



Electron Microscopy Facility

Biosafety Plan

Location: A119 ESC

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Introduction

The major overall concern of the Electron Microscopy Facility is to provide a safe laboratory environment. Every member of the university participating in laboratory work is expected to conduct themselves in a safe and responsible manner. Effective laboratory safety depends on each individual's effort to eliminate unsafe acts and conditions. This document outlines safeguards in place to protect university personnel, the public, and the environment from exposure to microorganisms.

The Electron Microscopy Facility BSL-2 (EMF_BSL-2) lab, located in A119 ESC, is a multi-user facility and should be considered an extension of the primary facility for the P.I./professor. In addition to this document, all requirements for the primary facility are extended to the EMF_BSL-2 lab. Specific SOPs using resources available in the EMF_BSL-2 lab should include reference to those resources in the SOPs and need to be reviewed by EMF_BSL-2 lab management.

Occupational Safety and Health Program

This manual outlines safe handling practices for microorganisms (bacteria, viruses, fungi, rickettsia, mycoplasma, protozoans, parasites, and prions), biological toxins, recombinant or synthetic nucleic acid molecules, human blood or tissues, and animal or human cell cultures. Individual laboratories may add to this manual as appropriate for the work being conducted.

This manual complies with all BYU occupational safety and health programs as they pertain to biosafety. These programs are based on applicable health and safety standards promulgated by federal and state agencies including OSHA's Laboratory Standard (29 C.F.R. § 1910.1450), Bloodborne Pathogens Standard (29 C.F.R. § 1910.1030), Hazard Communication Standard (29 C.F.R. § 1910.1200), Personal Protective Equipment Standards (29 C.F.R. §§ 1910.132, 1910.133, 1910.134), Centers for Disease Control and Prevention's *Biosafety in Microbiological and Biomedical Laboratories* (BMBL), 6th Edition, and other specific standards where applicable. Personnel working in laboratories are expected to conduct themselves in a responsible manner that upholds these guidelines.

All personnel working in BSL2 or higher labs or who are working with animals listed on an IACUC protocol must be informed of potential hazards associated with their job responsibilities and complete the "Notification of Hazards and Acceptance of Medical Surveillance" form (Appendix B). Participation in the medical surveillance program is optional unless specified by your supervisor. This form should be kept on file with the PI or supervisor.

Faculty and Laboratory Supervisors

Faculty/P.I. supervisors have full responsibility for the health and safety of all personnel working under their direction, supported by EMF_BSL-2 management. They must ensure that all research conducted in their laboratory area complies with all college and university policies.

- Enforcement of compliance with approved safety procedures, policies, and trainings of the college and university.
 - Non-compliance will be addressed at the time of the incident and will be reported to the college safety officer.

- Faculty are responsible to notify and gain approval for all work that falls under the scope of the university IBC, IACUC, and/or IRB. This includes getting approval from EMF_BSL-2 management.
 - IBC approval is needed for projects involving the use of recombinant or synthetic nucleic acid molecules (rsNA), work with gene editing systems (CRISPR-Cas9, ZFNs, TALENs, etc.), work requiring BSL-2 or ABSL-2 containment, work with Select Agents or Toxins, work with dual use research of concern, and any other work with potentially harmful biological substances.
 - Common experiments that are exempt from IBC approval include, but are not limited to:
 - Activities that involve only the in vitro use of nucleic acids (i.e. PCR, synthetic double stranded RNA) and does not involve the cloning and propagation of recombinant DNA in cells.
 - Most commercial host vector systems including E. coli K12, Saccharomyces cerevisiae, Saccharomyces uvarum, or Bacillus subtilis, and their plasmids.
- Perform risk assessments to identify potentially hazardous procedures involving biological agents. Standard Operating Procedures (SOPs) will be developed to instruct and train all personnel working in the lab on correct procedures.
- Ensure that lab space is clean, secure, and up-to-date.
- Ensure compliance with all regulations and policies for disposal of infectious waste.
- Ensure that proficiency is demonstrated by lab users before work begins and that training is documented and refreshed annually or whenever procedures change.

