical Technology Department

ACCIDENT REPORT FORM

(A copy of this form is to be placed in student or employee file)

Name:

Date and time of accident:

Location of accident:

Description of accident: (If exposure to body fluid indicate type of fluid or material, severity of exposure, amount of fluid, source of material. Include names of others present):

Refer to Figure I on reverse and indicate EC, HIV SC and PEP recommendation

Post accident management, counseling and follow-up:

Person Completing Form:

Date:

Department Head Acknowledgement:

Date:

Reference: "PHS Recommendation for Management of Persons after Occupational Exposures that may Place Them at Risk of Acquiring HIV Infection". MMWR, January 26, 1990.

ARMSTRONG ATLANTIC STATE UNIVERSITY

MEDICAL TECHNOLOGY PROGRAM

Venipuncture/Fingerstick Report Form

Name : _____ Date: _____

Procedure: _____

Type of Specimen Collected: _____

Person Performing Procedure: _____

<p>Medical Technology Department Armstrong Atlantic State University Savannah, GA</p>	<p>Title: <u>HAND WASHING POLICY</u></p>	<p>Effective Date: 01/22/03 Page 1 of 2</p>
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Policy Statement:

It is the policy of Armstrong Atlantic State University's Medical Technology lab to provide access to hand washing facilities along with the proper hand washing agents. Armstrong Atlantic State University's Medical Technology program acknowledges hand washing as the most effective route in preventing and regulating the spread of infection.

Purpose:

To provide guidelines to follow in the student laboratory when cleaning hands and removing possible pathogenic organisms. This policy applies to Armstrong Atlantic State University's Medical Technology students and faculty.

Procedure:

1. Prepare paper towels to be used for drying.
2. Prepare a steady stream of warm, running water.
3. Acquire enough soap to make a healthy lather.
4. Rub hands together with solid friction. Keep hands pointed downward to keep from contaminating upper arms.
5. Wash all areas of hands – palms, fingers, thumbs, back of hand, and between fingers. Interlocking fingers will insure all areas are cleansed. Washing should continue up to 3 inches above wrist. Special attention should be given to rings and fingernails.
6. Continue firm scrubbing action for 10-15 seconds.
7. Rinse hands thoroughly in downward position. Unrinsed hands may contribute to chapping and irritation.
8. Dry all areas of hands and wrists well with prepared paper towels.
9. Use same paper towel to turn the water off. To avoid recontamination, do not touch sink, spigot, or knobs.
10. Discard used paper towels into trash.

Indications for Hand washing:

1. Before start of lab period and after lab period is complete.
2. After using restroom
3. After coughing, sneezing, or blowing nose.
4. If hands become visibly soiled.
5. After coming into contact with any potentially contaminated equipment or area.
6. After removing gloves.

Hand washing Agents:

1. Antimicrobial soaps.
2. Alcohol-based hand-wash gel. This should be used only when there is no visible contamination of hands. After 6 hand wash gel uses, the above soap and water hand wash procedure should be followed. Students must wash with soap and water before leaving the laboratory.

Note: When using alcohol-based hand gel, be sure to rub hands together thoroughly in a way that all surfaces are covered. The volume needed to reduce bacteria varies according to the product.

Hand washing Facilities:

1. There will be sufficient hand washing facilities provided in the lab. The stations will be designated as such and this will be communicated to the students.
2. The hand washing sinks will be readily available.
3. During a disaster or emergency in which running water is not available for hand washing:
 - a. The alcohol-based hand wash gel may be used in the meantime.
 - b. Hands should be washed with soap and water according to the above procedure as soon as possible.

References:

St. Joseph/Candler's Hand Washing Policy

CDC's "Hand Hygiene Guidelines Fact Sheet".
<http://www.cdc.gov/od/oc/media/pressrel/fs021025.htm>

Approved:

Dr. Hassan Aziz
Interim Department Head, Medical Technology Program

Review Date	Revision Date	Signature
8/4/04		L. Anderson
8/10/05		L. Anderson

Armstrong Atlantic State University

Medical Technology Department

Student Self-Testing Policy

Laboratory procedures require the use of patient samples in many forms, from plasma and serum to other body fluids. The use of any specimen is for educational purposes only. For certain procedures, it may be necessary to use student samples as patient specimens. If a student does not feel comfortable using their own sample for certain procedures, they do not have to submit their sample for testing. Due to the nature of the results obtained from some tests, we will not use student specimens for some procedures, especially hepatitis, HIV and urine drug screening.

Sometimes, students request to use their own samples for testing. Instructor approval must be obtained before this happens. During the testing of student samples, if any unusual results are obtained, bring it to the attention of a faculty member in privacy. Do not take it upon yourself to diagnose a medical condition.

Any results obtained are private and are to be held confidential. Do not share information about student or patient samples to others in or outside of the class.

APENDIX
Medical Technology Laboratory Safety Manual
Certification of Receipt

I, hereby, testify that I have read, understood and will abide by the policies and procedures outlined in the Laboratory Safety Manual and the NCCLS GP17-A Laboratory Safety document as found on the Medical Technology Department Web Page: www.medtech.armstrong.edu/students.html and have also been afforded an opportunity to ask questions and obtain clarification on the policies and procedures therein.

Signature: _____ Date: _____

I also testify that I have read (and posed any questions or concerns to program faculty) the current Material Safety Data Sheets in the notebook located in the student lab.

Signature: _____ Date: _____

I also testify that I have read (and posed any questions or concerns to program faculty) about the Student Self-Testing Policy.

Signature: _____ Date: _____

APENDIX
LABORATORY SAFETY EQUIPMENT ORIENTATION

I have been informed of the location of the following safety equipment/items

A. In the student laboratory:

1. Fire Extinguisher
2. Fire Blanket
3. Emergency Shower
4. Emergency Eye Wash
5. First Aid Cabinet
6. Chemical Absorbent Pillows
7. MSDS Notebook

B. In the building:

1. Fire Alarm
2. Electrical Circuit Breakers

Signature: _____

Date: _____