Section IV—Laboratory Biosafety Level Criteria

The essential elements of the four biosafety levels for activities involving infectious microorganisms and laboratory animals are summarized in Table 2 of this section and discussed in Section 2. The levels are designated in ascending order, by degree of protection provided to personnel, the environment, and the community. Standard microbiological practices are common to all laboratories. Special microbiological practices enhance worker safety, environmental protection, and address the risk of handling agents requiring increasing levels of containment.

Biosafety Level 1

Biosafety Level 1 is suitable for work involving well-characterized agents not known to consistently cause disease in immunocompetent adult humans, and present minimal potential hazard to laboratory personnel and the environment. BSL-1 laboratories are not necessarily separated from the general traffic patterns in the building. Work is typically conducted on open bench tops using standard microbiological practices. Special containment equipment or facility design is not required, but may be used as determined by appropriate risk assessment. Laboratory personnel must have specific training in the procedures conducted in the laboratory and must be supervised by a scientist with training in microbiology or a related science.

The following standard practices, safety equipment, and facility requirements apply to BSL-1.

A. Standard Microbiological Practices

1. The laboratory supervisor must enforce the institutional policies that control access to the laboratory.

2. Persons must wash their hands after working with potentially hazardous materials and before leaving the laboratory.

3. Eating, drinking, smoking, handling contact lenses, applying cosmetics, and storing food for human consumption must not be permitted in laboratory areas. Food must be stored outside the laboratory area in cabinets or refrigerators designated and used for this purpose.

4. Mouth pipetting is prohibited; mechanical pipetting devices must be used.

5. Policies for the safe handling of sharps, such as needles, scalpels, pipettes, and broken glassware must be developed and implemented. Whenever practical, laboratory supervisors should adopt improved engineering and work practice controls that reduce risk of sharps injuries. Precautions, including those listed below, must always be taken with sharp items. These include:

   - ...
a. Careful management of needles and other sharps are of primary importance. Needles must not be bent, sheared, broken, recapped, removed from disposable syringes, or otherwise manipulated by hand before disposal.

b. Used disposable needles and syringes must be carefully placed in conveniently located puncture-resistant containers used for sharps disposal.

c. Non-disposable sharps must be placed in a hard walled container for transport to a processing area for decontamination, preferably by autoclaving.

d. Broken glassware must not be handled directly. Instead, it must be removed using a brush and dustpan, tongs, or forceps. Plastic ware should be substituted for glassware whenever possible.

6. Perform all procedures to minimize the creation of splashes and/or aerosols.

7. Decontaminate work surfaces after completion of work and after any spill or splash of potentially infectious material with appropriate disinfectant.

8. Decontaminate all cultures, stocks, and other potentially infectious materials before disposal using an effective method. Depending on where the decontamination will be performed, the following methods should be used prior to transport.

a. Materials to be decontaminated outside of the immediate laboratory must be placed in a durable, leak proof container and secured for transport.

b. Materials to be removed from the facility for decontamination must be packed in accordance with applicable local, state, and federal regulations.

9. A sign incorporating the universal biohazard symbol must be posted at the entrance to the laboratory when infectious agents are present. The sign may include the name of the agent(s) in use, and the name and phone number of the laboratory supervisor or other responsible personnel. Agent information should be posted in accordance with the institutional policy.

10. An effective integrated pest management program is required. (See Appendix G.)
11. The laboratory supervisor must ensure that laboratory personnel receive appropriate training regarding their duties, the necessary precautions to prevent exposures, and exposure evaluation procedures. Personnel must receive annual updates or additional training when procedural or policy changes occur. Personal health status may impact an individual's susceptibility to infection, ability to receive immunizations or prophylactic interventions. Therefore, all laboratory personnel and particularly women of childbearing age should be provided with information regarding immune competence and conditions that may predispose them to infection. Individuals having these conditions should be encouraged to self-identify to the institution’s healthcare provider for appropriate counseling and guidance.

B. **Special Practices**

None required.

C. **Safety Equipment (Primary Barriers and Personal Protective Equipment)**

1. Special containment devices or equipment, such as BSCs, are not generally required.

2. Protective laboratory coats, gowns, or uniforms are recommended to prevent contamination of personal clothing.

3. Wear protective eyewear when conducting procedures that have the potential to create splashes of microorganisms or other hazardous materials. Persons who wear contact lenses in laboratories should also wear eye protection.

4. Gloves must be worn to protect hands from exposure to hazardous materials. Glove selection should be based on an appropriate risk assessment. Alternatives to latex gloves should be available. Wash hands prior to leaving the laboratory. In addition, BSL-1 workers should:
   
   a. Change gloves when contaminated, glove integrity is compromised, or when otherwise necessary.
   
   b. Remove gloves and wash hands when work with hazardous materials has been completed and before leaving the laboratory.
   
   c. Do not wash or reuse disposable gloves. Dispose of used gloves with other contaminated laboratory waste. Hand washing protocols must be rigorously followed.
D. **Laboratory Facilities (Secondary Barriers)**

1. Laboratories should have doors for access control.

2. Laboratories must have a sink for hand washing.

3. The laboratory should be designed so that it can be easily cleaned. Carpets and rugs in laboratories are not appropriate.

