**Standard Safety Operating Procedures Form for the Laboratory of [*Faculty Researcher Name*]**

Building/Room Number:

Number of square feet:

Number of persons allowed in the laboratory at any one time:

Names and phone numbers of persons approved to be in the lab (include Faculty Researcher):

1.

**Standard Operating Procedure**

1. This SOP must be posted on the laboratory door and in at least one place within each lab.
2. Faculty Researchers and laboratory members must complete the COVID-19 self-screening questionnaire: <https://wsnet2.colostate.edu/cwis86/WPublicH/healthscreening.aspx> and submit it before returning to work on campus. They will be notified via email of their screening results. This return to work email should be forwarded to the employee’s direct supervisor upon receipt.
3. Everyone in the laboratory must wear a facemask at all times.
4. Gloves worn in the laboratory will be disposed of properly and hands washed prior to leaving lab.
5. Hand washing must occur on a regular basis.
6. Everyone in the laboratory must follow CSU guidelines of social distancing by keeping a distance of at least 6 feet between individuals.
7. Squeeze bottles of disinfectant must be readily available in the laboratory. Each person must clean their work bench as needed. The Faculty researcher will oversee the appropriate disinfection of the research laboratory space and of all common equipment used by the laboratory research staff.
8. Telecommuting is encouraged as much as possible in order to limit individual’s time in the research laboratory.
9. The Faculty researcher will contact their Department Head/Chair and the Associate Dean for Research of their college immediately if they or anyone else in the lab becomes aware of an employee or student who tests positive for COVID-19.
10. All individuals in the lab must contact the Student/Employee Health Clinic (PHONE NUMBER) if they experience symptoms indicative of COVID-19 (e.g., cough, loss or smell or taste, chills, headache, muscle pain, shortness of breath) or were exposed to a laboratory-confirmed COVID-19 positive individual.

Signature of PI: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_