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| --- | --- | --- | --- | --- | --- | --- |
|  | ***Ragon Safety*** | ***Shipping*** | ***Bloodborne Pathogens*** | ***Partners IBC*** | ***Regulatory*** | ***Laboratory Tour*** |
| ***\*Circle One Category Below\**** | ***Offered every Friday @ 1pm***  ***(1 hr)***  ***mbedford@***  ***eheinc.com*** | ***Log on to***  ***https://hub.partners.org/hazmat/*** | ***Log on to Healthstream, search catalog for “Ragon Bloodborne”*** | ***You will receive an email to complete Biosafety and Bloodborne Pathogens AFTER your PI adds you to their PIBC*** | ***Log on to*** [***https://about.citiprogram.org/***](https://about.citiprogram.org/)***.***  ***Click on the Basic Biomedical Course***  ***Edemers2@***  ***mgh.harvard.edu*** | ***With Alicja Trocha or Amruta Samant***  ***asamant@mgh.***  ***Harvard.edu***  ***atrocha@mgh. harvard.edu*** |
| **Employee/Student /Collaborator -**  ***Administrative*** *(non-lab, no patient or patient-sample contact)* | ✓  \_\_\_\_\_\_\_\_  EHS Initials |  |  |  | ✓  \_\_\_\_\_\_\_\_  E. DeMers  Initials\* |  |
| **Employee/Student/Collaborator -**  ***Clinical*** *(non-lab, contact with patient samples and/or patients)* | ✓  \_\_\_\_\_\_\_\_  EHS Initials | ✓  \_\_\_\_\_\_\_\_  Your Initials\* | ✓  \_\_\_\_\_\_\_\_  Your Initials\* |  | ✓  \_\_\_\_\_\_\_\_  E. DeMers  Initials\* |  |
| **Employee/Student/Collaborator -**  ***Laboratory*** *(handle biological materials in BSL-1, BSL-2+ or BSL-3 labs)* | ✓  \_\_\_\_\_\_\_\_  EHS Initials | ✓  \_\_\_\_\_\_\_\_  Your Initials\* | ✓  \_\_\_\_\_\_\_\_  Your Initials\* | ✓  \_\_\_\_\_\_\_\_  PI Initials | ✓  \_\_\_\_\_\_\_\_  E. DeMers  Initials\* | ✓  \_\_\_\_\_\_\_\_  Lab Mgr Initials |
| **External Core User** *(microscopy, flow cytometry / cell sorting)* | ✓  \_\_\_\_\_\_\_\_  EHS Initials | ✓  \_\_\_\_\_\_\_\_  Your Initials\* | ✓  \_\_\_\_\_\_\_\_  Your Initials\* |  |  |  |

**Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Print Your Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Signature of Supervisor: ­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**