

### Oxidizer Use

Standard Operating Procedures for Chemicals or Processes	
1 Process (if applicable)	Oxidizers - use and storage - including the following: ( <i>This SP is not suitable for Perchlorate acid or HF acid.</i> ) * _____ _____
2 Chemicals	Oxidizers such as dichromates, permanganates, sulfurics, or perchlorates may cause skin irritation or sensitization. Besides these hazardous properties, many oxidizers may present fire and explosion hazards.
3 Environmental / Ventilation Controls	Volatile oxidizers should be dispensed in a fume hood.
4 Personal Protective Equipment (PPE)	Wear chemical splash gloves and heavy duty nitrile or neoprene gloves. Call UW Safety ( 307-766-3277) for further information if needed. A lab coat or apron is recommended for personal protection and is required when dispensing or cleaning up a spill of a quantity greater than 1 liter of liquid or 0.5 kg of a solid.
5 Special Handling Procedures & Storage Requirements	Store separate from organic compounds, flammable materials, metals, and other easily oxidizable materials; do not use metal containers. Do not use metal containers for oxidizer storage. Storage location * _____
6 Spill and Accident Procedures	Absorb a liquid spill with suitable diatomaceous earth or universal spill pads, except for concentrated nitric acid. Neutralize concentrated nitric acid with copious amounts of baking soda. Place used absorbent materials in plastic containers.
7 Waste Disposal	Label with Hazardous Waste Label, accumulate according to requirements, and send in Waste Request available at: <a href="http://www.uwyo.edu/safety">http://www.uwyo.edu/safety</a>
8 Special Precautions for Animal Use  (if applicable)	*
Particularly hazardous substance involved?	<input type="checkbox"/> YES:                      Blocks 9 to 11 are Mandatory <input checked="" type="checkbox"/> NO:                              Blocks 9 to 11 are Optional.
9 Approval Required	N/A
10 Decontamination	N/A
11 Designated Area	N/A
Name (print) (Assessor): _____ Title: _____	
Signature (Assessor): _____ Date: _____	
Name (print) (PI, Lab Manager, or Unit Head): _____ Title: _____	
Signature (PI, Lab Manager, or Unit Head): _____ Date: _____	
Date Sent to UW Safety: _____	