

Biological Safety Site-Specific Training Record

Name: _____

Start Date: _____

Site-Specific Training Checklist

These items should be checked off as they are covered by the Principal Investigator/Lab Manager for each incoming person to the lab.

Safety Practices

_____ Discussion of procedures that involve handling of biological materials and how to perform such tasks in a manner that reduces risk of exposure and environmental release.

Personal Protective Equipment (PPE)

_____ Discussion of what kinds of PPE are required for specific tasks

_____ How to use PPE properly, location of PPE in the laboratory, and how to obtain more

_____ Maintenance and storage of PPE

Equipment

_____ Location and operation of safety equipment in the lab (includes eyewash stations, fire extinguishers, gas shut off valves, etc.)

_____ Proper use of equipment that is used for the processing, containment and analysis of biological materials (includes biological safety cabinets, centrifuges, microtomes, cell sorters/counter, automatic sampling devices, incubators, vacuum/suction systems, autoclaves)

Waste Handling

_____ Discussion of how biohazardous waste items are to be segregated and stored (i.e. sharps vs. non-sharps, etc.), how to properly package waste materials, and how to request a biological waste pickup from EH&S.

_____ Discussion of procedures for on-site waste treatment methods (i.e. disinfection of cell culture waste, pipettes, etc.)

Disinfection/Spill Response/Exposure Incident Response

_____ Review of laboratory procedures for disinfection including explanation on product hazards, preparation, limitations, and shelf-life

_____ Review of spill response procedures including location of the biohazard spill kit/supplies and how to use them.

_____ Review of the Biological Exposure Incident Response procedure.

Type of Training	Date of Completion
Biological Safety Training (required for BSL-2 work)	
Bloodborne pathogens training (if applicable)	
Complete reading of Carnegie Mellon Biosafety Manual	
Completion of site-specific training checklist	

Verification of Training

I certify that the site-specific training items were reviewed and understood.

Principal Investigator/Lab Manager
Signature-Date

Employee Signature-Date