4. Laboratory furniture must be capable of supporting anticipated loads and uses. Spaces between benches, cabinets, and equipment should be accessible for cleaning.
   
   a. Bench tops must be impervious to water and resistant to heat, organic solvents, acids, alkalis, and other chemicals.
   
   b. Chairs used in laboratory work must be covered with a non-porous material that can be easily cleaned and decontaminated with appropriate disinfectant.

5. Laboratories windows that open to the exterior should be fitted with screens.

**Biosafety Level 2**

Biosafety Level 2 builds upon BSL-1. BSL-2 is suitable for work involving agents that pose moderate hazards to personnel and the environment. It differs from BSL-1 in that: 1) laboratory personnel have specific training in handling pathogenic agents and are supervised by scientists competent in handling infectious agents and associated procedures; 2) access to the laboratory is restricted when work is being conducted; and 3) all procedures in which infectious aerosols or splashes may be created are conducted in BSCs or other physical containment equipment.

The following standard and special practices, safety equipment, and facility requirements apply to BSL-2.

**A. Standard Microbiological Practices**

1. The laboratory supervisor must enforce the institutional policies that control access to the laboratory.

2. Persons must wash their hands after working with potentially hazardous materials and before leaving the laboratory.

3. Eating, drinking, smoking, handling contact lenses, applying cosmetics, and storing food for human consumption must not be permitted in laboratory areas. Food must be stored outside the laboratory area in cabinets or refrigerators designated and used for this purpose.
4. Mouth pipetting is prohibited; mechanical pipetting devices must be used.

5. Policies for the safe handling of sharps, such as needles, scalpels, pipettes, and broken glassware must be developed and implemented. Whenever practical, laboratory supervisors should adopt improved engineering and work practice controls that reduce risk of sharps injuries. Precautions, including those listed below, must always be taken with sharp items. These include:

a. Careful management of needles and other sharps are of primary importance. Needles must not be bent, sheared, broken, recapped, removed from disposable syringes, or otherwise manipulated by hand before disposal.

b. Used disposable needles and syringes must be carefully placed in conveniently located puncture-resistant containers used for sharps disposal.

c. Non-disposable sharps must be placed in a hard walled container for transport to a processing area for decontamination, preferably by autoclaving.

d. Broken glassware must not be handled directly. Instead, it must be removed using a brush and dustpan, tongs, or forceps. Plastic ware should be substituted for glassware whenever possible.

6. Perform all procedures to minimize the creation of splashes and/or aerosols.

7. Decontaminate work surfaces after completion of work and after any spill or splash of potentially infectious material with appropriate disinfectant.

8. Decontaminate all cultures, stocks, and other potentially infectious materials before disposal using an effective method. Depending on where the decontamination will be performed, the following methods should be used prior to transport:

a. Materials to be decontaminated outside of the immediate laboratory must be placed in a durable, leak proof container and secured for transport.

b. Materials to be removed from the facility for decontamination must be packed in accordance with applicable local, state, and federal regulations.

9. A sign incorporating the universal biohazard symbol must be posted at the entrance to the laboratory when infectious agents are present. Posted information must include: the laboratory’s biosafety level, the
Laboratory Biosafety Level Criteria: BSL-2

supervisor’s name (or other responsible personnel), telephone number, and required procedures for entering and exiting the laboratory. Agent information should be posted in accordance with the institutional policy.

10. An effective integrated pest management program is required. (See Appendix G.)

11. The laboratory supervisor must ensure that laboratory personnel receive appropriate training regarding their duties, the necessary precautions to prevent exposures, and exposure evaluation procedures. Personnel must receive annual updates or additional training when procedural or policy changes occur. Personal health status may impact an individual’s susceptibility to infection, ability to receive immunizations or prophylactic interventions. Therefore, all laboratory personnel and particularly women of childbearing age should be provided with information regarding immune competence and conditions that may predispose them to infection. Individuals having these conditions should be encouraged to self-identify to the institution’s healthcare provider for appropriate counseling and guidance.

B. Special Practices

1. All persons entering the laboratory must be advised of the potential hazards and meet specific entry/exit requirements.

2. Laboratory personnel must be provided medical surveillance, as appropriate, and offered available immunizations for agents handled or potentially present in the laboratory.

3. Each institution should consider the need for collection and storage of serum samples from at-risk personnel.

4. A laboratory-specific biosafety manual must be prepared and adopted as policy. The biosafety manual must be available and accessible.

