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INTRODUCTION

LICENSES/ REGISTRATIONS

Case Western Reserve University maintains certificates of registration through:

The Department of Transportation (DOT)
The Ohio EPA for Hazardous and Infectious Waste
The United States Department of Agriculture (USDA) & Center for Disease Control (CDC)
The Department of Commerce

REGISTRATION #	CERTIFICATE OF REGISTRATION	EXPIRATION DATE	PURPOSE
052907-551-092P	US DOT Research & Special Programs	6/30/2011	Hazardous Waste Transport

The following premises are registered as generators of hazardous waste:

DOA990	Morley	Millis
University West	CCSB	Cedar Avenue Service Center
Wolstein Research Building (WRB)		West Campus (formerly Mt. Sinai)

SAFETY SERVICES PROGRAM: RESPONSIBLE PARTIES

MANAGEMENT

Safety Services provides support for the safe use of chemical, biological agents, physical, and construction concerns. The Department reviews procedures, responds to incidents involving chemicals and biological materials, and assesses the laboratory infrastructure to mitigate hazards to employees. The Department also monitors regulatory compliance through its inspection and audit activities. Departmental audits, Laboratory Safety Committee audits, and external agency audits (insurance and regulatory bodies) are used to promote compliance with Federal, State, and Local regulatory programs.

LABORATORY SAFETY COMMITTEE (LSC) PURPOSE

The Case Western Reserve University LSC serves as an advisory committee to the DOES. The LSC is comprised of faculty and staff appointed by the President to guide University programs in the safe use of chemical & biological materials. The LSC advises policies on laboratory safety to ensure compliance with all pertinent regulatory bodies [OSHA, EPA (Federal, State, Medical Waste), DOT, ODH, FDA, CDC, & USDA].

LSC RESPONSIBILITIES

The Laboratory Safety Committee is responsible for:

Reviewing and recommending laboratory safety programs to comply with regulatory requirements and sound risk management practices.
Consulting with faculty on safety issues related to chemicals, pathogens, and carcinogens; and in cooperation with the University's Biological Safety Committee, Recombinant DNA.
Assigning its members, or appropriately qualified non-members, to serve as advisors in specific chemical and biological safety areas.
Conducting audits to assess the effectiveness of DOES laboratory safety programs and procedures.
Approving DOES chemical & biological safety programs as required that are amended following audit recommendations.
Reviewing laboratory activities that may be of concern to the public.

SUBCOMMITTEES

The Laboratory Safety Committee reviews activities of five subcommittees:

Institutional Review Board for Human Studies
Institutional Biological Safety Committee (Recombinant DNA)
Institute of Animal Care & Use Committee (IACUC) (Pathogen Safety in Animals)
Carcinogen Use Committee (Carcinogen Safety in Animals)
Select Agent Use Committee (Etiological/ Animal/ Plants/ Humans)

Exogenous Substance (including Biohazardous Materials and Volatile Anesthetics) Administration - Attachment H	3	25	0	0	0
TOTAL	59	96	43	52	81

LSC MEMBERSHIP

The 2009-2010

During the 2009/2010 fiscal year covered by this report, the Committee met on one occasion. Major topics considered by the LSC included:

Review of Previous Meeting Minutes
Presentation of DOES Safety Services Annual Report
2009/2010 LSC Audits
Critical Needs Assessment
Laboratory Safety Manual Review
Sample of Combined Chemical Hygiene & Exposure Control Plans
Call for volunteers to join the Carcinogen Use Committee for IACUC
Fady Faddoul now sits on Pathogen Committee
Update of HP Assist Database
MFL Improper Disposal of pH Waste to the Drain
Machine Guarding Inventory complete for Engineering, Next Arts/Science
LSC meeting will decrease from 3 times per year to 2 times per year