Student Responsibilities

- Read, understand, and follow safety and health guidelines as outlined by the University, the College, the Department, the P.I./Laboratory Supervisor, and EMF_BSL-2 management.
- Attend or complete all required health and safety training sessions (conducted online or in-person) annually or when otherwise indicated. Trainings may include, but are not limited to:
 - General lab safety training (on Workday) - Required
 - Biosafety Cabinet training (on Workday) - Required
 - Formaldehyde Training (on Workday)
 - Lab procedures and equipment training (in-person by supervisor or approved lab personnel).
 - Proficiency with procedures / equipment should be documented and filed before students work unsupervised in the lab.
 - Copies of all documentation needs to be filed with EMF_BSL-2 management.
- Verification of training completion needs to be presented to EMF_BSL2 lab management prior to any work being performed.
- Complete "Notification of Hazards and Acceptance of Medical Surveillance" form (Appendix B).
- Utilize all hazard controls/safety procedures provided by the Lab Supervisor.
- Ask the appropriate resource if they are unsure of any safety or compliance rule or procedure.
- Understand how to respond to an emergency situation.
- Understand that they are ultimately responsible for their own safety.

- Report accidents, unhealthy, and unsafe conditions promptly to the EMF_BSL-2 management and faculty supervisor, Department Safety Coordinator, College Safety Coordinator, and/or RM&S.
- Notify the faculty supervisor of any preexisting health conditions that could lead to serious health situations in the laboratory or during fieldwork / class trips.

Safety Equipment:

Eye Wash/Safety Shower

To operate the eyewash/safety shower, use the handle associated with the desired device. When using the eyewash/safety shower a more thorough rinse will involve pulling the eye lid back to allow rinse water to cover a larger area of the eye and prevent sequestered hazardous material. Never block the eyewash/safety shower station with lab items.

Fire Extinguisher

Located immediately outside BSL-2 lab in hallway. To operate, pull the pin, aim the nozzle at the base of the fire, and squeeze the lever to release the powder spray. The fire extinguisher is a dry powder system that is good for all classes of fire except metals such as magnesium.

Biosafety Cabinets

Biological Safety Cabinets (BSC) are recommended for BSL-1 work and required for use with all Risk Group 2 agents and higher. All procedures with a viable agent that may create aerosols should be performed in a certified BSC.

Biosafety Cabinets must be certified at least annually and after relocation or maintenance in accordance with NSF/ANSI 49 standards.

Personal Protective Equipment (PPE)

PPE for research laboratories is provided by the Laboratory Supervisor and should be kept in the laboratory, not taken home. Disposable gowns are provided by EMF_BSL-2 management when needed.

Minimum PPE required for handling any viable microorganisms includes:

- Long pants and closed-toe, closed-heel shoes
- Nitrile gloves. Gloves must be removed whenever transporting items in public hallways.
- Safety glasses or face shields are recommended for any procedure conducted outside a BSC where aerosol generation may occur. Eye protection should be provided by the lab user.

Additional PPE requirements for BSL-2 laboratories:

- Disposable gowns are provided.
 - Disposable gowns may only be worn in the BSL-2 lab.

Standard Practices Biosafety Level 1

Biosafety level 1 (BSL-1) is suitable for work with well-characterized agents not known to consistently cause disease in healthy adults. All BSL-1 areas must have a door for access control, a sink for handwashing, an eyewash station, impervious benchtops, and cleanable finishes.

All work must be supervised by a P.I./Laboratory Supervisor or qualified scientist experienced in microbiological techniques, supported by EMF_BSL-2 management. Lab users receive training in the procedures conducted and in the potential hazards associated with the agents used.

BSL-1 standard practice requirements

- No mouth pipetting
- Food and drink prohibited
- Minimize aerosols and splashes
- Spill procedures must be posted
- Decontaminate work surfaces at the end of work and after any spill
- Decontaminate all cultures and stocks before disposal
- Use needles, scalpels, and other sharps only when necessary
 - Use plasticware or blunt instruments when possible
 - Place sharps in approved, puncture-resistant containers at the point of use
- No animals or plants not associated with the work are permitted in laboratory areas
- Transport of viable agents/hazardous materials must be done in a secondary leak proof container that has been decontaminated prior to leaving the laboratory area.

