I. INTRODUCTION & PURPOSE

II. PROCEDURES

A. PURPOSE AND PRIORITIES

B. EXPECTATIONS FOR EMPLOYEES

C. RESPONSIBILITY AND CONTROL

D. STEPS TO ASSURE EMPLOYEE HEALTH AND SAFETY

E. COMMUNICATIONS DURING AN EMERGENCY

F. EMERGENCY PROCEDURES

1. BUILDING EVACUATION PLANS

2. FIRES

3. BOMB THREATS

4. CHEMICAL SPILLS

5. EARTHQUAKES

G. EMERGENCY SUPPLIES

H. SECURING BUILDING CONTENTS

I. PROTECTING BUILDING CONTENTS

J. SAFETY PROGRAM RECORD KEEPING AND DOCUMENTATION

ATTACHMENTS A: SAFETY COORDINATORS

ATTACHMENTS B: GROUP 4—HEALTH SCIENCES/HOSPITALS

ATTACHMENTS C: FIRST–AID CERTIFIED EMPLOYEES

ATTACHMENTS D: EMPLOYEE HEALTH AND SAFETY TRAINING CHART

ATTACHMENTS E: BOMB THREAT CALL CHECKLIST

ATTACHMENTS F: SCREENING PROCEDURES FOR SUSPICIOUS PACKAGES
I. **INTRODUCTION & PURPOSE**

Emergency situations that may potentially interrupt the routine operations of the department or threaten the health and safety of the University's employees may occur periodically. This Standard Operating Procedure (SOP) outlines the framework for both preparing for and responding to emergencies. The type and seriousness of emergency (e.g., local versus community–wide) will dictate the specific measures taken to cope with each situation. In all cases, the safety of personnel will be an overriding concern.

II. **PROCEDURES**

A. **Purpose and Priorities**

The Department of Pharmacology provides graduate, undergraduate and postdoctoral instruction and carries out basic biomedical research studies in the following facilities.

Health Sciences: D, E, & F – wings (4th floor), K – wing (5th floor)
J – wing (6th floor), BB – wing (15th floor)

Cochran Building 2121 North 35th Street (2nd floor).

It is the policy of the University of Washington to create and maintain a safe and healthful work place free from recognized hazards that may cause harm to faculty, employees, students and visitors. This policy is consistent with the University–wide safety and health policy (UW OPS 10.3) and applicable Washington Industrial Safety and Health Act (WISHA) regulations (WAC 296 – 24 and 296 – 62).

In an emergency, emphasis is to be placed on the safety of the departmental personnel, University students and members of the general public. Priority attention will be given to appropriately securing the area and following established evacuation and notification procedures.

In a document of this nature, there is no way to comprehensively address all potential emergencies and their respective responses. Therefore, as a general guide to the degree of emergency response required in a given situation, the following classifications are used:

- **LEVEL I EMERGENCY**: A localized emergency with limited impacts, such as fire, hazardous material incident or limited power outage, that includes the potential for exceeding the ability of normal responding unites to bring the emergency under control, and causes an alert status to be instituted.

- **LEVEL II EMERGENCY**: A campus event, such as a major fire, civil disturbance or widespread power outage that exceeds the ability of the normal on – and off – campus responding units to bring the emergency under control.

- **LEVEL III EMERGENCY**: A community – or region – wide event, such as an earthquake or multi – casualty incident.
B. Expectations for Employees

a) All Pharmacology employees are expected to know and understand the UW Emergency Plan and the Pharmacology Safety and Health Plan.

b) Pharmacology employees are NOT considered to be essential employees and are NOT required to remain at or make a reasonable effort to report to work in the event of a University closure.

c) Pharmacology safety coordinators are to attend Environmental Health and Safety’s training sessions on both First Aid & CPR and Earthquake Preparedness.

C. Responsibility and Control

**RESPONSIBILITIES:** Responsibility for safety programs and safety performance lies with each Dean, Director, Chairperson and Supervisor. Everyone with supervisory responsibility is expected to participate directly in assuring that safe working conditions are maintained. Supervisors provide training for accident prevention, as necessary, for those working under their direction. Each University employee is required to comply with occupational safety and health regulations, with departmental policies and procedures that apply to their own actions and conduct on the job, and to report accidents, injuries, and unsafe conditions to his or her supervisor. (University Handbook, Vol. 4, Part IV, Chapter 4) (UW OPS D10.3). Faculty and staff are also directly responsible for their own safety and for the safety of students and employees under their supervision. Responsibility for safety can neither be transferred nor delegated. (University Handbook, Vol. IV, Chapter 4, Section 1.A).

