BIOHAZARDOUS MATERIALS USER REGISTRATION

A. User Information

Last Name:	First Name:
Employee/Student #:	Position:
Supervisor:	Laboratory: (Building/Room #)
Faculty:	Department:
Host Institution:	
Tel:	Email:

B. Project

Please provide the title of the research project under which you will be working.

_____

_____

C. Training and Experience

Please indicate the training that you have completed and provide an approximate date of completion.

PHAC online courses (submit the electrical certificates to bio.safety@uottawa.ca)

- ☐ General Safety For Containment Labs _____
- ☐ Containment Level 2 Operational Practices _____
- ☐ Biological Safety Cabinets _____
- ☐ Biomedical Waste Management Program _____

uOttawa Training

- ☐ General Lab Safety Training _____
- ☐ Safe Use of Autoclaves _____

D. Biohazardous Material

Reference the Material Safety Data Sheets (MSDS) or Pathogen Safety Data Sheets (PSDS) and complete the following table with the biological material (i.e. mammalian cells, viruses, bacteria, biotoxins, recombinant DNA and other potentially biohazardous material) manipulated in the scope of your project.

BIOHAZARDOUS AGENTS			PROPHYLACTIC VACCINE AVAILABLE (Y/N)	IN VIVO (Y/N)
TYPE (i.e. Bacteria, Virus, Cell Line…)	STRAIN	RISK GROUP		

E. Practical Training

Practical training is provided in the laboratory by the Principal Investigator or his / her delegate. It addresses the need for specific training as it pertains to the nature of the biohazardous or potentially biohazardous material used, as well as specific procedures to be followed. The Practical Training complements the **mandatory** Biosafety courses required by the Office of the Chief Risk Officer (OCRO).

Practical training provided by: _____

	Examples	Not Applicable	Received
Accident/ Incident Reporting	Reporting procedures; Contact person		
Aerosols	Techniques and equipment that generate aerosols; How to minimize; Containment		
Autoclaves	Faculty/department procedures; Users have attended training; Record logs		
Biological Agents	Familiarity with agents they are handled; Modes of transmission, Characteristics (including specific effect on immunocompromised or pregnant laboratorians, if applicable) and Risk Group		
Biological Safety Cabinets	Proper use, working safely, cross contamination, use of flame, UV lights, certification		
Blood-borne Pathogens	Measures to minimize exposure		
Infection Control	Universal precautions, handwashing		
	Aseptic techniques and good microbiological practice		
	PPE		
MSDS/PSDS	Where to find and how to use MSDS/PSDS		
Needle sticks	Safe practices, Disposal		
Security	Keep doors locked; Complete inventory records; Question strangers		
Acquisition and Transfer	Required documentation (BMTN, MTA); TDG and IATA training as needed		
Specific Procedures and Equipment	Highlight equipment and procedures that may cause hazards		
Spill Response	Clean up procedures; Location of spill kits; types of disinfectants		
Transportation	Safe practices		
Waste management	Packaging; Decontamination; Collection; Disposal procedures		

F. Health and Safety

For any questions or concerns related to medical surveillance or post exposure, please contact Health and Wellness Sector for a confidential discussion.

G. Access Clearance

Please list the keys that you are or will be assigned and the rooms to which the keys will give access.

ROOM #	KEY CODE

H. Declaration and Signature

I declare that I am fully aware of the risks associated with the biological agents listed herein.
I agree to abide by all the conditions associated with the certificate under which I will be working.

_____ _____
User's signature Date

_____ _____
Practical Training Provider's signature Date

_____ _____
Supervisor's name & signature Date