Lab Safety during Pregnancy
Where is DOES?
Proper Disposal of Your Empty Chemical Bottles
Modification to the Process of Collecting Animal Carcasses
Why Wear a Laboratory Coat?
H1N1 Reminders—Staying Educated and Taking Necessary Precautions
Safety Goggles and Glasses: Keeping Them Clean
State of Ohio Waste Log Requirement Reminder
Make Your Own Material Safety Data Sheet (MSDS)
Biological Safety Cabinet (BSC): Certification Reminders
―For the Want of a Nail… the Kingdom Was Lost‖ —Taking Care of Your Fume Hood
Holiday Decorations: Play It Safe
Laboratory Plastics—Creating a Sustainable Environment
Controlling Laboratory Ergonomic Risk
Researche1daic Risk

MONTH	NEW EMPLOYEES
7/2009	39
8/2009	61

CHEMICAL SAFETY AWARENESS TRAINING

Several general awareness classes for target groups such as the Animal Resource Center (ARC) and Housekeeping were conducted. These groups may enter specialized laboratories on a daily basis and thus require training specifically tailored to their work.

LABORATORY SAFETY TRAINING

Laboratory Safety Training is given to all personnel who work in laboratories. Several specialized Laboratory Safety classes for specific target groups included medical and dental students, Macromolecular Science and Chemical Engineering personnel, and the National Youth Sports Program (NYSP), Summer Program in Undergraduate Research (SPUR), Summer Undergraduate Research Program (SURP), Upward Bound, Center for Layered Polymeric Systems (CLIPS), and Equinox Summer Programs.

The University's temporary worker service, Kelly Services, trains temporary employees using SSOF training documents in Laboratory Safety and Bloodborne Pathogens as part of this program.

BLOODBORNE PATHOGEN TRAINING (BBP)

Materials containing and/or likely to contain Bloodborne Pathogens (HIV, Hep B) are widely used in the University laboratories. BBP training includes compliance awareness and implementation of required vaccination and health monitoring programs.

BIOLOGICAL SAFETY LEVEL 3 (BSL3) TRAINING

Extensive training is required for Select Agents used on the University's campus. A training course was created for individuals who enter the BSL3 facility to use these agents.

DOT/IATA SHIPPING TRAINING

Personnel who prepare materials for shipment regulated by the Department of Transportation's Pipeline and Hazardous Safety Administration (PHMSA) or the International Air Transport Association (IATA) are trained every two years as mandated by these agencies using training materials prepared by DOES. These shipments are principally Biologicals and include IATA-defined Infectious Substances.

RESPIRATOR TRAINING

Special training sessions for Facilities Services, Animal Resource Center (ARC), and BSL3 Facility employees were conducted. This training was augmented, as required by OSHA, with medical evaluations and respirator fit testing. Contractors were required to be trained by their employers before entering the BSL3 and ABSL3 facilities.

VEHICLE SAFETY TRAINING

Vehicle Safety Training is presented on an as needed basis. DOES conducted 28 Drivers Safety Training classes for Case employees and the summer help staff, training a total of 90 people.

FACILITIES SAFETY TRAINING

Training for Facilities Service personnel is conducted on a scheduled basis. Topics include:

Slips, Trips, and Falls/ Ladder Safety
Personal Protective Equipment
Confined Space Entry
Radiation Safety
Lockout/ Tag out
Workplace Cleanliness
Hot Work Permits
Powered Industrial Pallet Jacks
Powered Industrial Lift Truck
Hearing Conservation Training & Testing

These sessions are scheduled to accommodate all Plant Services shifts. Three training sessions were developed and offered for Plant personnel every month.

CONTRACTOR TRAINING

To ensure that University Community members and Laboratory personnel are not exposed to hazardous conditions on the campus during construction and repair activities, a variety of training programs support construction work on the campus. Specific training includes confined space, hot work, tow motor, and ladder safety.

FACILITIES AND EQUIPMENT

The University administration and the LSC ensure that all facilities, equipment, and personnel are available and adequate for the safe operation, storage, and disposal of hazardous material. The SSOF is also responsible for reviewing regulated safety infrastructure and inspection of all facilities and equipment where chemical and biological materials are used. Facilities that are available at the University for activities involving use of hazardous materials include:

AW Smith

chairperson for follow up. Programmatically, repeated issues that are not addressed by the investigator or chairperson can be referred to the Deans or Provost for further action, but these measures are rarely required. Inspection statistics for 2009/2010 are presented in Table 8 of the Appendix.

