5.0 SAFETY AND PRECAUTIONS

The TBI FCU shall follow the safety guidelines and policies outlined in the following materials:

- TBI Occupational Safety Program Manual
- TBI Occupational Safety & Health Program Plan
- TBI Quality Assurance Manual
- Appropriate Safety Data Sheets (SDS)

Many exhibits examined by the TBI FCU contain potential chemical, physical, and infectious biological hazards. The analyst should exercise caution when working with these materials at all times.

5.1 Personal Protective Equipment (PPE)

Laboratory protective clothing, gloves, eye protection and/or face masks should be worn when handling submitted evidence and laboratory chemicals. PPE will be provided by the TBI FCU.

5.2 Naloxone Injectors/Nasal Sprays

TBI has developed a naloxone program to address any potential exposure to potentially potent opioids. Naloxone injectors/nasal sprays are readily accessible in each TBI FCU. Please refer to the Naloxone Policy outlined in the TBI Policy and Procedures available through PowerDMS.

Analysts should also use face masks, gloves, and eye protection when dealing with suspected exhibits of potent opioids to minimize exposure.

5.3 Hazardous Exhibit Handling Procedures

5.3.1 Safety seals

5.3.1.1 The analyst will "safety seal" any exhibits that contain potent opioids or other significant hazards prior to returning it to Evidence Receiving. A safety seal consists of encasing the entire exhibit (in its original outer packaging) in a high-density plastic bag that is then heat sealed.

5.3.1.2 The exhibit’s LIMS bar code must be completely visible within the bag. Appropriate labels will be placed on the bag to alert Evidence Receiving of the hazardous contents.

5.3.1.3 This seal does not require additional markings or initials. However, the analyst will document the safety seal in their case notes.

5.3.1.4 Re-applying a safety seal to an exhibit that has been previously safety sealed by Evidence Receiving is not required if the analyst does not detect any potentially hazardous substances.
5.3.2 Needles and other sharp objects

5.3.2.1 Processed syringes will have the needle removed and properly disposed of whenever possible. Removed needles will not be returned to the agency.

5.3.2.2 If removing the needle is not possible or may create a hazardous condition for the analyst, the syringe will be placed in a specially designed puncture proof container with the needle immobilized using the container’s immobilization media.

5.3.2.3 Any evidence that contains other sharp objects must be packaged for safe handling. Sharp objects may include, but are not limited to, razor blades, knives, and broken glass.

5.4 Hazardous Waste Disposal within the TBI FCU

5.4.1 Glassware, vials, and other sampling containers will be appropriately rinsed, and any hazardous liquids will be stored in appropriate waste containers kept in the FCU fume hoods. All stored chemical waste will be disposed of off-site by an approved reputable vendor.

5.4.2 Used glass will be discarded into lined glass disposal boxes located within the FCU. These boxes will be sealed with clear tape to prevent spillage. Filled boxes can be disposed of using existing office waste disposal facilities at TBI.