BSL-1 Personal Protective Equipment (PPE) requirements

- Long pants and closed toe/heel shoes
- Lab coat/disposable gown and eye protection as indicated by risk
- Biological safety cabinet (BSC) generally not required.

Personnel must wash their hands after handling viable materials, after removing gloves, and before leaving the laboratory. Lab coats/disposable gowns and gloves are removed before leaving laboratory areas.

Standard Practices Biosafety Level 2

Biosafety level 2 (BSL-2) is suitable for work involving risk group 2 agents that pose moderate hazards to personnel and the environment. Personal health status may impact an individual's susceptibility to infection, ability to receive immunizations or prophylactic interventions. Therefore, all laboratory students should be provided with lab-specific information regarding immune competence and conditions that may predispose them to infection. Individuals wanting more information or medical surveillance are encouraged to self-identify to the Lab Supervisor, College Safety Officer, or Risk Management for appropriate counseling and guidance. BSL-2 requirements build on BSL-1 requirements.

BSL-2 standard practice requirements

- All laboratory personnel must have specific training in handling pathogenic agents and are supervised by scientists competent in handling infectious agents and associated procedures.
- Persons working with infectious agents should receive initial and annual training on disease signs and symptoms and all exposure procedures including the location of the pathogen data sheets. (Appendix A).
- Access to the laboratory is restricted when work is being conducted. The door should remain closed at all times. **Do not prop the door open!**
- Properly maintained BSCs, or other approved physical containment equipment (such as centrifuge safety cups/rotors), must be used for all procedures in which infectious aerosols or splashes may be created. These activities may include, but are not limited to:
 - Pipetting
 - Centrifuging
 - Grinding
 - Blending
 - Shaking
 - Mixing
 - Sonicating
 - Opening containers of infectious materials
 - Inoculating animals
 - Harvesting infected tissues from animals or eggs
 - Whenever high concentrations or large volumes of infectious agents are used
- Potentially infectious materials must be placed in a durable, leak proof container during collection, handling processing, storage, or transport within the facility. **Do not transport open cultures without secondary containment.**
- Eating, drinking, handling contact lenses, applying cosmetics, and storing food for human use are not permitted in lab areas.
- **Mouth pipetting is prohibited;** mechanical pipetting devices must be used at all times.
- Laboratory equipment and work surfaces should be decontaminated at the end of every lab session, as well as, after spills, splashes, or other potential contamination.
- Use EPA-registered disinfectants effective against the agents handled, following manufacturer-recommended contact times
 - A list of approved disinfectants, their use concentrations, and contact times must be included in each lab's SOPs
- Equipment must be decontaminated before repair, maintenance, or removal from the laboratory.
- Incidents that may result in exposure to infectious materials must be immediately evaluated and treated according to procedures described in the laboratory biosafety manual. All such incidents must be reported to EMF_BSL-2 management and laboratory supervisor and/or the college safety officer. Medical evaluation, surveillance, and treatment may be required.
- A spill kit containing a method for decontamination must be maintained and available in the laboratory area.

BSL-2 Personal Protective Equipment (PPE) requirements

- Long pants and closed toe/heel shoes.
- Disposable solid front gown.
- Eye or face protection when splashes or aerosols may occur (mandatory outside of a BSC when working with live BSL2 cultures).
- Biological safety cabinet (BSC) required whenever possible when working with live BSL2 organisms.
- Double gloves for high-risk procedures (e.g., large volumes, highly communicable or infectious materials, spill cleanup).

PPE used for BSL2 work must be removed before entering hallways or offices and stored only in the laboratory.

- Eye protection should be cleaned with 70% ethanol, or other approved disinfectant, after use and when splashes occur.
- Contaminated disposable gowns must be removed immediately and handled as biohazardous.

Biosafety Cabinet (BSC) Operating Procedures

All work with viable microorganisms that may generate aerosols must be performed inside a certified BSC. Annual certification is coordinated through the Science Support Shop; contact them if your cabinet is out of date.