Safety problems found during the 2009 inspections were followed-up and audited to increase compliance. In 2010, inspections have demonstrated that this procedure achieved better compliance and resulted in fewer repeat violations.

SPECIFIC SAFETY PROGRAMS

OSHA LABORATORY PERFORMANCE STANDARD

The OSHA Laboratory Performance Standard requires compliance with a number of specific programs and procedures.

MATERIAL SAFETY DATA SHEET (MSDS) PROGRAM

MSDS are available on-

Agent-specific sampling plans are utilized for the medical, dental, biology, and nursing anatomy laboratories. Formaldehyde vapor samples are periodically carried out for Anatomy laboratories. The samples collected provided analysis of Short Term Exposure Limits (STEL) and Time Weighted Average Permissible Exposure Limits (TWA-PEL). Anatomy laboratories used virtual examination of the body over the past year. Formaldehyde monitoring was performed in Robbins Building Gross Anatomy rooms: E20, E329, and E330. Measured exposure levels were below the OSHA permissible exposure limit (PEL) and short term

g. Air monitoring was performed in School of Nursing office room NOB150 in regards to an air quality concern. Measurement results indicated no exposure issues. Air vent and ducts were cleaned. A follow-up indicated occupants are satisfied.
h. Carpet cleaning was performed in Sears Tower office room T308 in regards to the occupant's allergy like symptoms. Occupant's symptoms cleared up after the cleaning.
i. Carpet cleaning was performed in Sears Tower office room T403 in regards to the occupant's allergy like symptoms. Occupant's symptoms cleared up after the cleaning.
j. An evaluation and recommendations were made about a moldy book collection in the Kelvin Smith Library.
k. Moldy ceiling tiles in Wickenden Building room 131 were treated with a disinfectant.

ENVIRONMENTAL MONITORING

The complexity of water quality assessment is reflected in current required monitoring and wastewater quality indicators. These measurements include:

Total suspended solids (TSS)
Dissolved metals and salts
Microorganisms such as fecal coliform bacteria
Dissolved metals and metalloids
Heavy Metals

Some of simple measurements can be made on-site (temperature, pH, dissolved oxygen, conductivity), directly at the site of the water source in question. More complex measurements must be made in a laboratory setting that requires a water sample to be collected, preserved, and analyzed at another location.

Required environmental sampling protocol ensures collection of samples from various media in a timely manner (e.g., soil, surface water, ground water, and containers). All environmental sampling is addressed on a case-by-case basis. The following drinking water investigation was performed.

a. Water samples were taken from Mandel Center drinking fountains and analyzed. No maximum contaminant levels were found.

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ANESTHETIC GAS MONITORING PROGRAM

Concerns about anesthetic gas exposures led to development and implementation of an anesthetic gas-monitoring program. The anesthetic gas and vapors that leak into work areas during medical procedures are considered waste anesthetic gases. People who work in hospitals, operating rooms, dental offices and veterinary clinics, can be exposed unnecessarily to harmful levels of waste anesthetic gases. The waste anesthetic gases and vapors of concern are nitrous oxide and halogenated agents (vapors) such as halothane, enflurane, methoxyflurane, trichloroethylene, and chloroform. Some potential effects of exposure to waste anesthetic gases are nausea, dizziness, headaches, fatigue, and irritability, as well as sterility, miscarriages, birth defects, cancer, and liver and kidney disease.

In locations where anesthetic gases are used and employees are at risk for exposure to waste anesthetic gases, exposure may be assessed and/or controlled by some or all of the following:

Effective anesthetic gas scavenging systems that remove excess anesthetic gas at the point of origin

poisoning. The EPA will not take enforcement action for violations of the new Lead Renovation, Repair, and Painting (RRP) Rules' firm certification requirement until 10/1/2010.

Almost a million children have elevated blood lead levels as a result of exposure to lead hazards, which can lead to lower intelligence, learning disabilities, and behavior issues. In addition, adults exposed to lead hazards can suffer from high blood pressure, headaches, and memory loss. Children under six years old are most at risk. EPA announced these three actions:

A final rule to apply lead-safe work practices to all pre-1978 homes, effectively closing an exemption that was created in 2008.