5. The laboratory supervisor must ensure that laboratory personnel demonstrate proficiency in standard and special microbiological practices before working with BSL-2 agents.

6. Potentially infectious materials must be placed in a durable, leak proof container during collection, handling, processing, storage, or transport within a facility.

7. Laboratory equipment should be routinely decontaminated, as well as, after spills, splashes, or other potential contamination.
a. Spills involving infectious materials must be contained, decontaminated, and cleaned up by staff properly trained and equipped to work with infectious material.

b. Equipment must be decontaminated before repair, maintenance, or removal from the laboratory.

8. Incidents that may result in exposure to infectious materials must be immediately evaluated and treated according to procedures described in the laboratory biosafety manual. All such incidents must be reported to the laboratory supervisor. Medical evaluation, surveillance, and treatment should be provided and appropriate records maintained.

9. Animal and plants not associated with the work being performed must not be permitted in the laboratory.

10. All procedures involving the manipulation of infectious materials that may generate an aerosol should be conducted within a BSC or other physical containment devices.

C. Safety Equipment (Primary Barriers and Personal Protective Equipment)

1. Properly maintained BSCs, other appropriate personal protective equipment, or other physical containment devices must be used whenever:

   a. Procedures with a potential for creating infectious aerosols or splashes are conducted. These may include pipetting, centrifuging, grinding, blending, shaking, mixing, sonicating, opening containers of infectious materials, inoculating animals intranasally, and harvesting infected tissues from animals or eggs.

   b. High concentrations or large volumes of infectious agents are used. Such materials may be centrifuged in the open laboratory using sealed rotor heads or centrifuge safety cups.

2. Protective laboratory coats, gowns, smocks, or uniforms designated for laboratory use must be worn while working with hazardous materials. Remove protective clothing before leaving for non-laboratory areas, e.g., cafeteria, library, and administrative offices. Dispose of protective clothing appropriately, or deposit it for laundering by the institution. It is recommended that laboratory clothing not be taken home.

3. Eye and face protection (goggles, mask, face shield or other splatter guard) is used for anticipated splashes or sprays of infectious or other hazardous materials when the microorganisms must be handled outside the BSC or containment device. Eye and face protection must be disposed of with other contaminated laboratory waste or
decontaminated before reuse. Persons who wear contact lenses in laboratories should also wear eye protection.

4. Gloves must be worn to protect hands from exposure to hazardous materials. Glove selection should be based on an appropriate risk assessment. Alternatives to latex gloves should be available. Gloves must not be worn outside the laboratory. In addition, BSL-2 laboratory workers should:
   a. Change gloves when contaminated, glove integrity is compromised, or when otherwise necessary.
   b. Remove gloves and wash hands when work with hazardous materials has been completed and before leaving the laboratory.
   c. Do not wash or reuse disposable gloves. Dispose of used gloves with other contaminated laboratory waste. Hand washing protocols must be rigorously followed.

5. Eye, face and respiratory protection should be used in rooms containing infected animals as determined by the risk assessment.

D. Laboratory Facilities (Secondary Barriers)

1. Laboratory doors should be self-closing and have locks in accordance with the institutional policies.

2. Laboratories must have a sink for hand washing. The sink may be manually, hands-free, or automatically operated. It should be located near the exit door.

3. The laboratory should be designed so that it can be easily cleaned and decontaminated. Carpets and rugs in laboratories are not permitted.

4. Laboratory furniture must be capable of supporting anticipated loads and uses. Spaces between benches, cabinets, and equipment should be accessible for cleaning.
   a. Bench tops must be impervious to water and resistant to heat, organic solvents, acids, alkalis, and other chemicals.
   b. Chairs used in laboratory work must be covered with a non-porous material that can be easily cleaned and decontaminated with appropriate disinfectant.

5. Laboratory windows that open to the exterior are not recommended. However, if a laboratory does have windows that open to the exterior, they must be fitted with screens.
6. BSCs must be installed so that fluctuations of the room air supply and exhaust do not interfere with proper operations. BSCs should be located away from doors, windows that can be opened, heavily traveled laboratory areas, and other possible airflow disruptions.

7. Vacuum lines should be protected with liquid disinfectant traps.

8. An eyewash station must be readily available.

9. There are no specific requirements for ventilation systems. However, planning of new facilities should consider mechanical ventilation systems that provide an inward flow of air without recirculation to spaces outside of the laboratory.

10. HEPA filtered exhaust air from a Class II BSC can be safely recirculation back into the laboratory environment if the cabinet is tested and certified at least annually and operated according to manufacturer’s recommendations. BSCs can also be connected to the laboratory exhaust system by either a thimble (canopy) connection or directly exhausted to the outside through a hard connection. Provisions to assure proper safety cabinet performance and air system operation must be verified.

