

**BIOSAFETY OCCUPATIONAL HEALTH PROGRAM – CONFIDENTIAL EXPOSURE QUESTIONNAIRE**

**INSTRUCTIONS:**

- The Biosafety Office will use this form to conduct a risk assessment and the results will be mailed to the Principal Investigator indicated in the table below.
- Use this form to indicate current or future potential exposures due work with animals, biological and infectious material.
- Due to the sensitive nature of this form, you may choose to hand deliver them to the Biosafety Office at 793 Marietta Street. Forms may also be emailed to [bohlp@ehs.gatech.edu](mailto:bohlp@ehs.gatech.edu).
- Contact the Biosafety Officer or Assistant Biosafety Officer with any questions: [biosafety@ehs.gatech.edu](mailto:biosafety@ehs.gatech.edu) or 404-894-6120 (BSO)/404-894-6119 (ABS).

<b>Last Name:</b>		<b>First Name:</b>	
<b>GT ID#:</b>		<b>Department:</b>	
<b>Principal Investigator:</b>		<b>Phone #:</b>	
<b>Email Address:</b>		<b>Questionnaire Date:</b>	

**SECTION I – WORK WITH LIVE ANIMALS**

1. Are you currently working or planning to work with live animals?  Yes – specify below  No – skip Section I, continue to Section II

Species	Activities (mark all that apply)	Is the animal transgenic or genetically modified?	Brief description of work to be performed:
	<input type="checkbox"/> Surgery/Necropsy <input type="checkbox"/> Hands on work with animal <input type="checkbox"/> No direct contact, observation only	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	<input type="checkbox"/> Surgery/Necropsy <input type="checkbox"/> Hands on work with animal <input type="checkbox"/> No direct contact, observation only	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	<input type="checkbox"/> Surgery/Necropsy <input type="checkbox"/> Hands on work with animal <input type="checkbox"/> No direct contact, observation only	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Do you have a history of any allergies to the animals listed above?  Yes  No

**SECTION II – WORK WITH BIOLOGICAL / INFECTIOUS MATERIAL**

2. Are you currently working or planning to work with biological and/or infectious material?  Yes – answer all questions in Section II  No – skip to Section II, continue to Section III

3. Do you currently work or plan to work with microorganisms?  Yes – specify below  No – skip to Question 4

Type	List examples (i.e., E. coli, Influenza Virus)
Choose Type	
Choose Type	
Choose Type	

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4.	Do you currently work or plan to work with <u>human source material</u> ? <span style="float:right;"><input type="checkbox"/> Yes – <i>specify below</i>      <input type="checkbox"/> No – <i>skip to Question 5</i></span>
	<i>Type</i> <i>List examples (i.e., HEK 293T cells, epidermal tissue, feces, saliva, blood)</i>
	Choose Type
	Choose Type
	Choose Type
	Choose Type
5.	Do you currently work or plan to work with <u>animal source material</u> ? <span style="float:right;"><input type="checkbox"/> Yes – <i>specify below</i>      <input type="checkbox"/> No – <i>skip to Question 6</i></span>
	<i>Type</i> <i>Animal Species</i> <i>List examples (i.e., BHK cells, epidermal tissue, feces, saliva)</i>
	Choose Type
	Choose Type
	Choose Type
	Choose Type
6.	Do you currently work or plan to work with <u>plants</u> ? <span style="float:right;"><input type="checkbox"/> Yes – <i>specify below</i>      <input type="checkbox"/> No – <i>skip to Question 7</i></span>
	<i>List species:</i>
7.	Do you currently work or plan to work with <u>biological toxins</u> ? <span style="float:right;"><input type="checkbox"/> Yes – <i>specify below</i>      <input type="checkbox"/> No – <i>skip to Question 8</i></span>
	<i>List biological toxins:</i>
8.	Do you currently work or plan to work with <u>recombinant and/or synthetic nucleic acid molecules</u> ? <span style="float:right;"><input type="checkbox"/> Yes – <i>specify below</i>      <input type="checkbox"/> No – <i>skip to Section III</i></span>
	<i>List recombinant and/or synthetic nucleic acid molecules:</i>

**SECTION III – OTHER**

9.	If you answered “No” to question 1 and 2 above, list all of your duties related to the lab research environment:
10.	Do you expect to need to wear respiratory protection in your laboratory? <span style="float:right;"><input type="checkbox"/> Yes      <input type="checkbox"/> No</span>
	<i>Please explain:</i>

***Disclaimer: Certain medical conditions may increase potential risk of health problems when working with animals and/or biological materials. These conditions could include but are not limited to allergies and/or animal dander, asthma, heart valve disease, and immunosuppression.***

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*