##### SOP for Hydrochloric Acid

University of Washington

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| Standard Operating Procedures for Chemicals or Processes |
| #1 Process(if applicable) | **Inorganic Acids** - handling, dispensing, and diluting acids including:Hydrochloric Acid (HCl) |
| #2 Chemicals | Acids cause burns to skin and eyes upon contact and to mucous membranes if inhaled or ingested. |
| #3 Personal Protective Equipment (PPE) | Wear chemical splash goggles and heavy-duty neoprene gloves for concentrated acids. For diluted acids greater than pH 2, use nitrile gloves. A lab coat or apron is recommended for personal protection. |
| #4 Environmental /Ventilation Controls | Concentrated acids should be dispensed in a fume hood or well ventilated area. |
| #5 Special Handling Procedures & Storage Requirements | When diluting acids, small amounts should be added gradually to water and mixed thoroughly to dissipate any heat generated. Inorganic and organic acids should be stored in separate bins in the acid storage cabinets. Acids should be stored separately from bases, oxidizers and flammable solvents. Acids in glass bottles over 1 liter should be transported in spill proof carriers. Acids are stored acid storage cabinet. |
| #6 Spill and Accident Procedures | In case of skin contact, flush affected areas with copious amounts of water for 15 minutes. Obtain medical attention. Neutralize any spilled acids with sodium bicarbonate or spill pads to clean up. Spill kit can be found under the sink. |
| #7 Waste Disposal | EH&S has a treatment program for acids and bases; for more information see <https://www.ehs.washington.edu/chemical/chemical-treatment-and-recycling> . If disposing of as hazardous waste, label with Hazardous Waste Label, accumulate according to requirements, and send in Chemical Collection Request or Routine Pickup request, both available online at <http://www.ehs.washington.edu/epowaste/chemwaste.shtm>. |
| #8 Special Precautions for Animal Use(if applicable) | N/A |
| Particularly hazardoussubstance 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*