A notice of proposed rulemaking to require dust-wipe testing after most renovations and provide the results of the testing to the owners and occupants of the building. For some of thes

BIOSAFETY CABINETS AND LAMINAR FLOW HOODS

Biosafety cabinets (BSC) and Laminar Flow hoods were certified through a contracted company, Laboratory Certification Services (LCS). The laminar flow and Biosafety cabinets are recertified at a cost of $95/laminar flow hood and $125/hood/biosafety cabinet. PIs are notified annually to re-certify their hoods. An online database on the DOES website allows the researcher to sign up for re-certification or repair of their laminar flow hoods and Biosafety cabinets.

BIOHOODS	09/10	08/09	07/08	06/07	05/06	04/05
RECERTIFY	326	253	181	234	274	142
REPAIR	6	88	51	25	31	16
TOTAL	332	341	232	259	305	158

CLEARANCE/ RELOCATION PROGRAM

The

RESPONSE EQUIPMENT

All emergency response vehicles and response equipment are checked and maintained regularly. Table 16 of the Appendix illustrates equipment that supports response readiness at Case Western Reserve University and supplies kept on hand for these purposes.

Other forms of response equipment have been incorporated into the inventory such as tack cloth for powder clean up and mercury thermometer containment tubes. Personal Protective Equipment (PPE: goggles, gloves, N95 respirators and chemical respirators) has also been evaluated for adequacy and the types of materials kept on hand were augmented to increase response capabilities.

BIOLOGICAL SAFETY

BSL-3 FACILITIES

In the aftermath of September 11, 2001, the Patriot Act was enacted to protect against bio-terrorism. Two federal agencies are under its auspices, the Center for Disease Control (CDC) and the US Department of Agriculture (USDA). The Departments of Health and Human Services (HHS) and the USDA have promulgated rules in the Federal Register governing facilities that possess, use, or transfer select biological agents or toxins that became effective on February 7, 2003.

SELECT AGENT PROGRAM

Currently there are two Biological Safety Level-3 (BSL-3) facilities for prion research (one for molecular and biochemical research, and one for animal research); a specifically equipped BSL-2 facility for prion research, as well as one BSL-3 facility for other potentially dangerous agents including HIV and Mycobacterium Tuberculosis. There were no researchers added over the last year that are using a select agent in a regulated quantity.

A specific Biosafety Committee was formed as an oversight committee. The Responsible Official (RO) is the Vice President of Campus Planning and Operations at the University. The Assistant Responsible Official (ARO) is the Biological Safety Officer for DOES. The Biological Safety Officer (DOES Director) also sits on the following committees: Select Agent Committee, ABSL3 Committee, Institutional Biosafety Committee (IBC), Institutional Health & Safety Committee, the University Compliance Committee, 2 BSL-3 Advisory Committees, the Task Force on Avian Influenza Preparedness, and has been Chair of the Bio-defense and Emerging Diseases Task Force. The Biological Safety Officer also sits on the IACUC, IBC, and the Avian

Card swipe entry security at the entrance of the laboratory
A second card swipe system for the isolation laboratory
A third locked location for storage of BSE materials within the laboratory

An internal audit of the files is conducted once a year.

DOES, in cooperation with Property Management also inspects University-owned rental properties annually. The DOES further inspects Underground Storage Tanks (UST) that may be found on properties owned by the University. One UST is housed at the Wolstein Research Building. City inspectors inspect this UST biyearly. These inspections address potential code violations as well as fire/life safety hazards and general liability issues. Recommendations for correction/ improvements are made as necessary and response is timely.

<u>REMEDIAL SERVICES</u>

The Physical Safety Specialist incorporates on-site problem solving in all areas of physical safety. The DOES received many calls for help in solving on-site problems such as means of egress issues, ergonomics, noise problems, and lighting problems. These issues are addressed as needed.