11. A method for decontaminating all laboratory wastes should be available in the facility (e.g., autoclave, chemical disinfection, incineration, or other validated decontamination method).

**Biosafety Level 3**

Biosafety Level 3 is applicable to clinical, diagnostic, teaching, research, or production facilities where work is performed with indigenous or exotic agents that may cause serious or potentially lethal disease through the inhalation route of exposure. Laboratory personnel must receive specific training in handling pathogenic and potentially lethal agents, and must be supervised by scientists competent in handling infectious agents and associated procedures.

All procedures involving the manipulation of infectious materials must be conducted within BSCs or other physical containment devices.

A BSL-3 laboratory has special engineering and design features.

The following standard and special safety practices, equipment, and facility requirements apply to BSL-3.

**A. Standard Microbiological Practices**

1. The laboratory supervisor must enforce the institutional policies that control access to the laboratory.
2. Persons must wash their hands after working with potentially hazardous materials and before leaving the laboratory.

3. Eating, drinking, smoking, handling contact lenses, applying cosmetics, and storing food for human consumption must not be permitted in laboratory areas. Food must be stored outside the laboratory area in cabinets or refrigerators designated and used for this purpose.

4. Mouth pipetting is prohibited; mechanical pipetting devices must be used.

5. Policies for the safe handling of sharps, such as needles, scalpels, pipettes, and broken glassware must be developed and implemented. Whenever practical, laboratory supervisors should adopt improved engineering and work practice controls that reduce risk of sharps injuries.

Precautions, including those listed below, must always be taken with sharp items. These include:

a. Careful management of needles and other sharps are of primary importance. Needles must not be bent, sheared, broken, recapped, removed from disposable syringes, or otherwise manipulated by hand before disposal.

b. Used disposable needles and syringes must be carefully placed in conveniently located puncture-resistant containers used for sharps disposal.

c. Non-disposable sharps must be placed in a hard walled container for transport to a processing area for decontamination, preferably by autoclaving.

d. Broken glassware must not be handled directly. Instead, it must be removed using a brush and dustpan, tongs, or forceps. Plastic ware should be substituted for glassware whenever possible.

6. Perform all procedures to minimize the creation of splashes and/or aerosols.

7. Decontaminate work surfaces after completion of work and after any spill or splash of potentially infectious material with appropriate disinfectant.

8. Decontaminate all cultures, stocks, and other potentially infectious materials before disposal using an effective method. A method for decontaminating all laboratory wastes should be available in the facility, preferably within the laboratory (e.g., autoclave, chemical disinfection, incineration, or other validated decontamination method). Depending on where the decontamination will be performed, the following methods should be used prior to transport:
a. Materials to be decontaminated outside of the immediate laboratory must be placed in a durable, leak proof container and secured for transport.

b. Materials to be removed from the facility for decontamination must be packed in accordance with applicable local, state, and federal regulations.

9. A sign incorporating the universal biohazard symbol must be posted at the entrance to the laboratory when infectious agents are present. Posted information must include the laboratory’s biosafety level, the supervisor’s name (or other responsible personnel), telephone number, and required procedures for entering and exiting the laboratory. Agent information should be posted in accordance with the institutional policy.

10. An effective integrated pest management program is required. (See Appendix G.)

11. The laboratory supervisor must ensure that laboratory personnel receive appropriate training regarding their duties, the necessary precautions to prevent exposures, and exposure evaluation procedures. Personnel must receive annual updates or additional training when procedural or policy changes occur. Personal health status may impact an individual’s susceptibility to infection, ability to receive immunizations or prophylactic interventions. Therefore, all laboratory personnel and particularly women of childbearing age should be provided with information regarding immune competence and conditions that may predispose them to infection. Individuals having these conditions should be encouraged to self-identify to the institution’s healthcare provider for appropriate counseling and guidance.

B. Special Practices

1. All persons entering the laboratory must be advised of the potential hazards and meet specific entry/exit requirements.

2. Laboratory personnel must be provided medical surveillance and offered appropriate immunizations for agents handled or potentially present in the laboratory.

3. Each institution should consider the need for collection and storage of serum samples from at-risk personnel.

4. A laboratory-specific biosafety manual must be prepared and adopted as policy. The biosafety manual must be available and accessible.
5. The laboratory supervisor must ensure that laboratory personnel demonstrate proficiency in standard and special microbiological practices before working with BSL-3 agents.

6. Potentially infectious materials must be placed in a durable, leak proof container during collection, handling, processing, storage, or transport within a facility.

7. Laboratory equipment should be routinely decontaminated, as well as, after spills, splashes, or other potential contamination.
   a. Spills involving infectious materials must be contained, decontaminated, and cleaned up by staff properly trained and equipped to work with infectious material.
   b. Equipment must be decontaminated before repair, maintenance, or removal from the laboratory.