Before beginning work, allow the BSC to run for 3–5 minutes and disinfect the work surface with 70% ethanol or another approved disinfectant. Keep only necessary materials inside the cabinet, avoid blocking the front intake grill. Work from clean to dirty areas, minimize aerosol generation, and do not use open flames.

At the end of work, bag or disinfect waste before removal, disinfect the work surface with 70% ethanol or approved disinfectant, and allow the cabinet to run for an additional 3–5 minutes before closing the sash or shutting off the blower.

Biohazard Signage

Appropriate biohazard signage must be posted at laboratory entrances when risk group 2 (BSL2) materials are in use. Signage must include the biohazard symbol, agents in use (as required, may be posted inside the room), PPE requirements, access restrictions, and emergency contacts. Signs must remain posted whenever hazards are present or work is ongoing.

Pathogen Safety Data Sheets

Pathogen Safety Data Sheets (PSDS) provide recommendations for work involving agents that have the potential to cause laboratory-acquired infections (LAIs). Each PSDS includes agent-specific information on safety and handling precautions, routes of transmission and symptoms, medical contact information in the event of exposure, known drug resistance, communicability, infectious dose, and recommended disinfectants. The PSDS must be made available to medical care personnel in the event of an exposure.

Each infectious or toxic organism handled in the laboratory should have a prepared PSDS as part of this biosafety manual. The College of Life Sciences maintains a centralized [PSDS database](#) that may be referenced as needed. See Appendix A for lab PSDS.

Not all requested information for a PSDS may be available; however, before beginning work with any infectious pathogen or toxin, each principal investigator (PI) or student researcher should review the scientific literature to learn as much as possible about the organisms being used. Information for the PSDS should come from peer-reviewed publications, public health databases (e.g., the CDC or the Public Health Agency of Canada), or other authoritative sources.

Infectious Agent Exposure Protocol

Exposures to infectious agents in the laboratory can differ from community exposures because laboratorians often handle higher concentrations of agents and may perform procedures that generate aerosols.

Exposure Incident: The following will be considered an exposure incident

- Inhalation of aerosol droplets – failure of aerosol containment during energetic processes such as centrifugation, sonication, spilling, or splashing outside a BSC.
- Mucous membrane contact (eyes, nose, or mouth).
- Contact with non-intact skin.
- Injection (needlestick, scalpel cut, or other penetrating injury).

Immediate Response Procedures:

- Remove contaminated PPE, if applicable.
- Immediately wash exposed areas:
 - **Skin:** Wash with soap and water. If an injury results in bleeding, allow the site to bleed freely under running water, then wash the area thoroughly with soap and water for at least 5 minutes.
 - **Mucous membranes:** Flush with water. Irrigate eyes for at least 15 minutes at the eyewash station, keeping eyelids open during flushing.
- Notify your supervisor of the accident and/or College Safety Officer (801-422-6875 / 801-380-3969).
 - If they are unavailable, contact University Police at (801) 422-2222.
- Notify Risk Management – The supervisor or the College Safety Officer will notify BYU Risk Management. Follow-up incident reports will be required.
- Seek medical attention – Follow the directions of your supervisor and/or the College Safety Officer for appropriate follow-up care. Treatment may be obtained at the Student Health Center Urgent Care during normal working hours or, after hours, at the nearest urgent care clinic or the Utah Valley Hospital emergency department.
- Bloodborne pathogen exposures (exposure to human blood, or viral isolate or culture)- Treat as an emergency; initiate evaluation within two hours. Refer to your laboratory Exposure Control Plan for detailed procedures.

Sharps Procedures

Whenever practical, adopt safety-engineered devices and the use of plasticware that reduce the risk of sharps injuries. Policies for the safe handling of sharps (needles, scalpels, pipettes, broken glassware, etc.) include, but are not limited to:

- Needles and other sharps must not be bent, sheared, broken, recapped, removed from disposable syringes, or otherwise manipulated by hand prior to disposal.
 - If no alternative is feasible or a specific procedure requires recapping, prior approval from the college safety officer and/or the IBC is required and must be documented in the laboratory SOPs. When performed, recapping must use a mechanical device or a one-handed technique only.
- Used disposable needles and syringes are discarded immediately into sharps containers located as close as feasible to the point of use. Containers must be closable, puncture-resistant, leakproof on sides and bottom, and labeled or color-coded with the biohazard symbol. Keep containers upright, replace routinely, and do not allow to overfill; close prior to removal and use a secondary container if leakage is possible.
 - Used plastic or glass chemical containers are not approved sharps containers.
- Non-disposable sharps are placed in a hard-walled container for transport to a processing/decontamination area, preferably by autoclaving.
- Broken glassware is not handled directly. Remove using a brush and dustpan, tongs, or forceps. Substitute plasticware for glassware whenever possible.
- Use safety-engineered or needleless systems where available to further reduce injury risk.

Waste Procedures

Biohazardous waste is defined as unwanted materials contaminated or potentially contaminated with pathogenic microorganisms, and includes sharps, blood, cultures, bacterial plates, and animal remains. **Do not mix waste types.**

Container Management and Labeling

- All biological waste containers must be kept closed when not in use, dated when waste accumulation begins, and labeled with the contents and appropriate hazard symbol.

Liquid biohazard waste

- Without chemicals or other hazardous substances – Liquid biohazardous waste that is not mixed with hazardous chemicals may be deactivated using a freshly prepared 10% household bleach solution (using a 1:1 ratio). Maintain a minimum 30-minute contact time, then drain-dispose with copious water. Do not autoclave bleach-treated liquids.
- Waste chemical preservatives or fixatives – Waste containing biological material mixed with chemicals (e.g., formaldehyde, phenol, ethanol, or other hazardous substances) must first be treated to deactivate biological agents using an approved method (autoclaving or appropriate chemical or heat disinfection).

- After biological deactivation, manage and dispose of the remaining material as chemical hazardous waste in accordance with BYU Chemicals Management procedures.
- Do not add bleach or other oxidizing disinfectants to chemically preserved waste, as this can generate toxic gases or hazardous reactions.

Solid biohazard waste

- All waste should be pre-bagged in biohazard bags before disposal into the biohazard waste container.
- Do not fill more than 2/3rds full. The bag should be tied off and the lid fit securely before pickup by Chemicals Management.

Sharps

- Dispose of sharps immediately after use into an approved sharps container.
 - Used plastic or glass chemical containers are not approved sharps containers.
- Do not fill containers more than 2/3rds full or past the container fill line.

Animal remains or specimens

- Place animal carcasses or tissues in leakproof zip-top bags within a biohazard bag.
- Store frozen until pickup from BYU Chemical's Management.

Autoclave Validation

Autoclaves used for biological waste must undergo routine biological indicator (spore) testing and cycle documentation. Records must be maintained and available upon request.

Spill Procedures

In the event of a liquid spill, avoid splashes or generating aerosols during cleanup by covering the spill with dry paper towels or other disposable, absorbent material. Ensure that appropriate PPE —at a minimum gloves, safety glasses or goggles, and a laboratory coat— is worn during the cleanup. Apply an appropriate disinfectant to the spill, beginning at the perimeter and working towards the center. Allow sufficient contact time for the disinfectant to completely inactivate the microorganism. Dispose of spill materials in the biohazard waste. Clean area with disinfectant after removing spill materials.

- For spills inside the Biosafety Cabinet
 - Keep the cabinet running, cover the spill with absorbent material, apply disinfectant for the required contact time.
 - If the spill enters the grill or drain areas, contact your supervisor or the college safety officer for help with cleanup.

Appendix A - PATHOGEN DATA SHEET

Exposures to infectious agents in the laboratory involve both qualitative and often quantitative differences from exposures in the community. Many organisms that are not expected to be communicable in a community setting can cause airborne transmission in the laboratory. Laboratorians are often working with high concentrations of the agent under study. Laboratory workers typically have significantly more information concerning the organism, specific virulence factors, and concentration of possible inoculum than someone with non-laboratory exposure.