ERGONOMIC EVALUATIONS

LIGHTING PROGRAM

The Safety department, on an as needed basis, conducts primary lighting measurements to evaluate lighting in work environments for adequacy. Measurements are compared to the OSHA/ANSI Standards. Recommendations are made to improve lighting quantity and quality. No lighting assessments were conducted this year.

PLANT SAFETY

The DOES Plant Safety Specialist met monthly with the Zone Safety Committee to address unusual problems and individual problems and concerns. Several pieces of safety equipment are distributed to plant personnel as needed.

The Plant Safety Specialist is always available to plant personnel during all hours of the day or night. Means of communication include pagers, cellular phones, and radios. Mutual Training with the Cleveland Fire HAZMAT Unit was used over the past year to enhance Plant service‘s employees‘ knowledge of fire department procedures and protocols.

PLANT SAFETY MANUAL

A Plant Safety Manual has been compiled, published, and distributed by DOES. This manual includes safety considerations, pertinent situations and topics regularly faced by plant maintenance workers.

PROGRAMS

Job Safety Analysis allows the Plant skilled tradesmen to be more efficient and safety oriented. DOES is continually developing Standard Operating Procedures for safe operation in each relevant plant safety area.

EXHAUST FAN MAINTENANCE

There were 21 shutdowns of the fan exhaust in Medical School, BRB, RT, Millis and WRB. All

interface between Plant, Construction Administration, Technical Assurance, and outside contractors on safety related issues has aided in the efficient and safe conclusion of projects.

Contractor Safety Awareness training includes all types of contactors and personnel that carry out construction on CASE property. There were 59 classes for 80 different outside contractors conducted and this program informed three hundred fifty six (356) outside contractors.

EPA AND WASTE DISPOSAL PROGRAM

<u>ENVIRONMENTAL RELEASES</u>

The Northeast Ohio Regional Sewer District (NEORSD) requires semi-annual reports as part of Best Management Practices (BMP) for minimization of mercury discharge from dental offices to the Cleveland sewer system to a regulatory level of 25 parts per trillion. CASE‘s sewer releases were in compliance with both federal and state regulations. In the past fiscal year, the report for January through December 2009 was filed on February 2010.

No water testing of boilers for nitrates and nitrites was performed in the dormitories this fiscal year. The current design of the boiler alleviates the requirement for sampling.

Overall, waste collection at CASE continued to increase during the 2009-2010 fiscal year. The ability of the Chemical Analytics contractor to perform de-activation of Peroxides, Picric acid, and Perchloric acid reduces the intrinsic cost of disposing of this material and represents a significant cost savings. Most importantly, reduction in hazard through on-site performance of waste handling complies with OSHA requirements.

A regular audit of all manifests is routinely carried out to ensure all manifest records are complete before the 42-day time limit impact by EPA regulations. Approximately 902 Hazardous Waste Forms from 2009-2010 were scanned into the database and organized into folders on the server. The number of bottles listed on the forms vary from one bottle to several bottles per pickup. The scanned forms were then verified against the Hazardous Waste Log Book for discrepancies.

<u>TREATED INFECTIOUS WASTE</u>

Treated Infectious waste at CASE is treated by autoclaving before landfill disposal. Autoclave Certification was first completed for disposal of biohazardous waste in November of 2003. Elements of this disposal program include ongoing Validation Testing and Quality Assurance Testing of the autoclave. These tests use test packs to assess sterilization following autoclaving under standard conditions. The samples are then incubated for 24 hours, 48 hours, and one week. Growth in any of the samples would indicates failure of the decontamination process and reassessment of the autoclaving procedures Records of autoclave certification are kept both in hard copy and an electronic database on the DOES Server.

Quality Assurance Testing is carried out once a month to ensure the autoclave unit is functioning properly. An average of 1015 loads were treated per month equaling 13,720 cubic feet of infectious waste. Infectious waste treated in the SaniPak Autoclave equaled a total

WASTE DISPOSAL

Hazardous waste rooms are used as central collection points for what the EPA defines as a site. CASE presently has 8 sites. CASE also operates 90-day waste accumulation areas that are inspected on a weekly basis. The accumulation areas are located at DOA990, Millis G35, and WRB 1103.

