##### Gas Cylinder Use SOP Example

University of Washington

|  |  |  |  |
| --- | --- | --- | --- |
| Standard Operating Procedures for Chemicals or Processes | | | |
| #1 Process  (if applicable) | **Gas cylinders** (Inert)  Use of compressed gas cylinders (See CHP Sec \*\*) | | |
| #2 Chemicals | Compressed gas cylinder present hazards because of the volume of gas and the pressures involved. Leaking or vented inert gas can displace breathing air. This SOP is for N2, Ar, and He. | | |
| #3 Personal Protective Equipment (PPE) | Wear goggles. | | |
| #4 Environmental /  Ventilation Controls | Fittings and connections must be properly tested for leaks using a soapy water, 'Snoop' or other appropriate test system or meter. | | |
| #5 Special Handling Procedures & Storage Requirements | All cylinders should be properly identified and the specific hazards of each cylinder should be known. Cylinders must be fastened securely at all times whether in use, transit, or storage. Cylinder safety caps must be in place whenever cylinders are not in use for an extended period of time or during transport. Proper valves and/or regulators for the specific gas must be used. Store and use cylinders in ventilated areas away from heat or ignition sources. Transport large cylinders only on an approved dolly or cart. A dolly or cart is located hallway closet B16A. | | |
| #6 Spill and Accident Procedures | If safe, turn the gas valve off. For cylinders that continue to leak, refer to the Laboratory Safety Manual section 9 or contact EH&S at 206-543-0467. | | |
| #7 Waste Disposal | Empty nontoxic or non-corrosive gas cylinders should be marked 'empty' and returned to Linde (Praxair). For more information, see the Laboratory Safety Manual, section 3 Waste Management. | | |
| #8 Special Precautions for Animal Use  (if applicable) | \* | | |
| Particularly hazardous  substance involved? | | YES: | Blocks #9 to #11 are Mandatory |
| X NO: | Blocks #9 to #11 are Optional. |
| #9 Approval Required | N/A | | |
| #10 Decontamination | N/A | | |
| #11 Designated Area | N/A | | |
| Name: Priska von Haller Title: | | | |
| Signature:A close-up of a signature  Description automatically generated Date: 4/5/2023 | | | |

Environmental Health and Safety, Box 354400 \**to be filled in by PI or Supervisor*