

BIOHAZARD LABORATORY JOB SAFETY ANALYSIS/PROTOCOL

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| BIOHAZARD JOB SAFETY ANALYSIS | DATE: _____ |
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BIOHAZARD JOB DESCRIPTION: _____

START DATE: _____ **TIME:** _____ am/pm

TASK DURATION: _____

TASK DESCRIPTION:

| # | JOB STEP | BIOHAZARD OR OTHER HAZARD IDENTIFIED | CONTROL METHOD TO ELIMINATE OR REDUCE BIOHAZARD/OTHER HAZARD |
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Institutional Biological Safety Committee Members – Sign for Acceptance

| Name | Initials | | | | |
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