

Boston University Environmental Health & Safety

Incidents - Charles River Campus

Despite our best efforts accidents do happen in the lab. However, the consequences of these accidents can be mitigated through following proper procedure. Below are incidents on the Charles River Campus that have occurred since our last quarterly meeting. To consult on how these were corrected or remediated please talk to your Department Safety Advisor (DSA) for advice.

▶ Report: To ensure prompt response to chemical/biological spills or exposures on the Charles River Campus, dial 353-7233, for medical emergencies or fires dial 353-2121. Should an injury or illness occur due to biological or chemical materials in the laboratory contact (R) esearch (O) occupational (H) ealth (P) rogram: 414-7647.

▶ Review: Remember, most accidents are avoidable through pre-planning and regular review of your operations. Take a look at procedures and for additional review contact your DSA.

▶ Revise: The Standard Operating Procedures (SOP) and laboratory behaviors to include safety. Items to include in your SOP are: PPE, Engineering controls, designated work area, and storage locations

Incident	Response	Root Cause	Prevention
Chemical Exposure to face -Result of cross contamination from dirty gloves touching face.	-Researcher rinsed eyes and face -Individual sought treatment at Student Health ServicesEHS reminded researcher to contact ROHP	Improper PPE removal	-Be aware of what you touch with gloved hands
Chemical Spill - Acid spill noted upon entry	-Student noticed leak,Called EHS for cleanup	Defective equipment	-Secondary containment -Check equipment before and after each use.
Chemical spill - Magnesium Chloride (MgCl ₂). electrical box effected	-Laboratory notified EHS for further action	MgCl ₂ bottle fractured. Absorbing moisture caused leak.	-Older containers may become brittle/cracked. -Periodically check chemical inventory (bottle) for leaks
Chemical spill -30cc of 37% Hydrochloric acid(HCL) spilled during pippetting	-EHS was informed via email -EHS referred lab to ROHP	Accidently knocked over tube while pipetting	-Be-aware of your surroundings
Needle stick -A researcher stuck him/herself with a needle while working with human source material	-Lab called EHS emergency line -EHS referred lab to ROHP	Re-capping needles	-Do not recap needles
Needle stick A researcher stuck by needle while performing an animal inoculation	-EHS was informed -EHS referred lab to ROHP	Improper restraint during inoculation	-Proper animal handling and being diligent during procedures.

If you have questions contact your laboratory's assigned Research Safety Specialist or Environmental Health & Safety.

Environmental Health & Safety Charles River Campus: 353-4094Medical Campus: 638-8830Web: http://www.bu.edu/EHS



Incidents-Boston University Medical Campus/Boston Medical Center

Despite our best efforts accidents do happen in the lab. However, the consequences of these accidents can be mitigated through following proper procedure, Below are incidents on the BUMC/BMC that have occurred since our last quarterly meeting.

- ▶ Report: To ensure prompt response to chemical/biological spills, exposures, fires, and medical emergencies dial 414-4444. Should an injury or illness occur due to biological or chemical materials in the laboratory contact (R) esearch(O) occupational (H) ealth (P) rogram at: 414-7647.
- ▶ Review: Remember, most accidents are avoidable through pre-planning and regular review of your operations. Take a look at procedures and for additional review contact your DSA.
- ▶ Revise: The Standard Operating Procedures (SOP) and laboratory behaviors to include safety. Items to include in your SOP are: PPE, Engineering controls, designated work area, and storage locations

Incident	Response	Root Cause	Prevention
	-EHS referred personnel to		
Chemical Spill	occupational environmental		
-15 cc of Trichloroacetic acid (C ₂ HCL ₃ O ₂),	medicine ,		Proper storage
spilled on personnel 's clothing [BMC incident]	-Spill cleanup was managed by EHS	Improper storage	PPE
	-Researcher washed cut with		
	germicidal wash for 2-3 minutes		
	- The incident was reported to		
Possible BBP exposure	associated parties and ROHP.	Blade not removed	
-cut by cryostat blade	-EHS completed follow-up	from housing	SOP/Training

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