The hazardous waste disposer was Chemical Analytics for Hazardous Waste, PCB material, Batteries, Non-PCB Ballasts, and Mercury. Disposal site waste distribution and recycling are shown in Table 18 & 19 of the Appendix.

MANAGEMENT CENTER WASTE DISTRIBUTION

MANAGEMENT CENTER	ARTS/ SCIENCE	ENGINEERING	DENTAL SCHOOL	MEDICAL SCHOOL
WASTE COST	$47,644	$58,312	$4,633	$446,712

WASTE COST	09/10	08/09	07/08	06/07	05/06	04/05	03/04	02/03
ARTS/ SCIENCE	47,644	112,782	105,197	54,950	47,250	41,746	51,961	112,064
ENGINEERING	58,312	34,019	56,876	41,808	28,485	64,292	37,952	71,723

REGULATORY INTERACTIONS

EPA/ RCRA INSPECTION

The following Environmental Protections Agency/Resource Conservation & Recovery Act (EPA/RCRA) inspections took place during 2009/2010:

9/25/2009 – COMPREHENSIVE QUARTERLY INSPECTION OF AUTOCLAVE UNIT

There were no violations notes during this inspection.

12/10/2009

CLEARANCE

LSC AUDIT COMMENTS

The program was found to be in good order. SOP was updated March 11, 2010. 158 clearances were performed during the first six months of this year. They were timely and the system is managed electronically.

SSOF RESPONSE

No response required.

REGULATED CHEMICALS

LSC AUDIT COMMENTS

25 regulated chemicals are overseen, with an extensive SOP for each chemical. There were no recorded spills, exposure problems, or incidents involving these chemicals. The program relies on a voluntary survey with partial compliance. Several procedures involving formaldehyde are thought not to be registered. Suggestion for improvement is to include regulated chemicals in regular chemical training and routine laboratory inspections.

SSOF RESPONSE

Regulated chemicals are currently discussed during Laboratory Safety trainings and during laboratory inspections.

INCIDENT REPORTS

LSC AUDIT COMMENT

Incidents reviewed did not include injuries or involvement of blood borne pathogens, toxins, select agents, or bioterrorism events. These are recorded separately. The SOP was current. There were 97 incidents during the prior 12 months, a number similar to previous years. All incidents were handled appropriately on-site with local resources, with good documentation.

SSOF RESPONSE

No response required.

WEBSITE ACCURACY

LSC AUDIT COMMENT

The web-site was found to be effective and user-friendly. Minor issues involve dating of the Chemical Hygiene Plan and the Laboratory Manual, and misspelling of tetrahydrofuran in the Laboratory Self-inspection form.

APPENDIX

TABLE 1 - Training and conferences attended in 2009-2010 included:

Confined Space Entry
IATA Course
OSHA 30 hour Course
Ohio Asbestos Building Inspection Certification
Advanced Industrial Hygiene Course
Advanced Toxicology Course Environmental Remediation Course
Ohio Asbestos Management Planner Certification
Asbestos Building Inspector Certification
Asbestos Management Planner Certification Refresher
Ohio Asbestos Project Designer Certification

TABLE 5 - Compliance Issues Addressed by Employee Compliance Committee (ECC)

