MEMORANDUM OF UNDERSTANDING AND AGREEMENT

SUPERVISOR'S COPY

- 1. I fully understand the provisions of NYSPHL, Article 33, Title 7, Regulation 3381; and NYCRR, Title10, Section 80.133 covering the acquisition, control, and disposition of hypodermic syringes and needles.
- 2. I shall appoint a Custodian to issue, store, and track syringes and needles to authorized members of this department.
- As required by the issuance of Certificate of Need # 13338, I designate
 as the Custodian of these
 articles. In the event that this responsibility is reassigned, I shall immediately notify the chair of the department.
- 4. I understand that failure to comply with the provisions of NYSPHL, Article 33, Title 7, Regulation 3381; and NYCRR, Title10, Section 80.133 may result in civil or criminal action and the cancellation of Certificate of Need # 13338.

| Name (Print) |) | | |
|--------------|---|------|------|
| Signature _ | | | |

Date_____

MEMORANDUM OF UNDERSTANDING AND AGREEMENT

CUSTODIANS'S COPY

- 1. I fully understand the provisions of NYSPHL, Article 33, Title 7, Regulation 3381; and NYCRR, Title10, Section 80.133 covering the acquisition, control, and disposition of hypodermic syringes and needles.
- 2. To insure compliance with these regulations I shall:
 - A. Issue only formal Cornell University requisitions to cover the acquisition of all syringes and needles.
 - B. Store all syringes and needles acquired as specified in NYCRR Title 10, Section 80.133. Hypodermic syringes and needles, except when in use, shall be stored in a locked, secure place with controlled access. This can be a locked drawer or a locked, stationary cabinet within a laboratory. Those hypodermic syringes and needles not in reserve, not in main stocks, or not in use shall also be kept under suitable locked protection. Syringes and needles that are permanently affixed to a piece of apparatus are exempt from this requirement.
 - C. Maintain accurate inventory records, subject to inspection and verification upon demand, of all purchases of syringes and needles. Include a running inventory of all syringes and needles received, indicating size, and numbers of each item; distribution (date and individual); and balance on hand. **Please report stolen or missing needles or syringes to Cornell Police (5-1111).**
 - D. Issue syringes and needles only to authorized individuals within the department.
 - E. Retain and maintain all records in accordance with NYSPHL, Article 33, Title 7, Regulation 3381; and NYCRR, Title10, Section 80.133.
 - F. Syringes and needles will be disposed of according to the Cornell University "Guidelines for the Disposal of Regulated Medical Waste". Regardless of use, all syringes and needles shall be disposed of in a sharps container. These containers are rigid, leakproof, and puncture-proof with a lockable lid, and are labeled with the universal biohazard symbol or the word "BIOHAZARD". Needles should not be recapped, bent, sheared, cut, or removed from the syringe prior to their disposal.

Name (Print) _______Signature _______Principal Investigator _______

MEMORANDUM OF UNDERSTANDING

USER'S COPY

- 1. I fully understand the provisions of NYSPHL, Article 33, Title 7, Regulation 3381; and NYCRR, Title10, Section 80.133 covering the acquisition, control, and disposition of hypodermic syringes and needles.
- 2. I agree that:
 - A. I will be held exclusively responsible and accountable for items issued to me under these regulations.
 - B. The syringes and needles received will only be used for teaching, research, and/or service, not for personal use by others or myself.
 - C. When not actually in use, all syringes and needles will be stored in a locked and secured location.
 - D. Syringes and needles will be disposed of according to the Cornell University "Guidelines for the Disposal of Regulated Medical Waste", or returned to the custodian. Regardless of use, all syringes and needles shall be disposed of in a sharps container. These containers are rigid, leakproof, and puncture-proof with a lockable lid, and are labeled with the universal biohazard symbol or the word "BIOHAZARD". Needles should not be recapped, bent, sheared, cut, or removed from the syringe prior to their disposal.
 - E. I shall immediately report any theft or misuse of these items to Cornell University Police (5-1111).

| Name (Print) |
|------------------------|
| Signature |
| Principal Investigator |
| Date |