

**Georgetown University**  
*Office of Environmental Health and Safety*

*Room LM12 Preclinical Science  
3900 Reservoir Road N.W.  
Washington D.C. 20057-1431*

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June 18, 2003

To: All Principal Investigators  
From: Susan M. Martin, Director  
Subject: Supervising Students in Laboratories

Each summer, students come to GU laboratories for training in biomedical research. It is critical that we take appropriate responsibility for the safety, as well as mentoring, of these students. The following principles are necessary to assure the safety of our trainees:

1. Students must be supervised at all times when working with potentially hazardous materials.
2. Students must register to attend safety training courses relevant to the laboratory procedures they will be performing. EH&S provides general safety training for chemical, biological and radiological hazards. (Register at ext. 7-4712)
3. Supervisors must provide and document laboratory specific safety training. Please use the **form provided below**, "Laboratory Safety Review for Students," to document the required training.
4. Minor students under the age of 18:
  - Λ Must obtain a DC Work Permit from the Child Labor Office, (202) 442-5108.
  - Λ Parents must sign the GU "Parental Consent Form" for minors to work in a laboratory. The consent form must list any potentially hazardous materials the student may encounter or work with. The **form provided below**, must be completed and forwarded to Human Resources along with other hiring documents. A copy must also be sent to EH&S.
  - Λ Parents must sign an "Authorization of Emergency Medical Treatment of a Minor." The form must be completed and retained in the department.

We are responsible for giving these young people a safe and scientifically rewarding experience at Georgetown University. The first step is to set a good example with regard to safety. Department Chairs and Principal Investigators are directly responsible for following these rules and assuring that students are appropriately hired, trained, and supervised.

Thank you

## Laboratory Safety Review for Students (rotational, visiting, summer)

PI/Lab Supervisor: \_\_\_\_\_ Date: \_\_\_\_\_  
Print

Department: \_\_\_\_\_ Bldg/Lab #: \_\_\_\_\_  
Print

Student Name: \_\_\_\_\_ Student Signature: \_\_\_\_\_  
Print

**The following topics have been reviewed with the student. (Place a check [✓] by all items covered)**

1.  Review of specific research being conducted in the laboratory
2.  Explanation and Reinforcement of Georgetown University laboratory safety requirements i.e. review of hazardous materials utilized in lab (Biological, Chemical, Physical, **Radiological** [**Please contact the Radiation Safety Office for training guidelines**]).
3.  Instruction on known symptoms associated with exposure to highly toxic chemicals or infectious agents used in the laboratory
5.  Review of the laboratory Chemical Hygiene Plan and all Standard Operating Procedures
6.  Location of Material Safety Data Sheets and instructions on use.
7.  Location of Protective Equipment and demonstrated use (Eye Protection, Footwear, Gloves, Laboratory Coat, Surgical Mask, Biological Safety Cabinet, Fume Hood).
8.  Location of compressed gas cylinders with demonstrated proper set-up and storage procedures.
9.  Review of emergency procedures for: Building evacuation, Sheltering-in/Gathering-in, Personal injury, and Spills of hazardous materials.
10.  Identification of Emergency Equipment locations and procedures (Emergency Eyewash, Emergency Shower, Fire Alarm Pull Station, Fire Extinguisher, Telephone, etc.).
11.  Location of the Waste Disposal Flip Chart and Explanation of waste procedures for animal carcasses, bio-hazardous materials, chemicals, sharps/broken glass, and **radioactive material** [**Refer to the Radiation Safety Manual for guidelines**].
12.  Review of laboratory signage system as indicated on laboratory door posting.
13.  Familiarity of Georgetown University safety manuals (Laboratory Safety Guidelines, Chemical Hygiene Plan, Radiation Safety Manual, and Bio-Safety Manual).
14.  Registration for Safety Compliance Orientation and Training with Environmental Health and Safety (EH&S) at ext. 7-4712. This training includes Chemical, Radiological, and Biological Safety in laboratories, Bloodborne Pathogens Standard, Hazardous Waste, Emergency Procedures and Life Safety.

**Retain this copy in the Office Environmental Health and Safety**

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**Minor Student**  
**Parental Consent Form**

The undersigned parent/guardian of \_\_\_\_\_ understands, hereby consents and agrees as follows:

My child has been offered the opportunity to work at Georgetown University, assigned to the following laboratory:

Principal Investigator/Authorized User:

Term of Internship

\_\_\_\_\_

\_\_\_\_\_

I/we understand that routine biomedical research may involve the use of chemicals, radioisotopes, biohazardous materials and/or scientific instruments which may be hazardous, particularly if used improperly.

My child will be required to attend a laboratory safety instruction course, and will be instructed/ supervised in the proper handling of instrumentation and materials to minimize risks.

I/we understand that research in this laboratory may involve use of the hazardous substances or devices checked below. A Laboratory Supervisor will provide specific instruction(s) and supervision to the student.

- Biological Hazards:**
  - Infectious Agents\*  
(Bacteria, viruses, fungi, parasites, rickettsial, prions)
  - Recombinant DNA
  - Non-Human Vertebrate Animals and Tissue
  - Human Blood, Bodily fluids and/or and Tissue
- Chemicals:** (i.e., hazardous, flammable, explosive, toxic, carcinogenic, mutagenic, etc.).
- Equipment:** (i.e., centrifuges, autoclaves, fume hoods, etc.). Student will be instructed on the proper operational procedures and safety precautions for the equipment to be used.
- Radioactive Materials:** (i.e., low level stock solutions used in labeling techniques).

“I/we hereby acknowledge the circumstances and risks described above. In consideration of Georgetown’s allowing my child to work in the above-referenced laboratory, I/we hereby release and hold harmless Georgetown University and its employees from any liability that may arise from my child’s failure to follow proper safety procedures in the Georgetown University laboratory.”

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian Name (please print)

## Students in Laboratories

### Authorization for Emergency Medical Treatment of a Minor

If my child, \_\_\_\_\_ becomes ill or is involved in an accident and I can not be contacted, I authorize the following hospital or physician to give the emergency treatment.

Hospital \_\_\_\_\_

Or nearest available hospital

I accept responsibility for any necessary expense in the medical treatment of my child, which is not covered by the following:

Health Insurance Company/Plan \_\_\_\_\_

Policy # \_\_\_\_\_ Coverage \_\_\_\_\_

Medicaid Number \_\_\_\_\_

Child's Physician \_\_\_\_\_ Phone \_\_\_\_\_

Child's known allergies \_\_\_\_\_

Other health concerns \_\_\_\_\_

Date \_\_\_\_\_

Signature \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

**Thank You**

**Retain this copy in the Department**