**SAFETY COORDINATOR:** The Department of Pharmacology’s Safety Coordinators are listed in Attachment A. The safety coordinators are responsible for: working with department administrator and lab managers to ensure that their employees are in compliance with the safety and health plan; the safety coordinators keep the safety and health plan up-to-date, schedule employee safety training as required, work as liaisons with EH&S, work with supervisors and employees to resolve safety complaints, keep the safety bulletin boards up-to-date, ensure that the department administrator and lab managers maintain safety records, and keep all of the department aware of current safety concerns. *(Attachment A, page 15)*

D. Steps to Assure Employee Health and Safety

1. **SAFETY COORDINATOR MEETINGS:** Safety coordinator meetings will be held annually to discuss health and safety issues, provide new information and give participants an opportunity to express concerns or ask questions. The Department Administrator, Susan Silbernagel, will schedule additional meetings, as needed. Diane Schulstad or her substitute will take minutes of the meeting. Minutes will be posted on the health and safety bulletin boards, and will be saved on file in the department office for at least one-year. Two weeks prior to the meeting, a notice will be posted on the bulletin board so that other employees, students or volunteers can participate.
2. **Providing Safety Bulletin Boards:** Department of Pharmacology Safety bulletin boards are used for posting WISHA posters, safety notices, safety newsletters, safety committee minutes, training schedules, safety posters, accident statistics and other safety educational material. Safety bulletin boards are located in room D–419 and outside room K–536 Health Sciences Building (HSB) where all employees can see them. (WAC 296–24–55).

3. **Emergency Evacuation and Operations Plan:** All University departments develop an Emergency Operations Plan (EOP) which contains procedures for emergency evacuation and for responding to fires, bomb threats, chemical spills, earthquakes, etc. The Department of Pharmacology EOP contains building floor plans of life (fire) safety equipment and exit pathways; evacuation procedures; identifies evacuation assembly points; describes methods of accounting for staff, students and visitors; and identifies areas of refuge for occupants with a mobility impairment. All department staff is trained in the department’s EOP. If an employee moves to a new location, the above-mentioned information must be reviewed for the new work site. Departmental personnel will make sure that all doors, exit pathways, and stairs are kept clear of all obstruction that could impede safe exiting. Fire separation doors particularly stairway doors, shall not be blocked or wedged open. (Attachment G, begins after page 22)

If the fire alarm is activated, all affected employees shall immediately leave the alarmed area closing all doors behind them.

Never use the elevator during an alarm.

The Emergency Operating Plan for the Department of Pharmacology is available in the department’s reference station (E–401, HSB). Maps of the emergency evacuation routes, including assembly points, shall be posted in each corridor. Plans shall include provisions for disabled persons. Maps shall also include location of all life safety equipment in the area, and are included in the attachments.

4. **Departmental Participation in Health and Safety Committee:** Health and Safety Committees, as required by Washington State regulations (WAC 296–24–045), are an advisory group of management appointed and employee elected representatives who help determine unsafe conditions and methods of work, suggest corrective measures and obtain the participation of all personnel.

a) Organizational health and safety committees — Department employees are represented on The University’s Organizational Health and Safety Committees either by department members or by organizational members who represent all departments in the organizational unit. (Health and Safety Committee, group 4), (Attachment B page 16–17)

b) University–wide Health and Safety Committee — In addition, to provide campus–wide consistency and oversight, a University–wide Health and Safety Committee is established and composed of members from the official organizational committees.

c) Departmental Health and Safety Committee — The Departmental Health and Safety Committee consists of representatives from the
research/clinical supervisors, department administrators, office support staff and faculty who meet annually to review and update health and safety policies and practices. Other staff or students may attend to make suggestions or ask questions. Minutes are taken by Diane Schulstad or her substitute, and kept on file in the department office (E – 401, HSB) for at least one year.