8. Incidents that may result in exposure to infectious materials must be immediately evaluated and treated according to procedures described in the laboratory biosafety manual. All such incidents must be reported to the laboratory supervisor. Medical evaluation, surveillance, and treatment should be provided and appropriate records maintained.

9. Animals and plants not associated with the work being performed must not be permitted in the laboratory.

10. All procedures involving the manipulation of infectious materials must be conducted within a BSC, or other physical containment devices. No work with open vessels is conducted on the bench. When a procedure cannot be performed within a BSC, a combination of personal protective equipment and other containment devices, such as a centrifuge safety cup or sealed rotor must be used.

C. Safety Equipment (Primary Barriers and Personal Protective Equipment)

1. All procedures involving the manipulation of infectious materials must be conducted within a BSC (preferably Class II or Class III), or other physical containment devices.

2. Workers in the laboratory where protective laboratory clothing with a solid-front, such as tie-back or wrap-around gowns, scrub suits, or coveralls. Protective clothing is not worn outside of the laboratory. Reusable clothing is decontaminated before being laundered. Clothing is changed when contaminated.
3. Eye and face protection (goggles, mask, face shield or other splash guard) is used for anticipated splashes or sprays of infectious or other hazardous materials. Eye and face protection must be disposed of with other contaminated laboratory waste or decontaminated before reuse. Persons who wear contact lenses in laboratories must also wear eye protection.

4. Gloves must be worn to protect hands from exposure to hazardous materials. Glove selection should be based on an appropriate risk assessment. Alternatives to latex gloves should be available. Gloves must not be worn outside the laboratory. In addition, BSL-3 laboratory workers:
   a. Changes gloves when contaminated, glove integrity is compromised, or when otherwise necessary. Wear two pairs of gloves when appropriate.
   b. Remove gloves and wash hands when work with hazardous materials has been completed and before leaving the laboratory.
   c. Do not wash or reuse disposable gloves. Dispose of used gloves with other contaminated laboratory waste. Hand washing protocols must be rigorously followed.

5. Eye, face, and respiratory protection must be used in rooms containing infected animals.

**D. Laboratory Facilities (Secondary Barriers)**

1. Laboratory doors must be self-closing and have locks in accordance with the institutional policies. The laboratory must be separated from areas that are open to unrestricted traffic flow within the building. Laboratory access is restricted. Access to the laboratory is through two self-closing doors. A clothing change room (anteroom) may be included in the passageway between the two self-closing doors.

2. Laboratories must have a sink for hand washing. The sink must be hands-free or automatically operated. It should be located near the exit door. If the laboratory is segregated into different laboratories, a sink must also be available for hand washing in each zone. Additional sinks may be required as determined by the risk assessment.

3. The laboratory must be designed so that it can be easily cleaned and decontaminated. Carpets and rugs are not permitted. Seams, floors, walls, and ceiling surfaces should be sealed. Spaces around doors and ventilation openings should be capable of being sealed to facilitate space decontamination.
a. Floors must be slip resistant, impervious to liquids, and resistant to chemicals. Consideration should be given to the installation of seamless, sealed, resilient or poured floors, with integral cove bases.

b. Walls should be constructed to produce a sealed smooth finish that can be easily cleaned and decontaminated.

c. Ceilings should be constructed, sealed, and finished in the same general manner as walls.

Decontamination of the entire laboratory should be considered when there has been gross contamination of the space, significant changes in laboratory usage, for major renovations, or maintenance shut downs. Selection of the appropriate materials and methods used to decontaminate the laboratory must be based on the risk assessment.

4. Laboratory furniture must be capable of supporting anticipated loads and uses. Spaces between benches, cabinets, and equipment must be accessible for cleaning.

a. Bench tops must be impervious to water and resistant to heat, organic solvents, acids, alkalis, and other chemicals.

b. Chairs used in laboratory work must be covered with a non-porous material that can be easily cleaned and decontaminated with appropriate disinfectant.

5. All windows in the laboratory must be sealed.

6. BSCs must be installed so that fluctuations of the room air supply and exhaust do not interfere with proper operations. BSCs should be located away from doors, heavily traveled laboratory areas, and other possible airflow disruptions.

7. Vacuum lines must be protected with HEPA filters, or their equivalent. Filters must be replaced as needed. Liquid disinfectant traps may be required.

8. An eyewash station must be readily available in the laboratory.

9. A ducted air ventilation system is required. This system must provide sustained directional airflow by drawing air into the laboratory from “clean” areas toward “potentially contaminated” areas. The laboratory shall be designed such that under failure conditions the airflow will not be reversed.

a. Laboratory personnel must be able to verify directional airflow. A visual monitoring device, which confirms directional airflow, must be provided at the laboratory entry. Audible alarms should be considered to notify personnel of airflow disruption.
b. The laboratory exhaust air must not re-circulate to any other area of the building.

c. The laboratory building exhaust air should be dispersed away from occupied areas and from building air intake locations or the exhaust air must be HEPA filtered.

