



Use of Glass Pipettes in BSL-2 or Higher Laboratories

Introduction

Per the BSL2 standard microbiological practices described in the [CDC/NIH Biosafety in Microbiological and Biomedical Laboratories \(BMBL, 5th edition\)](#), “Plastic ware should be substituted for glassware whenever possible”. The concern is that glass can break and become a sharp. If the glass is contaminated with any hazardous materials, this not only poses an injury risk, but also an exposure risk. Between January 2016 and August 2016, the Institutional Biosafety Committee (IBC) reviewed four injuries involving broken glass Pasteur pipettes that resulted in an exposure or potential exposure of personnel to biohazardous materials and/or recombinant/synthetic nucleic acids. Three of these incidents were determined to be reportable to the NIH Office of Science Policy. The policy described below was developed to address this risk.

Policy

Glass Pasteur pipettes must be eliminated from all BSL2, BSL2+ and BSL3 laboratories, unless the use of these pipettes is scientifically justified. The use of glass pipettes at \geq BSL2 containment, along with the scientific justification for their use, must be documented as a deviation request in the Operational Risks section of the Principal Investigator’s Biological Use Authorization (BUA). The IBC will review each deviation request to determine if the scientific justification provided is adequate to grant an exception to this policy.

To facilitate selection of appropriate substitutes, including, but not limited to plastic aspirator pipettes or plastic Pasteur pipettes, researchers may consult with EH&S Biosafety (biosafety@ehs.ucla.edu).