5. **ACCESS TO FIRST AID CPR:** University employees are to be afforded quick and effective first-aid in the event of an injury. This is accomplished by the strategic location of first-aid kits and the availability of first-aid certified individuals at or near where the employees are working. UW Police officers and First Aid and CPR certified can respond within two to three minutes if notified by calling 9-911. A list of employees certified in first-aid/CPR and a list of locations of first-aid kits is in the attachments. ([Attachment C, page 18](#))

6. **HAZARD ASSESSMENT AND REDUCTION:** In order to assure a safe and healthful work environment, the Department of Pharmacology has established the safe work practices and policies listed in this section. These practices and policies were developed after an assessment of the faculty, staff, and student and visitor exposures to work site hazards. Identified hazards were documented and reduced or corrected either by making engineering changes to eliminate the hazard, or by establishing these safe work practices and policies. To maintain a safe and healthful work place, the Department of Pharmacology Administrator and Lab Managers are required to conduct periodic inspections of the work areas under their supervision. In addition, the Administrator, Lab Managers and employees continually check work areas for unsafe conditions and practices so immediate corrective action can be taken (UW OPS D10.3). At the safety coordinator meetings, departmental hazard reduction programs and standard operating procedures for laboratories and safe work practices are discussed.

d) **Chemical Hazard Communication — Hazard Communication (Worker Right – to – Know)** Washington State Occupational Safety and Health Standard requires that employees be informed of and receive information about hazardous chemicals in the work place through labeling, material safety data sheets, and training. Hazard Communication (Worker Right – to – Know) (WAC 296 – 62 – 054). The UW Hazard Communication Program is described in the UW Operations Manual, Section D 12.5. All employees are informed of the location of the written UW Hazard Communication Program and encouraged to read it.

1. **Labeling** – Information about hazardous chemicals is found on manufacturer’s labels on chemical (or chemical products) containers. If chemicals are transferred from a labeled container to an unlabeled container, the secondary container must be labeled with the identity of the chemical, the appropriate hazard warnings and target organ effects. When possible, secondary bottles have Right – to – Know chemical-specific labels attached, or have complete chemical names, concentrations, hazards and the date made information on the label.
(2) **Material Safety Data Sheets (MSDSs)** – Another required method for informing employees about hazardous chemicals is through the availability of Material Safety Data Sheets (MSDSs). The department has access to MSDSs through the UW Laboratory Safety System (LSS) accessed through each lab’s personal computer; directions are available in each lab on how to use the LSS. New employees are given training on using the LSS by the Lab Manager, or employees may attend the EH&S training class.

(3) **Hazard Communication Training** – Employees receive information about the UW Hazard Communication Program during Personnel’s UW New Employee Orientation Program and during the department’s New Employee Safety Orientation. Employees who work with hazardous chemicals receive training on how to read an MSDS, where MSDSs are located, the physical and health hazards of the chemicals they work with and how to work safely with those chemicals. Employees are also encouraged to attend classes offered monthly by EH&S.

e) **Personal Protective/Safety Equipment** — The University provides most personal protective/safety equipment for its employees when required by regulation or when a determination has been made that personal protective equipment is needed for an extra level of employee protection. Employees are informed of the specific personal protective/safety equipment requirements for their position on the following occasions: during the departmental New Employee Safety Orientation conducted by their supervisor, when a job procedure changes requiring a change in personal protective/safety, during safety meetings, and as a regular part of any written safety procedure or standard operating procedure. Each department/supervisor is required to conduct a hazard assessment of the work area and identify all hazards that require personal protective equipment. If hazards are identified, then specific personal protective equipment must be selected for each hazard and the affected employees trained on the safe use, care and maintenance for each piece of equipment. Changes in processes or work sites may require a new hazard assessment, selection and/or training.

