

**VA NORTHEAST OHIO HEALTHCARE SYSTEM  
Louis Stokes Cleveland DVAMC  
Medical Research Service  
Subcommittee on Research Safety Policy**

**Effective Date: May 13, 2020**

**SOP Title: LABORATORY MOVING POLICY**

**SOP Number: SRS--004**

**SOP Version: .07**

**Author:**

**Name: John M. Schaffer, B.A.  
Title: Research Safety Coordinator  
Department: Medical Research Service**

---

**John M. Schaffer, B.A.**

**Subcommittee on Research Safety Chair:**

---

**Krisztina M. Papp-Wallace, Ph.D.**

**Approved By:**

**Associate Chief of Staff/Research**

---

**Neal S. Peachey, Ph.D.**

**VA NORTHEAST OHIO HEALTHCARE SYSTEM**  
**Louis Stokes Cleveland DVAMC**  
**Medical Research Service**  
**Subcommittee on Research Safety Policy**

**Effective Date: May 13, 2020**

**SOP Title: LABORATORY MOVING POLICY**

**SOP Number: SRS--004**

**SOP Version: .07**

1. **PURPOSE:** To establish guidelines that will facilitate the safe transfer of laboratory contents. It is presented to guide investigators on the safe packaging and transportation of laboratory materials in the event of a move, and to protect those individuals engaged to perform the move. It also outlines management's position on the investigator's rights to VA purchased materials.
2. **POLICY:** It is policy of the Louis Stokes Cleveland Department of Veteran Affairs Medical Center (Louis Stokes Cleveland DVAMC) to safeguard all VA property located within the research laboratories and to safeguard the portability of these items should the need arise.
3. **DEFINITIONS:**
  - a. ACOS – Associate Chief of Staff
  - b. CFR – Code of Federal Regulations
  - c. CWRU - Case Western Reserve University.
  - d. Departing investigator - The investigator moving out of a laboratory.
  - e. Incoming investigator - The investigator moving into a laboratory.
  - f. Mover - The person/people who will be performing the move (VA Engineering Service Grounds Crew, or an outside mover).
  - g. PI – Principal Investigator
  - h. PPE - Personal Protective Equipment
  - i. Pre-approved Materials - Materials that the incoming investigator has agreed to take possession of that previously belonged to the departing investigator. The incoming investigator will assume ownership and responsibility for all pre-approved materials.
  - j. RAM - Radioactive Materials.
  - k. RSO - Radiation Safety Officer.
  - l. Supplies - Items other than glassware, chemicals, sharps or equipment. Generally pipette tips, culture dishes, microscope slides, etc.
4. **RESPONSIBILITY:**
  - a. **DEPARTING INVESTIGATOR:**
    - (1) VHA HANDBOOK 1058.01(May 21, 2010) states that:

A. A request for authorization to decommission laboratory space must be made in writing (to the SRS and the ACOS/Research) at least 1 month prior to implementation.

B. The PI or Laboratory Director must obtain authorization from the SRS and the ACOS/Research prior to reassigning, vacating, converting to non-laboratory use, or otherwise decommissioning existing laboratory space that requires identification and disposal of hazardous materials, infectious agents, or equipment between uses.

(1) Ensures that the laboratory has been decommissioned for RAM and other safety hazards as outlined in Medical Research Service SOP SRS-005 (Laboratory Decommissioning Policy).

(2) Supervises the identification and distribution of VA purchased chemicals and supplies as directed in sections 5.b. through 5.h. below.

(3) Ensures that VA equipment will not be removed, unless the Administrative Officer (extension 4657) has authorized transfer to the new VA or approved off-site location.

(4) Ensures that materials and equipment to be moved are free from chemical contaminants. Equipment used for RAM must be cleared by Radiation Safety. Any hazards remaining (sharp edges, un-removable contamination, etc.) are labeled with hazard identification and required PPE.

