

**TEMPLE UNIVERSITY FLOW FACILITY HAZARD ASSESSMENT FORM**

Date:           

**Instructions:** Please complete the following two pages and email to Amir Yarmahmoodi (Amir.Yarmahmoodi@temple.edu) before each flow analysis of new biohazard agent and before each cell sorting. If multiple users are from the same lab, each end user still needs a separate form.

End User Name: <span style="background-color: yellow;">          </span>	Phone: <span style="background-color: yellow;">          </span>
TU ID: <span style="background-color: yellow;">          </span>	AccessNet Username: <span style="background-color: yellow;">          </span>
Lab PI Name: <span style="background-color: yellow;">          </span> By writing PI's name, PI is responsible for correction of the form	

<b>Protocols that cover proposed work:</b>		
Protocol#	Brief Title:	Approval Date
IBC #: <span style="background-color: yellow;">          </span>	<span style="background-color: yellow;">          </span>	<span style="background-color: yellow;">          </span>
IACUC #: <span style="background-color: yellow;">          </span>	<span style="background-color: yellow;">          </span>	<span style="background-color: yellow;">          </span>

**Project Specific Details:**

1. Fixed samples?  Yes  No
2. Need to be sorted?  Yes  No
3. Species of origin and type of cells:             
 For human samples, were the donors screened for bloodborne pathogens?  
 Yes  No. Please go to 4.  
 If Yes, any pathogen it may contain?  
 None  HIV  HCV  HBV  Other,  
 Has the infectious agent been inactivated?  
 Yes, describe method:  
 No  Unknown  
Please note: Sorting of non-fixed human cells must be done on the Influx sorter.
4. Do the cells carry infectious agents such as bacteria, virus, fungi, parasites, etc.?  
 Yes, please list:  No
5. Were the cells genetically engineered?  Yes  No  
 If yes, how were they engineered? Was a virus used (adenovirus, retrovirus, lentivirus, herpes virus, etc.)? Give a brief description.
6. Assigned containment:  BSL-1  BSL-2  BSL-2 enhanced
7. Preferred instruments:  Aria sorter  Influx sorter  LSR-II  Calibur

**Brief description of the project (including purpose and procedures):**

**Office Use Only**

Acceptable facility:  Aria Room (MRB 547A)  Influx Room (MRB 547B)  
 Calibur (MRB 547)  LSR-II (MRB 547)

Amir Yarmahmoodi	Thomas Rogers	EHRS Reviewer
Manager of the Flow Facility	IBC Chair Director of the Flow Facility	EHRS
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Signature Date	Signature Date	Signature Date

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**Summary:**

IBC PROTOCOL NUMBER				
Description of Cells Name or Description				
Fixed? (Yes or No)				
Infected or Modified? (Yes or No)				
Agent/Vector Description				
BSL Level				
Instrument Designate				

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Amir Yarmahmoodi	Thomas Rogers	EHRIS Reviewer
Manager of the Flow Facility	IBC Chair Director of the Flow Facility	EHRIS
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Signature Date	Signature Date	Signature Date