HEPA filter housings should have gas-tight isolation dampers, decontamination ports, and/or bag-in/bag-out (with appropriate decontamination procedures) capability. The HEPA filter housing should allow for leak testing of each filter and assembly. The filters and the housing should be certified at least annually.

10. HEPA filtered exhaust air from a Class II BSC can be safely re-circulated into the laboratory environment if the cabinet is tested and certified at least annually and operated according to manufacturer's recommendations. BSCs can also be connected to the laboratory exhaust system by either a thimble (canopy) connection or directly exhausted to the outside through a hard connection. Provisions to assure proper safety cabinet performance and air system operation must be verified. BSCs should be certified at least annually to assure correct performance. Class III BSCs must be directly (hard) connected up through the second exhaust HEPA filter of the cabinet. Supply air must be provided in such a manner that prevents positive pressurization of the cabinet.

11. A method for decontaminating all laboratory wastes should be available in the facility, preferably within the laboratory (e.g., autoclave, chemical disinfection, or other validated decontamination method).

12. Equipment that may produce infectious aerosols must be contained in primary barrier devices that exhaust air through HEPA filtration or other equivalent technology before being discharged into the laboratory. These HEPA filters should be tested and/or replaced at least annually.

13. Facility design consideration should be given to means of decontaminating large pieces of equipment before removal from the laboratory.

14. Enhanced environmental and personal protection may be required by the agent summary statement, risk assessment, or applicable local, state, or federal regulations. These laboratory enhancements may include, for example, one or more of the following: an anteroom for clean storage of equipment and supplies with dress-in, shower-out capabilities; gas tight dampers to facilitate laboratory isolation; final HEPA filtration of the laboratory exhaust air; laboratory effluent decontamination; and advanced access control devices, such as biometrics.
15. The BSL-3 facility design, operational parameters, and procedures must be verified and documented prior to operation. Facilities must be re-verified and documented at least annually.

**Biosafety Level 4**

Biosafety Level 4 is required for work with dangerous and exotic agents that pose a high individual risk of aerosol-transmitted laboratory infections and life-threatening disease that is frequently fatal, for which there are no vaccines or treatments, or a related agent with unknown risk of transmission. Agents with a close or identical antigenic relationship to agents requiring BSL-4 containment must be handled at this level until sufficient data are obtained either to confirm continued work at this level, or re-designate the level. Laboratory staff must have specific and thorough training in handling extremely hazardous infectious agents. Laboratory staff must understand the primary and secondary containment functions of standard and special practices, containment equipment, and laboratory design characteristics. All laboratory staff and supervisors must be competent in handling agents and procedures requiring BSL-4 containment. The laboratory supervisor in accordance with institutional policies controls access to the laboratory.

There are two models for BSL-4 laboratories:

1. A **Cabinet Laboratory**—Manipulation of agents must be performed in a Class III BSC; and
2. A **Suit Laboratory**—Personnel must wear a positive pressure supplied air protective suit.

BSL-4 cabinet and suit laboratories have special engineering and design features to prevent microorganisms from being disseminated into the environment.

The following standard and special safety practices, equipment, and facilities apply to BSL-4.

**A. Standard Microbiological Practices**

1. The laboratory supervisor must enforce the institutional policies that control access to the laboratory.

2. Eating, drinking, smoking, handling contact lenses, applying cosmetics, and storing food for human consumption must not be permitted in laboratory areas. Food must be stored outside the laboratory area in cabinets or refrigerators designated and used for this purpose.

3. Mechanical pipetting devices must be used.

4. Policies for the safe handling of sharps, such as needles, scalpels, pipettes, and broken glassware must be developed and implemented.
Precautions, including those listed below, must be taken with any sharp items. These include:

a. Broken glassware must not be handled directly. Instead, it must be removed using a brush and dustpan, tongs, or forceps. Plastic ware should be substituted for glassware whenever possible.

b. Use of needles and syringes or other sharp instruments should be restricted in the laboratory, except when there is no practical alternative.

c. Used needles must not be bent, sheared, broken, recapped, removed from disposable syringes, or otherwise manipulated by hand before disposal or decontamination. Used disposable needles must be carefully placed in puncture-resistant containers used for sharps disposal, located as close to the point of use as possible.

d. Whenever practical, laboratory supervisors should adopt improved engineering and work practice controls that reduce risk of sharps injuries.

5. Perform all procedures to minimize the creation of splashes and/or aerosols.

6. Decontaminate work surfaces with appropriate disinfectant after completion of work and after any spill or splash of potentially infectious material.

