



Cleaning, Waste Disposal & Chemical Storage	
SOP Number:	170.03
Date:	13-May-2020

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1. General

- 1.1 The static magnetic field in the CFMM MRI facilities is always present. It is essential that everyone entering the facility is aware of the presence of the magnetic field, since we cannot otherwise detect it (i.e. magnetic fields cannot be seen or felt).
- 1.2 Care must be taken to ensure only MRI Safe equipment and supplies taken into the magnet room. The CFMM MRI areas have non-magnetic cleaning equipment available for use in the magnet room -- i.e. non-magnetic mop bucket & handle, etc
- 1.3 All experimental equipment and devices must be returned to its original storage location at the completion of each study or procedure. This includes coils, formers, foam pieces, positioning aids, monitoring devices, tape, etc.
- 1.4 A housekeeping checklist is posted in each of the MRI animal prep areas to comply with Animal Care Committee recommendations for record keeping and must be completed after each animal experiment. See Appendix 10 "Housekeeping Log – Animal Experimentation".
- 1.5 Empty animal cages must be returned to the originating facility for cleaning and bedding disposal.
- 1.6 Properly packaged, labelled and documented waste (sharps, fixed tissues, chemicals) can be taken directly to Robarts Loading Dock every Thursday morning at 9:25am.

2. Decontamination

- 2.1 All countertops, surfaces and equipment that have come in contact with an animal or patient must be cleaned using 70% isopropyl alcohol, Peroxigard or a disinfectant specified by the HSREB or ACC approved Animal Use Protocol (AUP).
- 2.2 MRI Control Rooms and waiting areas must be cleaned in-between scanning groups, with commonly used surfaces such as keyboards, phones, door handles with Peroxigard or equivalent.
- 2.3 Severely soiled areas caused by mud, salt, etc. must be cleaned with an MRI safe broom and/or mop as soon as reasonably possible. Staff, participants, and students may be asked to bring indoor shoes or don bootie coverings.
- 2.4 All garbage and recycling containers will be emptied by Western caretaking staff according to a schedule appropriate for each area.



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3. **Linens (3T/7T)**

- 3.1 The CFMM obtains linens provided by London Hospital Linen Service Inc (LHLSI) accommodated through University Hospital (UH). The cart containing fresh linens can be picked up from the UH side of the 1st floor Cuddy Wing link from the CFMM.
- 3.2 Used linens must be put in a soiled linen bag after patient use. Do not overfill the bags. Full bags should be dropped off at the same location as pickup listed above, for laundering.

4. **Sharps**

- 4.1 Sharps are to be placed in an approved puncture-resistant autoclavable Biohazard container. If **syringes** can be safely removed from their capped needle, they can be placed in the regular garbage.
- 4.2 Full sharps containers require a RED or ORANGE “Waste Material for Incineration” sticker as well as the Material for Hazardous Waste Disposal Form (pictured at the end of this SOP). Stickers can be obtained from the 9.4T Veterinary Technician or Robarts Safety Officer.



5. **Chemicals**

- 5.1 All chemicals need to be labelled with the Principal Investigators name and date received. A Safety Data Sheet (SDS) must accompany all new chemicals and should be placed in the SDS binder in the appropriate storage area or prep room. Chemicals are normally shipped with an SDS. If one is not included, they are available online through the company the chemical was ordered from.
- 5.2 Chemical waste requires a WHITE “Hazardous Material for Disposal” sticker, as well as the Material for Hazardous Waste Disposal Form (pictured at the end of this SOP). Stickers can be obtained from the 9.4T Veterinary Technician or Robarts Safety Officer.



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HAZARDOUS MATERIAL FOR DISPOSAL

NAME OF CONSTITUENT(S)	% TOTAL CONTENT

PRINCIPAL HAZARD(s): _____

In the event of an emergency, please call:

Research Director : _____

Phone Number : _____

Location of Lab : _____

Date : _____

APR 2016 0001

6. Glassware

6.1 Waste glassware is to be placed in a “Broken Glass Disposal” container (available through VWR Canada) or equivalent sturdy container that is easily sealed for disposal. A full box must be taped shut and placed in the dumpster outside of Robarts loading dock.

7. Biohazardous Materials

- 7.1 Any item that contains biological material (animal or human) is considered biohazard material i.e. gloves, paper towel, alcohol swabs, cotton-tipped applicators, catheters. IV lines; and should be disposed of using a RED biohazard bag. Bags can be obtained in either of the 3T/7T or 9.4T MRI areas.
- 7.2 Full bags are to be sealed with tape, and must include a contact name, phone number and room number. Full bags are taken to the Autoclave Area, Room 0283, in the basement of Robarts.
- 7.3 Refer to the “Hazardous Materials Management Handbook” provided through Western for more information. Specific questions regarding Biohazardous Materials should be directed to the Robarts Safety Officer.



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Western
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MATERIAL FOR HAZARDOUS WASTE DISPOSAL

1) Source:

Bldg: _____ Room _____ Lab Supervisor: _____

Submitted by: _____ Phone: _____

2) Package Contents: (check all that apply)

Physical Forms: Solid Liquid Gas

Container Materials: Plastic Glass Metal Other _____

Hazards: Flammable Oxidizer Corrosive Toxic Air/Water Reactive

Biohazard Name of organism: _____

Disinfection?

YES, Autoclaved (each container tagged with 'Treated Biomedical Waste')

YES, Chemical (indicate chemical used _____)

NO, Bag must have Western Incinerator label with appropriate coloured tape

Radioactive Attach "Safe Transport of Radioactive Material Form"

3) Individual containers: Please note that each individual container in the package must have a label listing its contents (including water) in order of decreasing concentration. These labels are available from Western Health & Safety.

ITEM #	DESCRIPTION OF CONTENTS	CONTAINER SIZE
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____
6.	_____	_____
7.	_____	_____
8.	_____	_____
9.	_____	_____
10.	_____	_____

4) Special Handling/Warnings: _____

August 2012



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Revision Chronology		
Version Number	Date	Changes
145.01	01 September 2006	First Version
170.02	17 April 2020	Merged old SOPs / New SOP created
170.03	13 May 2020	Reference to Housekeeping Log (MB, JG)

CFMM Director Signature:

Date:

13 – May – 2020