Exposure Incident: The following will be considered an exposure incident:

1. Inhalation of aerosol droplets – failure of aerosol containment during energetic processes such as centrifugation, sonication, spilling, splashing etc. outside the Biosafety Cabinet.
2. Mucous membrane contact
3. Contact with non-intact skin
4. Injection

Immediate Response Procedures:

1. Wash it off, rinse it out: Use eye-wash, sink, drench hose or shower to remove the infectious material as soon as possible following an exposure incident involving contact with skin or mucous membrane surfaces.
2. Notify faculty supervisor of the accident and/or College Safety Officer; (801) 422-6875. If after hours contact University Police for assistance; (801) 422-0911.

Each laboratory worker must review and understand the infectious characteristics of the BSL2 organisms they will handle. Pathogen Safety Data Sheets (PSDS) are available on the College of Life Sciences Safety website (<https://lifesciences.byu.edu/safety/pathogen-sds>). If a data sheet for a specific organism is not available online, contact the College Safety Officer to request assistance.

Organisms used in this laboratory:

Organism Name (Genus and Species)	ATCC # (if available)	Pathogen Safety Data Sheet Link (if not on website use the template below)
		PSDS Link

Appendix B - NOTIFICATION OF HAZARDS AND ACCEPTANCE OF MEDICAL SURVEILLANCE

Medical surveillance provides a pre-work screening to determine if current health conditions may be adversely affected by hazards encountered in the lab. By completing and signing this form, the worker identified has been reasonably informed of the hazards associated with their job responsibilities. The signature also represents their choice to Accept or Decline participation in the BYU medical surveillance program. They also recognize that choosing to decline may affect various work activities including prohibiting them from participating in activities that require medical surveillance by law. (e.g. CDL, CMV, Respiratory Protection).

Signing this form does not preclude the responsibility of BYU to provide a safe and healthy work environment. The contents of this form will be kept confidential.

Employee Name: _____ BYU ID: _____
Birth Date: {mm/dd/yyyy} _____ Age: _____
Sex: (circle one) Male / Female _____
Job Title: _____

Accept/Decline Medical Surveillance:

Circle your choice indicating whether you wish to participate in medical surveillance program or wish to decline.

ACCEPT

DECLINE

By signing this document, I attest that the PI or supervisor has reviewed information about the known hazards associated with my job and discussed protective measures to reduce exposures and minimize adverse health effects.

Employee Signature: _____ Date: _____
Print Name: _____
PI, Supervisor Signature: _____ Date: _____
Print Name: _____

Appendix C – Hazard Analysis Form

Hazard Analysis – [Specific lab / job task]

Hazard Description	Mitigation Strategy
Contact hazards with skin	Long pants, lab coat, disposable gloves
Splash to eyes	Safety glasses or face shield
Aerosolization of infectious agents	Work in Biosafety Cabinet (BSC)

Appendix D – Laboratory Standard Operating Procedures (SOPs)

Provide a list of SOPs used in your laboratory, with links as appropriate.

Appendix E – Worker Acknowledgement

All personnel must review this Biosafety Plan and acknowledge understanding of associated hazards and responsibilities. Supervisors must maintain acknowledgment documentation.

By signing below, I acknowledge that I have received, read, and understand the Biosafety Plan for this laboratory and the procedures necessary for safe handling of biological materials. I understand the potential hazards associated with my work and agree to follow all required safety practices, PPE guidelines, training requirements, and emergency procedures. I agree to seek additional instruction when needed and to notify the Laboratory Supervisor or College Safety Officer of any incidents, exposures, or concerns.

Appendix F – Revision History

Rev #	Rev Date	By	Summary Of Revisions
1	01/20/2026	MDS	- Updated template to specify BYU Electron Microscopy Facility
1.1	02/05/2026	MDS	- Updated introduction to include specific EMF_BSL-2 lab requirements - Updated Faculty requirements to consult with EMF_BSL-2 lab use in their SOPs - Updated Student requirements to require verification of training records.
1.1.1	02Jun2026	FR	- Formatting changes: ○ Set to “Moderate Margins” ○ Added title, rev #, date, and number of pages to footnotes ○ Moved logo in header to the right ○ “By” Column in Revision History ○ Coloring in Tables appendix C,D,E,F ○ Rev. Numbering: [Major revision].[Minor Content Revision].[Format changes]
1.2	17Jun2026	FR	- Updated to reflect EM facility expectations