(5) Supervises the packing of the materials authorized to leave the laboratory. Ensures that chemicals are protected from breakage and leakage, boxes are not too heavy, and that the contents of refrigerators, ovens, freezers, etc. have been removed.

b. TECHNICIAN:

(1) Assists the investigator to comply with this policy.

c. ENGINEERING SERVICE GROUNDS CREW:

(1) Ensures that all Authorized Users have had their laboratory decommissioned before beginning the moving process.

(2) Ensures packaging is secure.

(3) Identifies labeled hazardous materials and ensures that proper PPE is available and will be used.

(4) Identifies any leaking or hazardous situations to the departing investigator for immediate action.

(5) Refuses to transport any material marked "Radioactive Material". All material/equipment marked "Radioactive Material" shall not be removed without clearance from Radiation Safety.

(6) Are trained personnel from the Engineering Service Grounds Crew who transport heavy equipment, boxes, etc.

d. ACOS/RESEARCH:

(1) Upon receiving a request for authorization to decommission laboratory space, the ACOS for Research must notify the VISN Safety Office to coordinate inventory and removal of hazardous materials, infectious agents, or equipment.

5. PROCEDURE: Follow subparts a-f for a safe move. Always pack materials in strong cardboard boxes, seal shut and label. Include the destination and the investigator's name on the label. Indicate the type of hazards contained within and include special handling procedures (i.e. PPE, fragile). Do not overfill or overload a box. Explain special hazards to movers when they arrive.

a. RAM:

DEPARTING INVESTIGATOR

- (1) Perform a close-out survey to document the laboratory is free of radioactive contamination.
- (2) Notify the Radiation Safety Officer of the laboratory status and request decommissioning.
- (3) Collect all radioactive waste and submit a radioactive waste pick-up request to Radiation Safety.

RADIATION SAFETY

- (1) Collect RAM waste, RAM material, and RAM user records.
- (2) Perform a detailed radiological survey to document that the laboratory meets the requirements for unrestricted use.
- (3) Notify the Authorized User and ACOS/Research of the radiological status and/or release of the laboratory for unrestricted use.

b. DISTRIBUTION OF CHEMICALS: The departing investigator must remove all chemicals from the laboratory except those that await disposal.

(1) If the departing investigator is not leaving the Louis Stokes VAMC, then he/she will maintain possession of all chemicals. They must be packed as indicated in 5.c. below. Unwanted chemicals must be dispersed as in 5.b. (2) and 5.b. (3) below.

(2) If the departing investigator is closing the laboratory or is leaving the employ of the VA, he/she must disperse VA purchased chemicals to other VA investigators. He/she must compile a list of these chemicals (use the annual inventory) and distribute it to all laboratories. The chemicals will be distributed on a first come-first serve basis. If the incoming investigator selects some of the chemicals, he/she must isolate them in the laboratory and clearly label them with his/her name and post a "DO NOT MOVE" sign. The departing investigator may retain chemicals remaining after the list has been circulated for a period of at least five working days. Unwanted chemicals must be reinventoried for disposal (see chemical disposal - 5.b. (3) below).

(3) If the investigator has an approved off-site waiver (full or partial) and the move involves the transfer of OSHA and/or EPA deemed hazardous chemicals, the Green Environmental Management System (GEMS) Coordinator must be contacted. The GEMS Coordinator will ensure that all hazardous materials are transferred according to Department of Transportation regulations.

