

**PBE STANDARD OPERATING PROCEDURE (SOP)**

**Title:**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Date:**  |   |   | **SOP ID:** |   | **Rev:**  |   |
| **P. Investigator:**  |   | **Building:**  |   | **Office:** |   |
| **SOP Author:**  |   | **Lab/space(s):** |   |  |   |
|  |  |  |  | (where procedure is performed) |
| **Chemical Name:** |   | **CAS No:** |   |   |   |
|   |  | (if applicable) |  | (if applicable) |  |   |
| **Date reviewed by the PBE Safety Committee:** |   |   |   |   |

1. **Scope and procedure summary**:

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| * 1. (Describe why the procedure is being performed and its applicability. Are there any **1.Regulatory concerns**? Provide a brief method/procedure summary.)
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1. **Definitions:**

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| 2.1. (Define any unfamiliar term or equipment.) |

1. **Individual or group training:**

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| 3.1. (Indicate the level of training required such as observation, then try with assistance followed by perform under supervision. How are **2.Human factors**, **12.Other high risk** concerns covered?) |

1. **Potential hazards:**

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| 4.1. (Provide a list of health and safety concerns. How are **2.Human factors**, **12.Other high risk** concerns covered?) |

1. **Personal protective equipment (PPE):**

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| 5.1. (Be specific, not just “Wear appropriate PPE.” Discuss how **3.Availability of PPE** will be addressed.) |

1. **Emergency response:**

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| 6.1. (Describe any **4.Emergency response** measures that should be considered.) |

1. **Equipment and materials:**

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| 7.1. (Provide a list. Address any **5.Facility**, **6.Materials**, **7.Equipment and labware**, **12.Other high risk** concerns.) |

1. **Specific procedure(s):**

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| 8.1. (Provide step by step course of action. Address any **8.Process**, **9.Effects of change**, **10.Additive effects**, **12.Other high risk** concerns andpotential hazards.) |

1. **Waste management:**

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| 9.1. (Describe how **11.Waste management** will be performed.) |

1. **References:**

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| 10.1. (Reference other written methods, procedures or guides when available, such as ASTM, TAPPI, MSDS, or other SOPs. Include specific section(s) and/or page(s). **Attach a copy to this SOP**.) |

1. **Training documentation:**

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| 11.1 (At a minimum, there should be a space for the trainer and trainee to print & sign their name and date that they have received training and understand this SOP.) |