Standard Operating Procedure

Lead Arsenate

*This is an SOP template and is not complete until: 1) lab specific information is entered into the box below 2) lab specific protocol/procedure is added to the protocol/procedure section and
3) SOP has been signed and dated by the PI and relevant lab personnel.*

 Print a copy and insert into your
*Laboratory Safety Manual* and *Chemical Hygiene Plan*.
Refer to instructions for assistance.

|  |  |
| --- | --- |
| **Department:** | Click here to enter text. |
| **Date SOP was written:** | Click here to enter a date. |
| **Date SOP was approved by PI/lab supervisor:** | Click here to enter a date. |
| **Principal Investigator:** | Click here to enter text. |
| **Internal Lab Safety Coordinator/Lab Manager:** | Click here to enter text. |
| **Lab Phone:** | Click here to enter text. |
| **Office Phone:** | Click here to enter text. |
| **Emergency Contact:** | Click here to enter text. |
| *(Name and Phone Number)* |
| **Location(s) covered by this SOP:** | Click here to enter text. |
| *(Building/Room Number)* |

**Type of SOP:** [ ]  Process [x] Hazardous Chemical [ ]  Hazardous Class

**Purpose**

Lead arsenate is a carcinogen. This SOP provides information about its hazards and how to mitigate them through proper controls, handling, and storage. It was used as an insecticide because of its adherence to the plants surface, and prolonging the insecticidal effects. But due to the strong adherence, residue still remained despite washing the surface. Lead arsenate was eventually banned in the US as an insecticide in 1988.

**Physical & Chemical Properties/Definition of Chemical Group**

CAS#: 3687-31-8

Class: **Carcinogen**

Molecular Formula: Pb3As2O8

Form (physical state): Powder

Color: White

Melting point: N/A

**Potential Hazards/Toxicity**

Oral LD50 [Rat]: 825 mg/kg

* *Inhalation:* Lead arsenate can be absorbed through the respiratory system. Local irritation of bronchia and lungs can occur and, in cases of acute exposure, symptoms such as metallic taste, chest and abdominal pain, and increased lead blood levels may follow.
* *Ingestion:* POISON! The symptoms of lead poisoning include abdominal pain and spasms, nausea, vomiting, headache. Acute poisoning can lead to muscle weakness, "lead line" on the gums, metallic taste, loss of appetite, insomnia, dizziness, high lead levels in blood and urine with shock, coma and death in extreme cases.
* *Skin Contact:* Lead and lead compounds may be absorbed through the skin on prolonged exposure; the symptoms of lead poisoning described for ingestion exposure may occur. Contact over short periods may cause local irritation, redness and pain.
* *Eye Contact:* Absorption can occur through eye tissues but the more common hazards are local irritation or abrasion.
* *Chronic Exposure:* Lead is a cumulative poison and exposure even to small amounts can raise the body's content to toxic levels. The symptoms of chronic exposure are like those of ingestion poisoning; restlessness, irritability, visual disturbances, hypertension and gray facial color may also be noted.

**Personal Protective Equipment (PPE)**

**Respiratory Protection**

Respirators should be used only under any of the following circumstances:

* As a last line of defense (i.e., after engineering and administrative controls have been exhausted).
* When Permissible Exposure Limit (PEL) has exceeded or when there is a possibility that PEL will be exceeded.
* Regulations require the use of a respirator.
* An employer requires the use of a respirator.
* There is potential for harmful exposure due to an atmospheric contaminant (in the absence of PEL)
* As PPE in the event of a chemical spill clean-up process

Lab personnel intending to use/wear a respirator mask must be trained and fit-tested by ORS and should contact occhealt@uga.edu. This is a UGA requirement described in more detail in the [UGA Respiratory Protection Plan](https://esd.uga.edu/sites/default/files/respiratoryprotection.pdf) and supported by the [Office of Research Occupational Health and Safety Program](https://research.uga.edu/ohsp/).

**Hand Protection**

Nitrile, chloroprene, or rubber gloves are recommended. Gloves must be inspected prior to use. Use proper glove removal technique (without touching glove's outer surface) to avoid skin contact with this product. Dispose of contaminated gloves after use in accordance with applicable laws and good laboratory practices. Wash and dry hands.

NOTE: Consult with your preferred glove manufacturer to ensure that the gloves you plan on using are compatible with lead arsenate.

Refer to glove selection chart from the links below:

<http://www.ansellpro.com/download/Ansell_8thEditionChemicalResistanceGuide.pdf>

OR

<http://www.allsafetyproducts.biz/page/74172>

OR

<http://www.showabestglove.com/site/default.aspx>

OR

<http://www.mapaglove.com/>

**Eye Protection**

ANSI approved safety glasses or goggles.

