

Safety Documentation

Please select the forms you require by selecting the check boxes below.
You can select more than one.

Process Risk Assessment **Method Statement** **Chemicals COSHH**

Once you have made your selections, scroll down and complete the forms.

Buttons: [+] will add a row to a list [- X] will delete a row from a list

You may save this file to a local drive at any time.
When you have finished, save the file to a local drive and email it to your supervisor for authorisation.

Supervisors - There is a sign-off section at the end of the document set that must be completed.

Staff may "self authorise", (as a supervisor), but the forms must still be submitted to the DSO for approval.

IMPORTANT:

YOU ***MUST NOT*** START ANY PRACTICAL WORK UNTIL THESE FORMS HAVE BEEN RETURNED TO YOU
WITH **BOTH** YOUR SUPERVISOR'S AND DSO'S APPROVAL SIGNATURES ATTACHED.

Please complete these fields

School or Service	Wolfson School of Mechanical, Electrical and Manufacturing Engineering
Department	CBE H25
Originator name	Keiron M Morris
email address	k.m.morris2@lboro.ac.uk
Location	CBE, Door H, Charnwood Building, Holywell Park
Project / Activity / Task	Decellularisation of Porcine Corneas
Supervisor Name	Dr Samantha L Wilson, Prof John R Tyrer

CBE H25



COSHH Form

 Reference


 Location

 Originator

 Project / Activity / Task

CHEMICAL NAME	 	Hazard Rating	<input type="checkbox"/> X	
Sircol Soluble Collagen Assay Kit		High		OVERALL RISK: Medium
CAS No. <input type="text"/>	Amount used <input type="text"/> g	Exposure Potential		
W.E.L. (Itel / stel) <input type="text"/>	Period of use (hrs) <input type="text"/>	Low		
	The process is: <input type="text" value="Closed"/>	<input checked="" type="checkbox"/> Eyes <input checked="" type="checkbox"/> Skin <input type="checkbox"/> Inhaled <input type="checkbox"/> Ingested		
	Physical State: <input type="text" value="Non-Volatile Liquid"/>			

Hazard Statement and Description	Precaution Statement and Description	+
H314 Causes severe skin burns and eye damage.	P264 Wash ... thoroughly after handling.	X
H318 Causes serious eye damage.	P280 Wear protective gloves/protective clothing/eye protection/face protection.	X
H226 Flammable liquid and vapour.	P301 + P330 + P331 IF SWALLOWED: rinse mouth. Do NOT induce vomiting.	X
No Hazard Statements applicable	P305 + P351 + P338 IF IN EYES: Rinse cautiously with water for several minutes. Remove	X
No Hazard Statements applicable	P501 Dispose of contents/container to accordance with national regulations	X
How will the precautions listed above be implemented?		
To be used within a Class II Lab, within a Biological Safety Cabinet and will be used in accordance with the manufacturer's instructions.		
Special Storage and Containment Measures	Disposal Method	+
	Aqueous waste - Check with Technician or Supervisor	X
How will spillages be dealt with?		
Spill kit		

CHEMICAL NAME		Hazard Rating	<input type="checkbox"/> X	
Blyscan sGAG Assay Kit		Medium		OVERALL RISK: Low
CAS No. <input type="text"/>	Amount used <input type="text"/> ml	Exposure Potential		
W.E.L. (Itel / stel) <input type="text"/>	Period of use (hrs) <input type="text"/>	Low		
	The process is: <input type="text" value="Closed"/>	<input checked="" type="checkbox"/> Eyes <input checked="" type="checkbox"/> Skin <input type="checkbox"/> Inhaled <input type="checkbox"/> Ingested		
	Physical State: <input type="text" value="Non-Volatile Liquid"/>			

Hazard Statement and Description	Precaution Statement and Description	+
H315 Causes skin irritation.	P264 Wash ... thoroughly after handling.	X
H319 Causes serious eye irritation.	P280 Wear protective gloves/protective clothing/eye protection/face protection.	X
No Hazard Statements applicable	P302 + P352 IF ON SKIN: Wash with plenty of soap and water.	X
No Hazard Statements applicable	P305 + P351 + P338 IF IN EYES: Rinse cautiously with water for several minutes. Remove	X
How will the precautions listed above be implemented?		

