##### Phenol

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| Standard Operating Procedures for Chemicals or Processes | | | | |
| 1 Process (if applicable) | | Phenol  Use in molecular biology. | | |
| 2 Hazardous Materials and Chemicals | | Causes severe burns, toxic if inhaled or skin contact, poison, readily absorbed by skin. | | |
| 3 Environmental /  Ventilation Controls | | A protective shield is required around all pressurized systems handling phenol. Use phenol only in the fume hood at\* | | |
| 4 Personal Protective Equipment (PPE) | | Neoprene or natural rubber gloves, double gloves; lab coat: chemical goggles. A rubber or neoprene apron must be worn when pouring liquids and splashes may occur. | | |
| 5 Special Handling Procedures & Storage | | Store saturated phenol in the cold (4ºC) | | |
| 6 Spill and Accident Procedures | | Use drench shower or eyewash immediately if any contact with skin/eyes, and seek medical attention. Personnel in this lab are only allowed to clean up spills inside the fume hood of \_\_\_\_\_\_\_ ml or less using absorbent. For spills outside the fume hood or larger spills, evacuate the laboratory, prevent re-entry by un-authorized personnel, and call the UW Safety - RMMC at (307-766-3698) for help. | | |
| 7 Waste Disposal | | Label with Hazardous Waste Label, accumulate according to requirements, and send in the Waste Request form located at: <http://www.uwyo.edu/safety> | | |
| 8 Special Precautions for Animal Use (if applies) | | \* | | |
| Particularly hazardous  substance involved? | | | X YES: | Blocks 9 to 11 are Mandatory |
| NO: | Blocks 9 to 11 are Optional. |
| 9 Approval Required | Approval by PI before first use. | | | |
| 10 Decontamination | Wear face shield to protect face and eyes from splatters, rubber gloves, boots and apron. Flood area with water and cover with caustic soda ash to neutralize any un-absorbed phenol. | | | |
| 11 Designated Area | Inside fume hood only. | | | |
| 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: | | | | |