7. Decontaminate all wastes before removal from the laboratory by an effective and validated method.

8. A sign incorporating the universal biohazard symbol must be posted at the entrance to the laboratory when infectious agents are present. Posted information must include the laboratory’s biosafety level, the supervisor’s name (or other responsible personnel), telephone number, and required procedures for entering and exiting the laboratory. Agent information should be posted in accordance with the institutional policy.

9. An effective integrated pest management program is required. (See Appendix G.)

10. The laboratory supervisor must ensure that laboratory personnel receive appropriate training regarding their duties, the necessary precautions to prevent exposures, and exposure evaluation procedures. Personnel must receive annual updates or additional training when procedural or policy changes occur. Personal health status may impact an individual’s susceptibility to infection, ability to receive immunizations or prophylactic interventions. Therefore, all laboratory personnel and particularly women of childbearing age should be provided with information
regarding immune competence and conditions that may predispose them to infection. Individuals having these conditions should be encouraged to self-identify to the institution’s healthcare provider for appropriate counseling and guidance.

B. Special Practices

1. All persons entering the laboratory must be advised of the potential hazards and meet specific entry requirements in accordance with institutional policies.

Only persons whose presence in the facility or individual laboratory rooms is required for scientific or support purposes are authorized to enter.

Entry into the facility must be limited by means of secure, locked doors. A logbook, or other means of documenting the date and time of all persons entering and leaving the laboratory must be maintained.

While the laboratory is operational, personnel must enter and exit the laboratory through the clothing change and shower rooms except during emergencies. All personal clothing must be removed in the outer clothing change room. All persons entering the laboratory must use laboratory clothing, including undergarments, pants, shirts, jumpsuits, shoes, and gloves (as appropriate). All persons leaving the laboratory must take a personal body shower. Used laboratory clothing must not be removed from the inner change room through the personal shower. These items must be treated as contaminated materials and decontaminated before laundering.

After the laboratory has been completely decontaminated and all infectious agents are secured, necessary staff may enter and exit without following the clothing change and shower requirements described above.

2. Laboratory personnel and support staff must be provided appropriate occupational medical services including medical surveillance and available immunizations for agents handled or potentially present in the laboratory. A system must be established for reporting and documenting laboratory accidents, exposures, employee absenteeism and for the medical surveillance of potential laboratory-associated illnesses. An essential adjunct to such an occupational medical services system is the availability of a facility for the isolation and medical care of personnel with potential or known laboratory-acquired infections.

3. Each institution should consider the need for collection and storage of serum samples from at-risk personnel.
4. A laboratory-specific biosafety manual must be prepared. The biosafety manual must be available, accessible, and followed.

5. The laboratory supervisor is responsible for ensuring that laboratory personnel:

   a. Demonstrate high proficiency in standard and special microbiological practices, and techniques for working with agents requiring BSL-4 containment.

   b. Receive appropriate training in the practices and operations specific to the laboratory facility.

   c. Receive annual updates and additional training when procedural or policy changes occur.

6. Removal of biological materials that are to remain in a viable or intact state from the laboratory must be transferred to a non-breakable, sealed primary container and then enclosed in a non-breakable, sealed secondary container. These materials must be transferred through a disinfectant dunk tank, fumigation chamber, or decontamination shower. Once removed, packaged viable material must not be opened outside BSL-4 containment unless inactivated by a validated method.

7. Laboratory equipment must be routinely decontaminated, as well as after spills, splashes, or other potential contamination.

   a. Spills involving infectious materials must be contained, decontaminated, and cleaned up by appropriate professional staff, or others properly trained and equipped to work with infectious material. A spill procedure must be developed and posted within the laboratory.

   b. Equipment must be decontaminated using an effective and validated method before repair, maintenance, or removal from the laboratory. The interior of the Class III cabinet as well as all contaminated plenums, fans and filters must be decontaminated using a validated gaseous or vapor method.

   c. Equipment or material that might be damaged by high temperatures or steam must be decontaminated using an effective and validated procedure such as a gaseous or vapor method in an airlock or chamber designed for this purpose.

8. Incidents that may result in exposure to infectious materials must be immediately evaluated and treated according to procedures described in the laboratory biosafety manual. All incidents must be reported to the laboratory supervisor, institutional management and appropriate
laboratory personnel as defined in the laboratory biosafety manual. Medical evaluation, surveillance, and treatment should be provided and appropriate records maintained.

9. Animals and plants not associated with the work being performed must not be permitted in the laboratory.

10. Supplies and materials that are not brought into the BSL-4 laboratory through the change room, must be brought in through a previously decontaminated double-door autoclave, fumigation chamber, or airlock. After securing the outer doors, personnel within the laboratory retrieve the materials by opening the interior doors of the autoclave, fumigation chamber, or airlock. These doors must be secured after materials are brought into the facility. The doors of the autoclave or fumigation chamber are interlocked in a manner that prevents opening of the outer door unless the autoclave or fumigation chamber has been operated through a decontamination cycle.