7. **Reporting and Resolving Safety Problems** — Employees are encouraged to report safety concerns to their supervisors. If employees do not feel they can report the safety problem to their supervisor or have done so and do not feel the problem has been resolved, the employee may discuss the situation directly with the Safety Coordinator, a safety committee representative, or the Administrator. Any party may request EH&S assistance if internal procedures cannot resolve the problem. The appropriate UW Incident/Accident/Quality Improvement Report form may be used to report safety problems. In the Department of Pharmacology, employees can report concerns to their supervisor or their Safety Coordinator, as well as consulting EH&S if needed.
8. ACCIDENT REPORTING AND INVESTIGATION –

a) Medical Emergencies – All medical emergencies are reported to the nearest Emergency Medical Services (EMS) on the University Campus or UW Medical Center (dial 9–911).

b) Reports to Supervisor – All accidents and near accidents are reported to the employee’s supervisor as soon as possible and reported on the appropriate UW Incident/Accident/Quality Improvement Report form. The employee, the supervisor or both can fill out this form. Provide a copy to the departmental or unit safety coordinator. The Department of Pharmacology uses form UW 1428 to report accidents. All forms are required to be available in each division and laboratory.

c) Accident Investigation – All accidents and near accidents are investigated by the supervisor. The investigation results and remedial measures will be summarized on the Incident/Accident report form. Supervisors may request the assistance of EH&S to investigate any accident and especially to recommend any corrective action to prevent a recurrence of the accident. Accident investigation reports are reviewed by EH&S and the department’s organizational safety committee. Assistance with accident investigations is available from EH&S by calling 543–7388.

9. EMPLOYEE OCCUPATIONAL HEALTH REQUIREMENTS – All employees, students or faculty who have direct patient contact or use rooms in the hospital other than visitor waiting rooms/public areas need to have the Hepatitis B Vaccine series, an annual TB test, Measles–Mumps–Rubella Vaccination or proof of having the illnesses, and chicken pox vaccine or proof of having the illness. All employees, students, residents or faculty who handle human blood or blood products MUST take the Blood Borne Pathogens Class or refresher annually, and proof of taking the class must be kept on file in the department office. All persons using the Primate Center or other animal use areas must take the appropriate animal care training classes required by the Department of Comparative Medicine. All employees, students or faculty who work with primates need to have a TB test every 6 months, a serum sample drawn and banked (this can be tested for Herpes B later if there is an exposure) and a Hepatitis B Vaccine series if human blood products are also handled. Questions on occupational health requirements can be addressed by Campus Health Services (548–4848).

All new employees, including permanent, temporary and part–time employees receive the following instruction:

a) Reporting procedures for fire, police or medical emergencies

b) Evacuation procedures during an emergency.

c) The locations of fire alarm pull stations and fire extinguishers. Employees should not attempt to use a fire extinguisher unless trained to do so.

d) Procedures for reporting all accidents and incidents to their supervisors and filling out a UW Incident/Accident/Quality Improvement Report form (Form UW1428) which is available from their supervisor or designee.
e) Procedures for reporting unsafe conditions or acts to their supervisors and, when possible, taking action to correct unsafe conditions, (e.g., wiping up small, non–toxic spills or removing a tripping hazard).


g) Description of UW and departmental Hazard Communication

h) Identification and explanation of warning signs and labels used in their work area.

i) Instruction in the use and care of any personal protective equipment they are required to use.

j) A description of safety training they will be required to attend for their job.

10. **EMPLOYEE SAFETY TRAINING**

a) Department Safety Orientation of New Employees:

All new employees will be given the following information:

- Identification of areas where hazardous materials are stored or used in their work areas.
- Location and availability of Material Safety Data Sheets (MSDSs).
- An explanation of Hazard Communication Labeling requirements and any labeling system used by the department.
- Notification that additional training will be provided, if needed, covering health effects of hazardous chemicals and how to work with chemicals safely.
- In the Department of Pharmacology, new employee safety training will be conducted by the Administrator, Supervisor or Lab Manager.
- In each laboratory, the lab supervisor will train and orient each new employee using a lab – specific checklist.
- Annual safety refresher course will be held for all employees.

b) Employee Health and Safety Training – To ensure an effective program, employees must be trained in safe work practices. Supervisors are responsible for seeing that these practices are followed. EH&S will assist departments in implementing safety training and education programs upon request. The attachments contain a chart of courses that are mandatory/suggested for safety coordinators to attend. These courses are available for other department members to attend. (Attachment D, page 19)
E. Communications During an Emergency

- The regular phone system will be used for communication to the extent possible. Electronic multi-button telephones may not operate in a sustained power outage, however single line FAX telephone lines may still be functioning; the FAX lines in E–401 (206–685–3822) and K–528 (206–616–4230) will be used for limited emergency communication.