COSHH Form (Continued)

To be used within a Class II Lab, within a Biological Safety Cabinet and will be used in accordance with the manufacturer's instructions.		+
Special Storage and Containment Measures	Disposal Method	+
Aqueous waste - Check with Technician or Supervisor		x
How will spillages be dealt with?		
Spill kit		

CHEMICAL NAME		Hazard Rating High	OVERALL RISK: Medium
DNeasy Blood & Tissue Kit (50)			
CAS No. <input type="text"/>	Amount used <input type="text"/> g	Period of use (hrs) <input type="text"/>	The process is: <input type="text"/>
W.E.L. (l/ tel / stel) <input type="text"/>		Physical State: <input type="text"/>	<input checked="" type="checkbox"/> Eyes <input checked="" type="checkbox"/> Skin <input checked="" type="checkbox"/> Inhaled <input checked="" type="checkbox"/> Ingested
		Exposure Potential Low	

This chemical has a high health risk associated with it.

Hazard Statement and Description	Precaution Statement and Description	+
H315 Causes skin irritation.	P280 Wear protective gloves/protective clothing/eye protection/face protection.	x
H319 Causes serious eye irritation.	P261 Avoid breathing dust/fume/gas/mist/vapours/spray.	x
H317 May cause an allergic skin reaction.	P284 Wear respiratory protection.	x
No Hazard Statements applicable	P304 + P340 IF INHALED: Remove victim to fresh air and keep at rest in a position com	x
H302 Harmful if swallowed.	P342 + P311 If experiencing respiratory symptoms: Call a POISON CENTER or doctor/p	x
H332 Harmful if inhaled.	No Precaution statements applicable	x
H334 May cause allergy or asthma symptoms or breathing difficulties i	No Precaution statements applicable	x
No Hazard Statements applicable	No Precaution statements applicable	x
No Hazard Statements applicable	No Precaution statements applicable	x

Justify the use of this chemical: The chemical that has a high health risk associated with it is used in combination with other chemicals as part of a DNA quantification kit. Therefore, manufacturer's instructions will be used to preform the assay.

How will the precautions listed above be implemented?

To be used within a Class II Lab, within a Biological Safety Cabinet and will be used in accordance with the manufacturer's instructions.

Special Storage and Containment Measures	Disposal Method	+
Aqueous waste - Check with Technician or Supervisor		x
How will spillages be dealt with?		
Spill kit		

COSHH Form (Continued)

+ Add another chemical

Statement of work (Process to be undertaken)

Corneal enucleation (removal of the eye) to be performed at abattoir, on food-grade pigs. Porcine globes are to be collected e

1. In a vacuum-sealed packaging or;
2. In pre-prepared and pre-supplied PBS & 2% v/v A&A solution.

The following standard laboratory procedures will be used:

1. Sterile medium and medium supplements will be prepared as per manufacturer's instructions within a Class II Biological Safety Cabinet
2. The use of the autoclave to sterilise lab-ware and to decontaminate biological waste.

Show image

Personal protection requirements not covered in the precaution statements above.

Minimal quantities of reagents to be used, all at low concentration. All decellularisation steps to be performed in sealed vessels

Sources of information and references

Sircol kit information, safety and MSS

Reference to **existing approved** Risk Assessment

With the current controls, the risk of using these chemicals is: Medium

Supervisor to check that the process involving the safe use of these chemicals has been satisfactorily evaluated

Supervisor and Departmental Safety Office (DSO) Sign-off.

Supervisors

Please check the documents above and if you want to approve them:

- 1) Electronically sign this document
- 2) Save it to a local drive (You will be prompted to do this)
- 3) eMail the signed document to the DSO.

DSO

Please review the documents above and if you want to approve them:

- 1) Enter the reference numbers as appropriate
- 2) Electronically sign this document
- 3) Save it to a local drive (You will be prompted to do this)
- 3) eMail the signed document to the originator

IF YOU DO NOT WANT TO AUTHORISE THE FORMS,

Please do not sign the form, but click the "Not Approved" check-box and return it to the originator by email stating why and what you expect them to do to put it right in the comments box below.

Not Approved

Supervisors Signature

Form Reference Numbers

Risk Assessment

Method Statement

COSHH Assessment

CBE 305-307

DSO Signature

This document set must be reviewed and re-approved at the following times:

- 1) After the first occurrence of the activity described above (Review only)
- 2) After any change to the procedure or reagents used
- 3) After any incident resulting from this activity
- 4) At least annually from the date of approval

Next Review:

09/06/2020

Review comments