Only necessary equipment and supplies should be stored inside the BSL-4 laboratory. All equipment and supplies taken inside the laboratory must be decontaminated before removal from the laboratory.

11. Daily inspections of essential containment and life support systems must be completed and documented before laboratory work is initiated to ensure that the laboratory is operating according to established parameters.

12. Practical and effective protocols for emergency situations must be established. These protocols must include plans for medical emergencies, facility malfunctions, fires, escape of animals within the laboratory, and other potential emergencies. Training in emergency response procedures must be provided to emergency response personnel and other responsible staff according to institutional policies.

C. Safety Equipment (Primary Barriers and Personal Protective Equipment)

Cabinet Laboratory

1. All manipulations of infectious materials within the laboratory must be conducted in the Class III biological safety cabinet.

Double-door, pass through autoclaves must be provided for decontaminating materials passing out of the Class III BSC(s). The autoclave doors must be interlocked so that only one can be opened at any time and be automatically controlled so that the outside door to the autoclave can only be opened after the decontamination cycle has been completed.
The Class III cabinet must also have a pass-through dunk tank, fumigation chamber, or equivalent decontamination method so that materials and equipment that cannot be decontaminated in the autoclave can be safely removed from the cabinet. Containment must be maintained at all times.

The Class III cabinet must have a HEPA filter on the supply air intake and two HEPA filters in series on the exhaust outlet of the unit. There must be gas tight dampers on the supply and exhaust ducts of the cabinet to permit gas or vapor decontamination of the unit. Ports for injection of test medium must be present on all HEPA filter housings.

The interior of the Class III cabinet must be constructed with smooth finishes that can be easily cleaned and decontaminated. All sharp edges on cabinet finishes must be eliminated to reduce the potential for cuts and tears of gloves. Equipment to be placed in the Class III cabinet should also be free of sharp edges or other surfaces that may damage or puncture the cabinet gloves.

Class III cabinet gloves must be inspected for damage prior to use and changed if necessary. Gloves should be replaced annually during cabinet re-certification.

The cabinet should be designed to permit maintenance and repairs of cabinet mechanical systems (refrigeration, incubators, centrifuges, etc.) to be performed from the exterior of the cabinet whenever possible.

Manipulation of high concentrations or large volumes of infectious agents within the Class III cabinet should be performed using physical containment devices inside the cabinet whenever practical. Such materials should be centrifuged inside the cabinet using sealed rotor heads or centrifuge safety cups.

The Class III cabinet must be certified at least annually.

2. Workers in the laboratory must wear protective laboratory clothing with a solid-front, such as tie-back or wrap-around gowns, scrub suits, or coveralls. No personal clothing, jewelry, or other items except eyeglasses should be taken past the personal shower area. All protective clothing must be removed in the dirty side change room before showering. Reusable clothing must be autoclaved prior to removal from the laboratory for laundering.

3. Eye, face and respiratory protection should be used in rooms containing infected animals as determined by the risk assessment. Prescription eyeglasses must be decontaminated before removal through the personal body shower.
4. Disposable gloves must be worn underneath cabinet gloves to protect the worker from exposure should a break or tear occur in a cabinet glove. Gloves must not be worn outside the laboratory. Alternatives to latex gloves should be available. Do not wash or reuse disposable gloves. Dispose of used gloves with other contaminated laboratory waste.

**Suit Laboratory**

1. All procedures must be conducted by personnel wearing a one-piece positive pressure supplied air suit.

   All manipulations of infectious agents must be performed within a BSC or other primary barrier system.

   Equipment that may produce aerosols must be contained in primary barrier devices that exhaust air through HEPA filtration before being discharged into the laboratory. These HEPA filters should be tested annually and replaced as needed.

   HEPA filtered exhaust air from a Class II BSC can be safely re-circulated into the laboratory environment if the cabinet is tested and certified at least annually and operated according to manufacturer’s specifications.

2. Workers must wear laboratory clothing, such as scrub suits, before entering the room used for donning positive pressure suits. All laboratory clothing must be removed in the dirty side change room before entering the personal shower.

3. Inner disposable gloves must be worn to protect against break or tears in the outer suit gloves. Disposable gloves must not be worn outside the change area. Alternatives to latex gloves should be available. Do not wash or reuse disposable gloves. Inner gloves must be removed and discarded in the inner change room prior to entering the personal shower. Dispose of used gloves with other contaminated waste.

4. Decontamination of outer suit gloves is performed during laboratory operations to remove gross contamination and minimize further contamination of the laboratory.

**D. Laboratory Facilities (Secondary Barriers)**

**Cabinet Laboratory**

1. The BSL-4 cabinet laboratory consists of either a separate building or a clearly demarcated and isolated zone within a building. Laboratory doors must have locks in accordance with the institutional policies.