- Assuming phone service will be limited, an attempt will be made to broadcast instructions over local radio stations in conjunction with other UW emergency announcements. Emergency broadcasts may be heard on the following radio stations:

  KIRO (AM 710) the official emergency broadcast station for the Seattle area, KUOW (FM 94.9), KCMU (FM 90.3), and KOMO (AM 1000)

F. Emergency Procedures

1. Building Evacuation Plans: All new employees (or employees with new work-site assignments) are expected to walk through a minimum of two evacuation routes with their supervisors. Floor plans for centralized facilities are provided as attachments to the EOP (see Attachment G pages 22–152).

Evacuation Assistance: All employees (including those with disabilities) if trapped in a building or unable to go to an area of evacuation assistance (e.g., a building stairwell landing), should:

a) Call 9–911 if a phone is available, and report their location and situation.

b) Go to a window, if available, and signal emergency personnel by waving, or hanging or taping a large sign in the window. Employees may open the window for fresh air, but must not break the window as smoke may enter.

c) If smoke is present, stay low, cover face with cloth (damp, if possible) and place fabric (cloth, coat, towels, etc.) around door cracks to keep smoke out.

Emergency Assembly Point: If evacuation of the Health Sciences building is required or if access to the building is denied, all Pharmacology personnel should report to the emergency assembly point located on the lawn in front (north) of the South Campus Center. An alternative location if SCC is inaccessible is the parking lot west of the South Campus Center on the corner of Boat Street and 15th (across from the Agua Verde restaurant).
2. Fires

*FIRE ALARM SETS:* When the fire alarm systems are tested, official notice is received in advance and posted in the involved areas. Evacuation is not required under this circumstance.

*OTHER FIRE ALARMS:* Other than in the case of formally announced alarm tests, no one is permitted to remain in, or return to, any alarm area until Seattle Fire Department personnel have verified the cause of the alarm and have cleared the area for reoccupation.

When the fire alarm is activated, a building and area identification code is sent to the UW Police Communication Center. Fire alarm pull stations may also be considered as a life safety system for use during other life threatening situations, particularly if a telephone is not readily available. The Seattle Fire Department is the key resource for fire fighting, hazardous material problems and for medical aid. Whenever the Seattle Fire Department responds to a University emergency, it is in charge of the emergency location until it relinquishes control to the appropriate University unit.

*PROCEDURES FOR RESPONDING TO FIRES:*

a) Call for help by activating a fire alarm manual pull station located at exits. If time permits, use a telephone to give more specific information.

b) When an alarm sounds in one wing of the Health Sciences Building, personnel are required to vacate to the nearest adjacent wing where the alarm is not sounding. Should the alarm sound in all wings, leave the building immediately by the nearest exit route or an alternate route if the nearest exit is blocked. Section supervisors are responsible for notifying all personnel in their area to vacate the area/facility.

c) Do not use elevators. Elevators are not available and may not be safe for evacuation purposes. When the fire alarm sounds, the elevators will be automatically recalled to a predetermined floor and shut off. Keep to the right of the stairwell as you descend as fire fighters may be coming up on the left as you are going down.

d) As you leave your area, take the following precautions if it is safe to do so. These activities must not significantly delay your departure—exercise good judgement.
3. Bomb Threats: University personnel receiving telephoned bomb threats should attempt to get the exact location where the bomb has been planted, or is going to be planted. Also attempt to get as much information as possible about the caller (e.g., male or female, accent, etc.). Listen for the background noise that may indicate the location of the caller. After receiving the threatening call, report it immediately to University Police at 9 – 911. Bomb threats received through the mail or by other means or suspicious packages delivered to departments are also to be reported immediately to University Police. Both a checklist which shows information that may aid in locating a telephone bomb threat and screening procedures for suspicious packages are provided as attachments D & E to this SOP. (Attachment E &F, pages 20 & 21)

4. Chemical Spills: University safety/emergency personnel are required to take the following action when a chemical spill cannot be cleaned up safely with on-hand minor spill supplies provided by the department:

a) Call for emergency assistance at 9 – 911 (University Police will summon the Seattle Fire Department HazMat Response Team and Environmental Health & Safety to assist).