(4) Unwanted chemicals must be disposed of as outlined in the Medical Research Service Safety Training Manual – Hazardous Chemical Disposal.

c. PACKING CHEMICALS: Compatible chemicals may be packed together. Glass bottles must be packed in such a way as to absorb shock from outside the box and to keep the bottles from hitting each other. Hazardous Chemicals must be transported in a container, which will absorb/contain the chemical in the event of

container breakage (i.e. – a heavy cardboard box or plastic tub filled with a Universal Absorbent). Each container must be labeled for the hazards it contains (i.e. breakable, flammable, corrosive, toxic, etc.). Appropriate PPE for each item to be moved must appear on the label (i.e. wear gloves). Items must be packed so that any breakage that may occur in transit will not result in an injury to the mover. Care must be taken to prevent incompatible chemicals from being packed together.

d. SHARPS: Used sharps must not be moved to a new laboratory. Leave the sharps container in the current laboratory, sealed shut and labeled "SHARPS - FOR DISPOSAL". Obtain a new sharps container upon arrival at the new facility.

e. GLASSWARE: When a move occurs within the Louis Stokes VAMC, to another VA facility, or to Case, the investigator retains possession of VA purchased glassware and supplies. If the laboratory is closing or the investigator is leaving the employ of the VAMC, all VA purchased glassware and supplies must be distributed to other VA investigators. This is most often accomplished by advertising a 'garage sale'. VA purchased glassware and supplies are placed in boxes and placed inside the lab. A note is sent to all other laboratories indicating the location and dates of the *sale* (not to be less than five working days). The boxes of glassware/supplies informing Environmental Management employees must display a sign: 'Do not dispose of before MM/DD/YY'. Investigators are not charged for these materials. All items are distributed on a first-come-first-serve basis. Glassware and supplies selected by the incoming investigator are to be placed into the laboratory and marked with his/her name with a "DO NOT MOVE" sign. The departing investigator may choose from any glassware or supplies remaining after the posted date. He/she must dispose of the remaining, unwanted materials as outlined in Sharp Materials Disposal in the Medical Research Service Safety Training Module. The distribution of glassware and supplies purchased from a source other than the Louis Stokes VAMC must be cleared through the purchasing institution. Glassware and supplies that will be moved must be transported in sealed, heavy cardboard boxes that will absorb the impact of handling and contain fragments safely in the event of breakage. No glassware will be transported without exterior packaging.

g. EQUIPMENT: The location of all tagged Louis Stokes CDVAMC equipment must be reported to the Program Assistant in K-117. If the move is within the Louis Stokes VAMC, the Program Assistant must be notified of the equipment's new location. For a move to another VA facility or off-site location used by a VA-funded investigator, approval from the Research and Development Committee must be obtained and reported to the Associate Chief of Staff/Research. All equipment transfers must also be documented and submitted to Acquisition and Materiel Management. If the departing investigator is closing the laboratory or leaving the employ of the VA, an ad hoc committee formed by the Research and Development Committee will redistribute all equipment.

(1) Instruction manuals will remain or be transferred with the equipment.

(2) Refrigerators, freezers and incubators are to be emptied before they are moved. Contents must be removed and packed separately.

h. SUPPLIES: If the departing investigator is closing the laboratory or is leaving the employ of the VA, VA-purchased supplies are subject to the same means of disbursement as glassware (4.e. above). A departing investigator, or another VA investigator, may take possession of any remaining supplies. The remaining, unwanted supplies are placed in the hallway for Environmental Management personnel to dispose of.

i. KEYS, ETCETERA:

(1) If the departing investigator is moving the laboratory away from VAMC property, all keys are to

be turned in to the RSC in K-117 the day the laboratory is decommissioned.

(2) If the departing investigator and any of his/her employees are terminating their VA employment, they must turn in all VA keys in their possession to the RSC in K-117 and must clear stations.

(3) To clear stations, contact the Administrative Officer/Research at extension 4657 a few days before the last workday. Allow at least one-half hour of the last workday for this procedure; mid-morning is best.

(4) Reference Medical Center Policy 005-008, "Employee Clearance".

6. REFERENCES: VHA Handbook 1058.01, Research Compliance Reporting Requirements.

7. RESCISSIONS: Medical Research Service Policy 151-D dated August 31, 1994. The rescission date of this Subcommittee on Research Safety Policy is May 10, 2023.

8. FOLLOW UP: Research Safety Coordinator/Chemical Hygiene Officer