**UM Researcher Incident Report Form for**

**Potentially Hazardous Biological Agents**

*Incident reports should be filled out and submitted as soon as possible after accident response procedures have been followed (summarized below).*

|  |  |  |  |
| --- | --- | --- | --- |
| Researcher Name:       | Phone:       | Email:       | PI:       |
| Describe the experiment (if applicable) |       |

|  |  |  |  |
| --- | --- | --- | --- |
| Incident Date: |        | Incident Time: |       |
| Incident Location(s)Building: |       |
| Room #(s) |       |

How many individuals were involved?

1. **Describe the Incident (who, what, when, where)**

**2. Nature of the incident**

2.1 Specify the biohazard/type of material/animal you were exposed to, including species or type:

2.2 Did this incident involve recombinant DNA technology?

 [ ]  Recombinant or synthetic nucleic acids including recombinant cells, agents, organisms

[ ]  Transgenic animal

[ ]  Recombinant agents used for human gene transfer

[ ]  Infectious agents created with recombinant gene transfer techniques

[ ]  Attenuated agents created with recombinant gene transfer techniques

2.3 Was the agent infectious?

[ ]  No

**[ ]  Yes, please describe:**

2.4 Describe the nature of the exposure:

[ ]  Splash to eyes, nose, or mouse

[ ]  Animal bite

[ ]  Cut

[ ]  Needle stick

**[ ]  Other, please describe:**

**3. Treatment Information**

3.1 Did you wash after the exposure in a sink, eyewash, or safety shower?

[ ]  No

[ ]  Yes, for  minutes

3.2 If the incident involved exposure to the skin, indicate the disinfectant used (Check all that apply):

[ ]  Soap

[ ]  Other disinfectant, describe:

3.3 Was professional medical treatment sought from any of the following (Check all that apply):

[ ]  Employee Health Clinic, Dominion Tower 4th floor

[ ]  Emergency room

[ ]  Other, please describe:

* 1. How long after the incident was professional medical treatment sought?

3.5 Any medical surveillance provided or recommended after the incident?

 **4. Environmental Release**

4.1 Were biological materials spilled and/or splashed on environmental surfaces within the laboratory?

*[ ]  No*

*[ ]* **Yes, describe the areas of contamination:**

4.2 Was untreated biological material released from the laboratory?

*[ ]  No*

*[ ]* **Yes, describe the nature of the release:**

4.3 Describe the clean-up procedure used:

**5. Assessment of Accident**

5.1 What was the root cause of the accident?

*Possible issues include level of training, communication, awareness of hazards etc.*

5.2 What could you have done better to either prevent injury or improve your response after the injury?

5.3 After the incident, who all did you notify of the exposure?

5.4 Were there any Equipment failures

5.5 What personal protective equipment (PPE) was being worn at the time?

[ ]  Safety Glasses

[ ]  Gloves

[ ]  Lab Coat

[ ]  Others, please list:

**6. Training**

6.1 When was the last date of the Lab Safety Training ?

6.2 When was the last date of the Biological Safety Training ?

6.3 When was the last date of the Blood Borne Pathogen (BBP) Training?