b) Provide as much information as possible: exact location, chemical(s) involved, if there is a fire hazard, volume spilled, persons injured, area evacuated, etc.

c) Attend to injured or contaminated persons and remove them from exposure

d) Alert personnel to evacuate the area, as appropriate. Pull the fire alarm pull station to alert building occupants and to summon the Seattle Fire Department.

e) If it safe to do so, turn of ignition and heat sources.

f) Close doors to the affected area.
5. **Earthquakes:** The actual movement of the ground in an earthquake is seldom the direct cause of death or injury. Most casualties result from falling objects and debris because the shocks can shake, damage or demolish buildings and other structures.

**Procedures during an earthquake:**

- a) Remain calm and reassure others. Think through the consequences of any actions taken.

- b) If indoors, watch for falling objects such as plaster or light fixtures and for high bookcases, cabinets, shelves and other furniture which might slide or topple. Stay away from windows. If in danger, get under a table or desk, in a corner away from windows or to an area where two walls meet such as the corners of the room or an interior hallway. Do not run outside. Encourage others to follow your example.

- c) If in a crowded public place, do not dash for exits. Move to the side walls away from windows. If you must leave the building, choose your exit as carefully as possible. Stairways may be damaged and elevators may fail.

- d) If outside, remain outside and avoid high buildings, walls, windows, power poles, downed power lines, and other objects that could fall. If possible, move to an open area away from all hazards. If you are in a car, pull over to the side of the road, stop the car and remain in your car until the earthquake is over. Do not park under overpasses or power lines.

**Procedures after an earthquake:**

- a) Check for injuries to personnel in your area. Do not attempt to move seriously injured persons unless they are in immediate danger of further injury. Render first aid assistance if required. Follow the building evacuation plan if necessary.

- b) Check for fires or fire hazards (e.g. spills of flammable or combustible liquid, or leaks of flammable gases).

- c) Do not use matches, lighters, open flame appliances or electrical switches until you are sure no gas leaks exist. If you are qualified to do so, check utility lines and equipment for damage; shut off gas and electrical power if possible and appropriate.

- d) Report injuries, emergencies and damages as appropriate. Use telephone systems only for urgent matters.

- e) Verify that spilled chemicals or other potentially harmful materials are cleaned up and properly disposed.
f) Be prepared for after-shocks. Although most of these are smaller than the main shock, some may be large enough to cause additional damage.

G. Emergency Supplies

DEPARTMENTAL SUPPLIES: It is quite possible that the University may be required to function without outside assistance for at least 72 hours following a widespread community emergency, such as an earthquake. In addition, there may be quite a few lesser emergency situations that nevertheless result in personnel being stranded at the University. Emergency supplies are located in the following departmental locations and are stocked with the supplies listed.

EMERGENCY SUPPLY STATIONS:

- E – wing — Main Office, 4th floor (E-401 Health Sciences Building)
- K – wing — 5th floor (K540 West Health Sciences Building)

EMERGENCY STATION SUPPLIES:

- Portable battery powered radio
- Batteries for radio, flashlights
- Flashlights
- Emergency blankets
- Clearly marked notebook with document copies (1 each):
  - UW Emergency Plan
  - Pharmacology Safety & Health Plan
  - Station inventory sheet of supplies

H. Securing Building Contents:

Because many emergency-related injuries result from objects inside a building falling on people or windows shattering and causing lacerations, it is important to properly secure building contents, (e.g., shelves, computers, chemicals, equipment, etc.). Work sites should be checked and corrected for:

a) Shelves or cabinets that are not bolted to the wall
b) Objects on shelves which may fall
c) Free-standing objects which do not have a high enough base: height ratio to be "fall-proof", (e.g., a tall cabinet)
d) Desks or seating areas directly under plate glass windows
e) Heavy hanging pictures, mirrors, or plants
f) Cupboards or cabinets without secure automatic latches
g) Objects on wheels which are not locked should be locked in one position
h) Heavy, breakable items not on the lowest possible shelf
i) Water heaters or cylinder gas tanks that are not secured to the wall
j) Doorways that might be blocked by falling objects

The items may often be secured easily using one or more of the following methods:

- Brackets to secure furniture, cabinets, and shelving to the wall or floor
- Industrial strength velcro
- Straps for water heaters
- Lips on shelves to prevent books or glassware, etc. from sliding off
- Spring–loaded or heavy duty latches on cupboard and cabinet doors

I. Protecting Building Contents

**COMPUTER/DATA BACK–UP PLANS:** Damage to computers or utility shutoff after a disaster may cause loss of precious information, research or time. If electrical power is interrupted, computer systems in buildings will be shut down. The department does not have procedures in place for backing–up administrative and research files on the file server. Therefore, it is critical that employees perform regular back–up of their own important files and that these files be stored off–campus. Consideration should also be given to storing extra copies of highly valuable documents, (e.g., research data) off–site; water damage from fire fighting has been now to cause considerable loss of hardcopy information.

**LABORATORY PLANS:** Many emergencies on campus are due to unattended departmental operations involving cooling water or unattended laboratory processes using gas burners or electrical heating equipment. Laboratory personnel should give careful consideration to laboratory operations, especially for periods outside of working hours when University buildings are mostly unoccupied, with the intent of reducing risks of losses when equipment failures occur.

**LABORATORY CULTURES/TISSUES/ANIMALS:** Back – up frozen cell lines and good records should be maintained to minimize loss of research in the event access to the laboratory is not possible after a disaster or if the cultures are contaminated as a result of a disaster. Consideration should be given to periodically sending back–up vials and documents to a colleague at another geographical location for safekeeping. Maintaining adequate back–up supplies also is important, as regular delivery and distribution of outside orders is uncertain after a widespread emergency.

J. Safety Program Record Keeping and Documentation

To meet State requirements, the department maintains records of all safety activities covering the previous twelve months. These records will be made available to EH&S personnel and representatives from the Department of Labor and Industries at their request. The Department of Pharmacology maintains a copy of the following on file in the departmental main office (E – 401, HSB):

- Accident/Incident Report
- Biohazard Safety Manual
- Evacuation Plans
- Departmental Safety & Health Plan
Employee training records
External Inspection/Audit Records
Internal Safety Inspection/Audit Records
Laboratory Safety Manual
Radiation Safety Manual
Supervisor Safety Meeting Records
Departmental Safety and Health Committee Meeting Minutes
## SAFETY COORDINATORS

<table>
<thead>
<tr>
<th>Lab</th>
<th>Name &amp; Phone #</th>
<th>Email</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Bajjalieh Lab (D–408, HSB)</td>
<td>Kelly Alexander, 616–2963</td>
<td><a href="mailto:kell@u.washington.edu">kell@u.washington.edu</a></td>
</tr>
<tr>
<td>2. Beavo Lab (F–404, HSB)</td>
<td>Cari Ostenson, 685–2169</td>
<td><a href="mailto:costenso@u.washington.edu">costenso@u.washington.edu</a></td>
</tr>
<tr>
<td>3. Catterall Lab</td>
<td>Beth Sharp, (F420, 5–1542)</td>
<td><a href="mailto:emshart@u.washington.edu">emshart@u.washington.edu</a></td>
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<tr>
<td></td>
<td>Tom Hinds (Cochran, 3–8891)</td>
<td><a href="mailto:trhinds@u.washington.edu">trhinds@u.washington.edu</a></td>
</tr>
<tr>
<td></td>
<td>Xiao–Bo Tang (E426, 5 – 3731)</td>
<td><a href="mailto:xiaotang@u.washington.edu">xiaotang@u.washington.edu</a></td>
</tr>
<tr>
<td>4. Chavkin Lab (D–422/424, HSB)</td>
<td>Janet Lowe, 543–1127</td>
<td><a href="mailto:jlowe@u.washington.edu">jlowe@u.washington.edu</a></td>
</tr>
<tr>
<td>5. McKnight Lab (K–554/560, HSB)</td>
<td>Stan McKnight, 616–4237</td>
<td><a href="mailto:mcknight@u.washington.edu">mcknight@u.washington.edu</a></td>
</tr>
<tr>
<td>6. Moon Lab (K–516/522, HSB)</td>
<td>Randy Moon, 543–1722</td>
<td><a href="mailto:rtmoon@u.washington.edu">rtmoon@u.washington.edu</a></td>
</tr>
<tr>
<td>7. Nathanson Lab (K–526, HSB)</td>
<td>Sharon Creason 543–8490</td>
<td><a href="mailto:screason@u.washington.edu">screason@u.washington.edu</a></td>
</tr>
<tr>
<td>8. Stella Lab (BB–1544, HSB)</td>
<td>Nephi Stella 221–5220</td>
<td><a href="mailto:nstella@u.washington.edu">nstella@u.washington.edu</a></td>
</tr>
<tr>
<td>9. Storm Lab (J–681D, HSB)</td>
<td>Matt Morasch, 543–3347</td>
<td><a href="mailto:mmorasch@u.washington.edu">mmorasch@u.washington.edu</a></td>
</tr>
<tr>
<td>10. Wang Lab (E–417, HSB)</td>
<td>Edith Wang, 616–5376</td>
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Attachment C to Department of Pharmacology Safety & Health Plan
Title: First–Aid Kit Locations