YEAR	COMPLIANCE ISSUES
2010	Eating/ Drinking/ Smoking/ Personal Protective Equipment Issues Emergency Scenario for Senior Administration held 1/7/2010 Demonstration of new features on DOES Website Minors/ Volunteers/ Visitors Guidelines Temporary Employment Human Resources Supervisory Briefing of Employment Legal Updates Review of DOES Annual Reports Laboratory Safety Inspections – Phase I Human Resources Briefings of Documenting Performance/ Behavior Problems HP Assist Laboratory Safety Inspections – Phase II Biohood Audit Cylinders DOES name change to EHS Executive Director Resignation
2009	Distribution of both Radiation Safety & Safety Services Annual Reports DOES conducts Ergonomic Assessments CASE employees at the VA Hospital Kelly Services employees at the VA Hospital Rabies vaccine shortage DOES/UH Safety Roundtable – 1/28/2009 OSHA final rule for Personal Protective Equipment (PPE) – 12/12/2008 DOES Strategic Plan Research of Policy on Reproductive Protection Employee Relations will assist Bureau of Workers Compensation claims Kelly Services will send Kelly employee injury log to DOES for tracking Animal Resource Center inspection on 2/24-26/2009 by AAALAK Accreditation went well
2008	New DOES Safety Inspection Enforcement Policy New DOES Policy on Minors, Volunteers, & Visitors 2008 DOES Laboratory Inspection Schedule Phase 2 – Satellite CASE Facilities Kelly Services reviewing new training modules for Kelly employees Irradiators personnel must now be fingerprinted CLIPS Program has six students for the Summer List of CASE employees working at NASA New Job Exposure Checklist New Faculty Checklist 2008 DOES Laboratory Inspection Schedule Phase 3 – Medical Complex DOES Peer Review on 9/29-30/2008 went well Research Administration Department Reconstruction

TABLE 6 - Historical Training Trends

TRAINING	09/10	08/09	07/08	06/07	05/06	04/05	03/04	02/03
Hazard Communication	601	791	481	197	118	276	272	52
Laboratory Safety	2602	2581	2032	2364	1884	1754	753	940
Regulated Chemical	1375	1163	868	1720	0	0	0	0
Bloodborne Pathogen	2093	2036	1396	1400	1330	1001	859	910
Respirator	483	481	177	44	103	73	118	70
Vehicle Safety	149	118	94	156	98	128	135	0
Fire Extinguisher	0	0	0	75	75	72	60	0
Plant	600	600	600	70	240	280	282	0
BSL3	78	78	30	29	38	39	49	0

TABLE 7 - Calibrated Instruments

INSTRUMENT	MODEL	SERIAL #	FREQUENCY	NEXT DUE
High flow Impactor Pump	10-709	1298-2617	Annually	Out of Service
Mini-Buck Calibrator	M-30	M-5648B	Annually	11/16/2010
Mercury Vapor Ana				

SPECIAL EQUIPMENT ON-HAND INCLUDES:

Gloves (Boxes)

Nitrile gloves (8)
Silvershield glove liners (20)
Viton gloves (1)
Silver shield gloves (1)
Butyl rubber gloves (1)
PVA gloves (1)

Suits (Boxes)

Tyvek suits, white (8)
Saranex suits (1)
Kappler training suits, blue (3)
Tyvek QC suits (3)
Kappler vapor suit ~~All~~ (2)
Polycoat overalls (35)

Foot Protection (Pair)

Tyvek polycoated booties (24)
Tingley ER orange boots (3)
Hazmat boots (4)
Rainfair ER yellow boots (2)

Eye Protection (Each)