**Skin and Body Protection**

Lab coats should be worn. These laboratory coats must be appropriately sized for the individual and be buttoned to their full length. Laboratory coat sleeves must be of a sufficient length to prevent skin exposure while wearing gloves.

**Hygiene Measures**

Wash thoroughly after handling. Wash hands before eating. Remove contaminated clothing and wash before reuse.

**Engineering Controls**

Work with this chemical in a certified ducted fume hood. Facilities storing or utilizing this material should be equipped with an eyewash facility and a safety shower.

**First Aid Procedures**

**If inhaled**

Remove to fresh air. If not breathing, give artificial respiration. If breathing is difficult, give oxygen. Get medical attention.

**In case of skin contact**

Immediately flush skin with plenty of water for at least 15 minutes while removing contaminated clothing and shoes. Get medical attention immediately. Wash clothing before reuse. Thoroughly clean shoes before reuse. Contaminated work clothes should be laundered by individuals who have been informed of the hazards of exposure to this substance.

**In case of eye contact**

Immediately flush eyes with plenty of water for at least 15 minutes, lifting lower and upper eyelids occasionally. Get medical attention immediately

**If swallowed**

Remove to fresh air. If not breathing, give artificial respiration. If breathing is difficult, give oxygen. Get medical attention.

 **Special Handling and Storage Requirements**

* All work with lead arsenate is to be done in a “designated area” in order to keep contamination to a minimum.
* All chemicals containing lead must be secondarily contained with proper signage. Containers of lead arsenate and designated areas, including storage cabinets, must be labeled with a “CANCER HAZARD” warning. Any persons in this area are required to wear personal protective equipment. Safety shower and eye wash stations should be easily accessible where lead arsenate is used.
* All laboratory equipment (such as beakers, pipettes, etc.) used in the designated area are to be labeled and are not to be removed from the area without first being decontaminated.
* Store away from incompatible chemicals including the following: active metals such as iron, aluminum, and zinc, hydrogen gas, strong acids, and strong oxidizers.

**Spill and Accident Procedure**

**Chemical Spill Dial 911**

**24-7 On-Call Response to Research, Environment, Health or Safety Concerns Dial 2-5561 from a campus phone or 706-542-5561 from a non-campus line.**

**Spill** – Follow the procedures set out in the [UGA Chemical and Laboratory Safety Manual.](http://research.uga.edu/docs/units/safety/manuals/Chemical-Laboratory-Safety-Manual.pdf)

[If there are any chemical-specific protocols for responding to a spill, insert them here or mark “none”:]

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# **Medical Emergency Dial 911**

**Life Threatening Emergency, After Hours, Weekends And Holidays** – Dial **911** or the emergency phone numbers listed at the beginning of the UGA Chemical and Laboratory Safety Manual

*Note: All incidents that result in an injury or property damage must be reported to ORS / ESD using a University Incident/Accident Report.*

**Non-Life Threatening Emergency** – Follow the instructions in the UGA Chemical and Laboratory Safety Manual.

*Note: All incidents that result in an injury or property damage must be reported to ORS / ESD using a University Incident/Accident Report.*

**Decontamination/Waste Disposal Procedure**

**For general hazardous waste disposal procedures, see Appendix H of the UGA Chemical and Laboratory Safety Manual.**

**Chemical Specific Procedures: [to be inserted or marked as “none”]**

Waste disposal procedures

1. All solid lead arsenate contaminated waste shall be disposed of into waste containers specifically designated for lead arsenate waste. Examples of solid lead arsenate waste material include gloves, pipette tips, and paper towels.
2. Waste containers must be labeled with “CANCER HAZARD” warning.
3. Once the waste container is full, dispose of as hazardous waste.

Decontamination of Equipment

Equipment that needs to be decontaminated (for repair or change of location etc.) must be washed with soapy water and rinsed with copious amounts of water.

**Safety Data Sheet (SDS) Location**

UGA personnel can access Online SDS through a link in the upper left corner of the ESD home page (<https://esd.uga.edu>) and logging in by using their UGA email user name and password.

**Protocol/Procedure (Add lab specific Protocol/Procedure here)**

*(Add specific description of procedure.)*

**NOTE**

Any deviation from this SOP requires approval from PI.

**Documentation of Training** (signature of all users is required)

* Prior to conducting any work with lead arsenate, designated personnel must provide training to his/her laboratory personnel specific to the hazards involved in working with this substance, work area decontamination, and emergency procedures.
* The Principal Investigator must provide his/her laboratory personnel with a copy of this SOP and access to the SDS provided by the manufacturer.
* The Principal Investigator must ensure that his/her laboratory personnel have attended appropriate laboratory safety training or refresher training within the last 12 months.

**Principal Investigator or Lab Supervisor SOP Approval**

Print name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Approval Date:

I have read and understand the content of this SOP:

|  |  |  |
| --- | --- | --- |
| **Name** | **Signature** | **Date** |
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