Location of First–Aid Kits

Administrative Office: E–401 HSB
Bajjalieh Lab: D–408 HSB
Beavo Lab: F–405 & F–407/410 HSB
Chavkin Lab: D–422/424 HSB
McKnight Lab: K–554 & K–560 HSB
Moon Lab: K–516 & K–522 HSB
Nathanson Lab: K–522 West & K–526 HSB
Stella Lab: BB–1544, 1577, and 1541
Storm Lab: J–681A, J–681D & J–681H HSB
Wang Lab: E–406 HSB
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<th>EH&amp;S COURSE</th>
<th>Safety Coordinator</th>
<th>Office Staff</th>
<th>Lab Staff</th>
<th>Faculty</th>
<th>Fellows/Ph.D.</th>
<th>Students</th>
<th>Visitors</th>
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Key: R=Required, S=Suggested
University personnel receiving telephoned bomb threats should attempt to get the exact location where the bomb has been planted, or is going to be planted. Also attempt to get as much information as possible about the caller, e.g., male or female, accent, etc. Listen for any background noise that may indicate the location of the caller. The checklist below shows the information that can aid in locating a bomb. Complete the checklist as soon as possible after receiving a threatening call and report it immediately to the University Police Department at 9–911 (TDD 543–3323). Bomb threats received through the mail or by other means are also to be reported immediately to the University Police Department.

**Bomb Threat Call Checklist**

<table>
<thead>
<tr>
<th>Date: __________________________</th>
<th>Time of Call: __________________________</th>
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<tr>
<td>Call Received By: __________________________</td>
<td>Phone No.: __________________________</td>
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<tr>
<td>Record the exact language of the threat: __________________________</td>
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</table>

Keep Caller on the Phone. Ask:

**WHEN** is the bomb set to go off? __________________________

**WHERE** is the bomb located? __________________________

**WHY** are you doing this? __________________________

**WHO** are you? __________________________

Voice on the phone:

Man__________  Woman__________  Child__________  Age__________

Intoxicated__________  Accent__________  Speech Impediment__________

Other________________________

Background Noise:

Music__________  Children__________  Airplane__________  Talk__________

Traffic__________  Typing__________  Machines__________  Other__________
What To Look For:

_ Large envelopes with excessive postage (too many stamps).
_ Bulk and weight of packages greater than normal airmail (2 ounces or more).
_ Packages that are rigid or stiffer than normal, particularly in the center.
_ An unexpected piece of mail, or one from an unknown sender.
_ Fictitious or no return address.
_ Oil stains on the package.
_ Unprofessionally wrapped packages with endorsements such as “PERSONAL”, PRIVATE”, “FRAGILE – HANDLE WITH CARE”, “RUSH – DO NOT DELAY”.
_ Protruding wires, foil, or string.
_ Packages that make sloshing, buzzing, or ticking sounds.
_ Packages with combinations of tapes to secure them.
_ Postmarks that differ from the return address.
_ Inaccurate address information or misspelled names, etc.

What To Do If You Find a Suspicious Package:

_ DO NOT OPEN IT!
_ Isolate the package and evacuate the area.
_ Call the University Police (9–911) if on campus, or your local police if at home (911).