

## Biosafety Orientation Checklist & Record for Temporary Lab Members

For the purposes of this document, temporary lab members include all students and visiting scientists who will be actively present in the lab as part of a short term academic program experience not to exceed one semester (i.e., summer programs, research for credit, graduate student rotation). Laboratory teams that carry out activities using recombinant DNA molecules, infectious microorganisms, human-derived materials (including cells), nonhuman primate-derived materials (including cells) or biological toxins must assure that all personnel (including temporary lab members) complete a lab-specific biosafety orientation before working in the lab.

**Use this form to document completion of this orientation, and maintain a copy with lab training records for 3 years from the time of completion.**

<b>Temp. Lab Member:</b>		<b>Assigned Mentor/Trainer:</b>	
<b>Start Date:</b>		<b>Principal Investigator:</b>	
<b>End Date:</b>		<b>Educational Program:</b>	
<b>VEHS Biosafety Training Completion Dates</b>		<b>Biosafety levels applicable to experience (check box)</b>	
<b>Biosafety 101:SMP</b>		<b>BSL-1 only</b>	<b>BSL-2</b>
<b>Principles &amp; Practices of Biosafety/BBP</b>		<b>If BSL-2, list agent/materials below</b>	

**Mentor/Trainer:** As it relates to their lab experience, review each item below with temporary lab member before they are permitted to work in the lab. Once completed, both the trainer and trainee should sign and date the form.

<b>Trainer initials</b>	<b>Biological materials (microorganisms, diagnostic samples, cell cultures, etc.) present in the lab</b>
	<b>What biological materials will you work with (or around) in this lab?</b>
	<b>Are these biological materials known or suspected to contain pathogens or opportunistic pathogens that can infect humans?</b> <i>If YES, senior lab personnel must provide you with information about the routes of transmission, risks of exposure, and procedures in place to minimize your exposure risk.</i>

<b>Trainer initials</b>	<b>Safety equipment</b>
	<b>Where is the hand washing sink in the lab?</b> <i>If there is no sink in the lab, senior lab personnel must provide a review of alternate procedure for hand washing.</i>
	<b>Where is the eyewash located, and how is it activated?</b>
	<b>Where can you get fluid-resistant disposable gloves (latex-free), and what actions do you need to take if the gloves provided by the lab do not fit?</b>
	<b>What procedures require the use of splash goggles, and where are these kept?</b>
	<b>What procedures require the use of lab coats or smocks, and how are these provided?</b>
	<b>What actions do you take if your lab coat/smock becomes contaminated (i.e., in the event of a splash or spill)?</b>
	<b>What secondary containers are used for biological material transport outside the lab, and where are these kept?</b>
	<b>What actions do you take if a spill of biological materials occurs?</b> <i>NOTE: If you are rotating through a lab, you should NOT clean up a spill of significant quantity or high risk material, so you will need to know who to contact in this case.</i>
	<b>If you are exposed to biological materials through a splash to the eyes, nose, or mouth, or through contact with broken skin or via skin injury, you will flush the affected area for 15 minutes with water and report for medical follow-up. Who do you report your injury to, and where do you go for medical follow-up?</b> <i>Your PI or lab supervisor should be able to provide you with this information.</i>

Trainer initials or N/A	Elevated risk equipment and procedure considerations	Date proficiency observed/By
	<b>Will you be using any aerosol-generating equipment for your work in the lab (i.e., centrifuges, blenders, vortexes, pipettors)?</b> <i>If YES, trainer must (1) provide a review in proper procedures for each device to assure that your practices are consistent with the lab's procedures for minimizing and containing aerosols, and (2) document this observed proficiency in the column to right.</i>	
	<b>Will you use a biosafety cabinet for your work?</b> <i>If YES, trainer must (1) provide a review of how to use this device and assure that your practices are consistent with the lab's procedures for minimizing and containing aerosols, and (2) document this observed proficiency in the column to right.</i>	
	<b>Will you be using sharp devices (i.e., tools that are sharp enough to puncture your skin) in the lab?</b> <i>If YES, trainer must (1) provide a review of safe handling practices (including sharps disposal) to assure that your practices will effectively minimize your sharps exposure risk, and (2) document this observed proficiency in the column to right.</i>	

Trainer initials or N/A	Disinfection and biohazardous waste handling
	<b>What disinfectant(s) are used, and what are the hazard properties?</b>
	<b>How is the disinfectant prepared for use, what's the contact time, and when must it be replaced with freshly prepared product?</b>
	<b>What items need to be collected and treated as solid biohazardous waste in the lab?</b>
	<b>How does the lab store and treat solid biohazardous waste (including sharps containers for disposal)?</b>
	<b>If the lab autoclaves its waste or lab supplies, are you expected to run the autoclave?</b> <i>If YES, someone MUST provide training for you!</i>
	<b>Where are extra biohazard bags and sharps containers kept?</b>

Trainer initials	Other containment practices
	<b>Where can you store food and drink (and items used for their consumption) in a manner that they won't be contaminated with lab materials and wastes?</b>
	<b>Where can you consume food and drink that is free of lab hazards including biological materials, lab chemical solutions, etc.?</b>

Lab-Specific Biosafety Orientation Acknowledgment	
<b>Mentor/Trainer</b> On _____ (insert date), I provided lab-specific biosafety orientation for the temporary lab member as documented above.	<b>Temporary Lab Member</b> I received lab-specific biosafety orientation as outlined on this checklist and was given an opportunity to ask questions related to my lab-acquired infection exposure risk.
<b>Signature/Date:</b>	<b>Signature/Date:</b>

**The completed training record should be maintained by the PI or the designated Lab Supervisor for 3 years from the date of completion.**

**Questions about biosafety training or the use of this form?** Please contact VEHS Biosafety at 322-2057 or [biosafety@vanderbilt.edu](mailto:biosafety@vanderbilt.edu)