Standard Operating Procedure

Ammonia

**This is an SOP template and is not complete until: 1) lab specific information is entered into the box below 2) lab specific protocol/procedure is added to the protocol/procedure section and   
3) SOP has been signed and dated by the PI and relevant lab personnel.**

Print a copy and insert into your *Lab-Specific Chemical Hygiene Plan*.

**Section 1 – Lab-Specific Information**

| **Building/Room(s) covered by this SOP:** | Click here to enter text. |
| --- | --- |
| **Department:** | Click here to enter a date. |
| **Principal Investigator Name:** | Click here to enter text. |
| **Principal Investigator Signature:** | Click here to enter text. |

**Section 2 – Hazards**

Ammonia is a compressed gas that is corrosive, toxic if inhaled, toxic to aquatic life, and may explode if heated. Exposure to ammonia gas causes severe skin burns and eye damage. Ammonia is corrosive to the respiratory tract.



**Section 3 – Engineering Controls and Personal Protective Equipment (PPE)**

**Engineering Controls:** The use of ammonia must be conducted in a properly-functioning chemical fume hood. The chemical fume hood must be approved and certified by REM and have a face velocity between 80 – 125 feet per minute. Inside the fume hood, keep these materials away from oxidizing agents, acids, and moisture/water.

**Hygiene Measures:** Avoid contact with skin, eyes, and clothing. Wash hands before breaks and immediately after handling the product.

**Hand Protection:** Gloves must be worn. Nitrile gloves are recommended. **NOTE:** Consult with your preferred glove manufacturer to ensure that the gloves you plan on using are compatible with the specific chemical being used.

**Eye Protection:** ANSI approved properly fitting safety glasses or chemical splash goggles. Face shield is also recommended.

**Skin and Body Protection:** Laboratory coats must be worn and be appropriately sized for the individual and buttoned to their full length. Personnel must also wear full length pants, or equivalent, and close-toed shoes. Full length pants and close-toed shoes must be worn at all times by all individuals that are occupying the laboratory area. The area of skin between the shoe and ankle must not be exposed.

**Respiratory Protection:** If ammonia is being used outside of a chemical fume hood, respiratory protection may be required. If this activity is necessary, contact REM (49-46371) so a respiratory protection analysis can be performed.

**Section 4 – Special Handling and Storage Requirements**

* Always wear appropriate PPE when handling. Avoid contact with skin, eyes, and clothing. Avoid inhalation.
* Keep containers tightly closed. Store in a cool, dry and well-ventilated area.
* Incompatible with the following materials: oxidizing materials, bases.
* Contents under pressure
* Cylinders should be stored and upright and secure

**Section 5 – Spill and Accident Procedures**

Immediately evacuate area and ensure others are aware of the spill. If there is an imminent threat building occupants, pull the nearest fire alarm station to evacuate the building and **dial 911**. If personnel have become exposed and need medical assistance, **dial 911**.

**Section 6 – Waste Disposal Procedures**

Store hazardous waste in closed containers that are properly labeled, and in a designated area (flammable cabinet is recommended). Ammonia cylinders should be stored away from heat, oxidizers, and bases. Complete a Chemical Waste Pickup Request Form to arrange for disposal by REM; detailed instructions are provided at the following link: <http://www.purdue.edu/ehps/rem/hmm/chemwaste.htm>.

**Section 7 – Protocol/Procedure (Add lab specific Protocol/Procedure here)**

Click here to enter text.

**NOTE:** Any deviation from this SOP requires approval from PI.

**Section 8 – Documentation of Training (signature of all users is required)**

Prior to conducting any work with Ammonia, the Principal Investigator must ensure that all laboratory personnel receive training on the content of this SOP.

**I have read and understand the content of this SOP:**

| **Name** | **Signature** | **Date** |
| --- | --- | --- |
| Click here to enter text. |  | Click here to enter a date. |
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