Biological Risk Management and Containment

Handling Human Faecal Material

Containment Laboratory Guidelines

Version 2.1- November 2024

Approved by: Vice-Chancellor
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Content Manager: Manager, Hazard and Containment

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This document was updated from Version 2 which was extensively reviewed and approved in February 2021.

Record of Amendments to Version 2.1

Date	Page number	Nature of amendment
30/11/24	all	University Logo updated

Contents

1. Who are these guidelines for?

These guidelines are intended for **principal investigators (PIs), designated persons in charge, designated laboratory person (DLPs), technical staff and students** trained in the safe use of **risk biologicals** in appropriate containment facilities.

2. Good Practice Guidelines for the Handling Human Faecal Material

Researchers working with stool specimens face potential infection risks including ingestion of enteric pathogenic bacteria, eggs or cysts found in faeces. These infection risks can be minimized by adopting universal precautions as well as standard microbiological laboratory practices.
The following practices must be observed:

- Wear protective safety glasses, gloves and laboratory coat when processing specimens.
- Use Class 2 Biological Safety Cabinet especially when vortexing or homogenising any unprocessed samples (please note the caveat for larger volumes of faecal matter below).
- Decontaminate work surfaces with an approved decontamination agent after the procedure and after any spill of potentially infectious material.
- Remove gloves and taking particular care to wash hands thoroughly after completing ANY task involving the handling of faecal material.

3. Good Practice for Larger Volumes of Faecal Material

Where larger volumes of faecal material (greater than 100 cm3) are being handled, especially when samples are being homogenised, the recirculation of air from the BSC will prove problematic for other lab users.

In such circumstances, it is important that the exhaust air is expelled completely from the lab rather than recirculated. Use of an externally ducted fume cupboard with a high laminar airflow is recommended in such instances. The fume cupboard must be emptied of chemicals and work practices will be as for a Class 2 Biological Safety Cabinet.

4. Cleaning and Disposal

4.1. Cleaning of Instruments

Instruments are to be washed in water and then soaked in an approved decontamination agent for high organic load.

4.2. Disposal of Surplus Faecal Material

Dispose of larger volumes of surplus faecal material (>1 ml) in a toilet, taking care to double contain the material *en route*.

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5. Definitions

Approved Decontamination Agents are those decontamination agents list in the Expert User Guidelines for Benchtop/surface decontamination and Chemical Decontamination of liquid biohazardous waste. These decontamination agents have proven efficacy as ratified by the United States Environmental Protection Authority (EPA), peer reviewed journals or by European testing regimes.

Designated laboratory person (DLP) means the trained person in each research group who has been given the authority to receive purchase requests made in SQERM and to make a formal request for a purchase order via PeopleSoft. In containment and transitional facilities DLPs will have additional training to enable them to scrutinise documentation for restricted items and provide support to researchers.

Designated person in charge means a staff member in any of the following roles: sector manager, facility manager, floor manager, technical manager or an appointed delegate.

Principal Investigator (PI): In the context of hazard containment and transitional facilities, a principal investigator is the holder of an independent grant administered by the University and the lead researcher for the grant project, usually in the sciences, such as a laboratory study or a clinical trial. The phrase is also often used as a synonym for "head of the laboratory" or "research group leader." The PI is responsible for assuring compliance with applicable University standards and procedures, and for the oversight of the research study and the informed consent process. Although the PI may delegate tasks, they retain responsibility for the conduct of the study.