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| **CHARACTERISTICS** |
| Morphology | Fungus belonging to the Trichocomaceae family. Colonies grow rapidly, producing white, green, yellow, or black colonies. |
| Disease | Aspergillosis, Farmer’s Lung. A. fumigatus causes most infections, and A. niger and A. flavus are second. |
| Zoonosis | None. |

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| **HEALTH HAZARDS** |
| Host Range | Humans, cows, dolphins, birds, and horses. |
| Modes of Transmission | Inhalation, through contaminated water, and nosocomial infections (hospital fabrics and plastics). |
| Signs and Symptoms | Fever, facial pain, headache, asymmetric facial swelling, epistaxis, proptosis, cranial nerve abnormalities. |
| Infectious Dose | Unknown. |
| Incubation Period | 2 days to 3 months. |

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| **MEDICAL PRECAUTIONS/TREATMENT** |
| Prophylaxis | None. |
| Vaccines | None. |
| Treatment | Voriconazole, amphotericin B, posaconazole and echinocandins. Is resistant to itraconazole and some isolates have been reported to be resistant to voriconazole, posaconazole and echinocandins. |
| Surveillance | Monitor for symptoms. |
| MSU Requirements | Report any exposures. |

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| **LABORATORY HAZARDS** |
| Laboratory Acquired Infections (LAIs)  | None reported. |
| Sources | Sputum, biopsy material, transtracheal aspirates, blood, and soil. Inhalation of air contaminated with Aspergillus spores. Cultures, frozen stocks, other samples described in IBC protocol. |

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| **RISK GROUP & CONTAINMENT REQUIREMENTS** |
| Risk Group 2 | Agents that are associated with human disease which is rarely serious and for which preventive or therapeutic interventions are often available. |
| BSL2 | For all procedures involving suspected or known infectious specimen or cultures. |
| ABSL2 | For all procedures utilizing infected animals. |

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| **VIABILITY** |
| Disinfection | Susceptible to 1:10 bleach:water, 70 % ethanol, accelerated hydrogen peroxide. |
| Inactivation | Inactivated by heat (greater than 45 minutes at 60°C), except for A. fumigatus.Microwave irradiation at 800 watts for 90 seconds to 2 minutes is also effective in inactivating conidia A. fumigatus and A. flavus. |
| Survival Outside Host | Can survive in soil and decomposing vegetation. |

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| **SUPPLEMENTAL REFERENCES** |
| BMBL | <https://www.cdc.gov/labs/BMBL.html>  |
| NIH Guidelines | <https://osp.od.nih.gov/wp-content/uploads/NIH_Guidelines.pdf>  |
| Canada PSDS | <https://www.canada.ca/en/public-health/services/laboratory-biosafety-biosecurity/pathogen-safety-data-sheets-risk-assessment/aspergillus.html> |

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| **SPILL PROCEDURES** |
| Small | Notify others working in the lab. Remove PPE and don new PPE. Cover area of the spill with absorbent material and add fresh 1:10 bleach:water. Allow 20 minutes (or as directed) of contact time. After 20 minutes, cleanup and dispose of materials. |
| Large | * Immediately notify all personnel in the lab and clear all personnel from the area. Remove any contaminated PPE/clothing and leave the lab.
* Secure the area by locking doors, posting signage and guarding the area to keep people out of the space.

For assistance, contact MSU's Biosafety Officer (406-994-6733) or Safety and Risk Management (406-994-2711). |

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| **EXPOSURE PROCEDURES** |
| Mucous membrane | Flush eyes, mouth, or nose for 5 minutes at eyewash station. |
| Other Exposures | Wash area with soap and water for 5 minutes. |
| Reporting | Immediately report incident to supervisor, complete a [First Report of Injury](https://firstreportinjury.mus.edu/) form, and submit to Safety and Risk Management. |
| Medical Follow-up | **During business hours:**Bridger Occupational Health 3400 Laramie Drive Weekdays 8am -6pm. Weekends 9am-5pm406-577-7674**After business hours:**Bozeman Deaconess Hospital Emergency Room915 Highland Blvd |

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| **PERSONAL PROTECTIVE EQUIPMENT (PPE)** |
| Minimum PPE Requirements | Lab coat, disposable gloves, safety glasses, closed toed shoes, long pants |
| Additional Precautions | Additional PPE may be required depending on lab specific SOPs and IBC Protocol. |