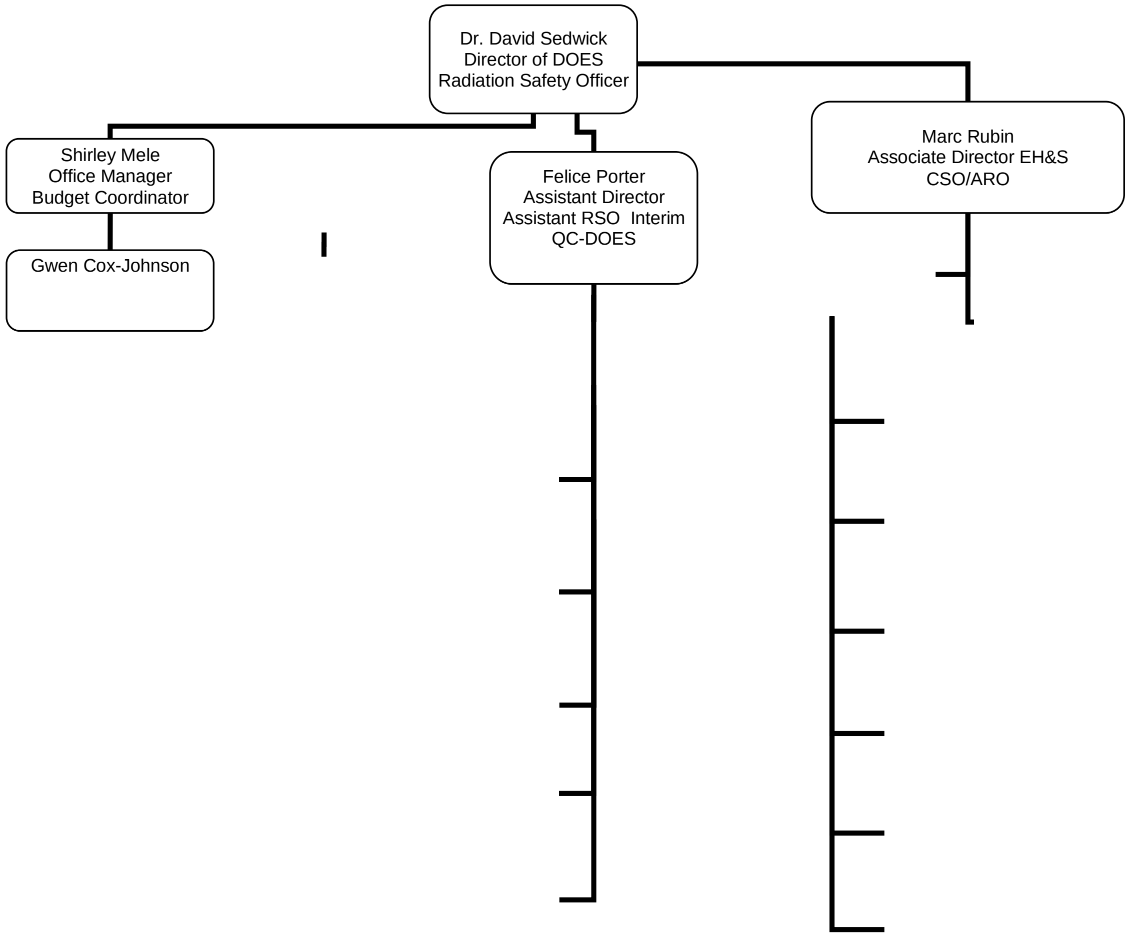
Face shields (2)
Safety glasses (5)
Flexi-Filters P100 (21)

Respirator (Each)

Full face respirator 3000 series (1)
N95 Respirator (80-100)

TABLE 17 - Construction Projects Inspection for 2009/2010

Wood HG00 Lab Renovation
Wood Lab WG4 Mold Remediation
Wood HG 1 Cold Room Mold Remediation
Wood WG 12 Lab Reno
Wickenden Lab 433/435 Lab Renovation
Fribley 2nd floor Office renovation
Health Service 1st and 2nd Floor Renovation
Wolstein Hall Renovation
Bingham Room 34 Mold Remediation
Bingham Room 311 Mold Remediation
Bingham Structures Lab Lead paint Remediation - Basement
Dennison Music Room ACM Assessment and Remediation
Gund Law School Mold Remediation Room 215
Gund law School Rest Room Renovation
Hayden Hall Room 402/403 ACM Abatement
Leutner Receiving Dock Oil Spill and Remediation
Mather memorial ACM abatement in Room6A
Med East Atrium Lobby ACM Abatement
Med east Room 715/715A ACM Abatement
Bolton School of Nursing Lab Renovation - NOB080 _ACM
Bolton School of Nursing Room 250 -Renovation
Bolton School of Nursing - Room 216 - Environmental Assessment
Pathology Rooms 27,28,29,30 and 31 Environmental Assessment
Presidents House Bath Room renovations
Perceptis House Environmental Assessment
Sigma Nu Fire Damage and Environmental Assessment
Sears Building - kalis Hall Renovation
Sears Building Room 357 Renovation
The Temple Project and Environmental Assessment Survey


Dr. David Sedwick
Director of DOES
Radiation Safety Officer
Shirley Mele
Office Manager
Budget Coordinator
Gwen Cox-Johnson
Felice Porter
Assistant Director
Assistant RSO Interim
QC-DOES
Marc Rubin
Associate Director EH&S
CSO/ARO