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| **University of Vermont**  **Training Record for New A/BSL-3 Users** | | | | | |
| **Trainee Name:** |  |  |  | | |
| **Position:** |  | **Department:** |  | | |
| **PI/Supervisor:** |  | **BSL-3 Mentor:** |  | | |
|  | | |  |  |  |
| **Checklist** | | |  |  |  |
| **Pre-Approvals and Environmental Health & Safety (EH&S)** | | | **Trainer or Training Doc/Dept** | **Trainer**  **Initials or Verified By** | **Date**  **Completed** |
| 1. CITI Specific Trainings (online):  * CITI BSL-2 Basic Course * CITI OSHA Bloodborne Pathogens * CITI Select Agents/DURC | | |  |  |  |
| 1. A/BSL-2 Training Course (in person) | | |  |  |  |
| 1. UVM Specific Laboratory Safety Training   **Online:**   * Laboratory Safety Roles and Responsibilities * Laboratory Ventilation and Chemical Fume Hoods * Chemical Safety in the Laboratory * Chemical Waste Disposal * Biowaste Management Procedures * Safe Use of Biosafety Cabinets   **In Person:**   * Keeping Your Lab Safe * Emergency Response for Laboratory Workers | | |  |  |  |
| 1. Review of:  * A/BSL-3 Researcher Experience Form & * UVM Biosafety Plan for A/BSL-3 & S.A. or Toxins * UVM Security Plan for A/BSL-3 & S.A. or Toxins * UVM Incident Response Plan for A/BSL-3 & S.A. or Toxins | | |  |  |  |
| **EH&S and Occupational Health** | | |  |  |  |
| 1. Fill out, submit the medical questionnaire for respirator users, and obtain medical clearance | | |  |  |  |
| 1. A/BSL-3 Introductory Training (in person) | | |  |  |  |
| 1. Review of:  * PPE and Respirator Training * Non-Disposable, Air-Purifying Respirator Training (online) | | |  |  |  |
| 1. Review A/BSL-3 SOPs and work practices | | |  |  |  |
| **ABSL-3 Only Requirements for OACM**  **Not Required if not Working with Animals** | | |  |  |  |
| 1. CITI Animal Biosafety Course (online) | | |  |  |  |
| 1. Standard bio-methods course with OACM vet staff | | |  |  |  |
| 1. Animal handling training with OACM vet staff | | |  |  |  |
| 1. Demonstrate proficiency with animal procedures at ABSL-2 level | | |  |  |  |
| **A/BSL-3 Orientation and Mentored Training** | | |  |  |  |
| 1. Complete A/BSL-3 Orientation Training | | |  |  |  |
| * 1. Entry 1 (Donning/Doffing and Entry/Exit) | | |  |  |  |
| * 1. Entry 2 (Biological Spill and Emergency Responses) | | |  |  |  |
| * 1. Entry 3 (SOPs and Specific Work Practices) | | |  |  |  |
| * 1. Select Research Track - General Laboratory or Animal | | |  |  |  |
| 1. Complete A/BSL3 Mentored Training Program | | |  |  |  |
| * 1. Practice A/BSL-3 procedures at BSL-2 (hours vary) | | |  |  |  |
| * 1. Proficiency assessment of BSC usage/microbiological methods | | |  |  |  |
| * 1. Practice A/BSL-3 procedures at BSL-3 (15-60 hours) | | |  |  |  |
| * 1. Proficiency assessment of A/BSL-3 work practices | | |  |  |  |
| **VDHL Requirements** | | |  |  |  |
| 1. Read BSL-3 Biosafety Manual:  * D-AD-019 Rev 7 Dec 2022 - ABSL-3/BSL-3 and Select Agents or Toxins Management Procedure * P-MIC-065 Rev 17 Dec 2022 - ABSL-3/BSL-3 and Select Agent or Toxin Biosafety Plan * P-MIC-075 Rev 17 Dec 2022 - ABSL-3/BSL-3 and Select Agent Security Plan * D-MIC-001 Rev 15 Dec 2022 - ABLS-3/BSL-3 and Select Agent Incident Response Plan * D-AD-017 Rev 5 Dec 9 2022 Guidelines for Medical Surveillance of Laboratory Personnel Working with Potential BSL-3 Agents * P-MIC-049 Rev 1 May 2022 Containment and Decontamination of Spilled Biological Materials in the ABSL-3/BSL-3 Suite * Micro 1034 Rev 5 Dec 2017 Required Procedures for Entering Exiting ABSL-3/BSL-3 Labs * D-AD-016 Annex A Rev 4 April 12 2022 Evacuation and Emergency Response Plan * D-AD-016 Annex F Visitors Policy * D-AD-016 Annex G Rev 3 June 2016 Eating Drinking Policy * D-AD-016 Annex I Rev 1 June 2019 Personal Electronic Devices Policy * Select Agent List: <https://www.selectagents.gov/sat/list.htm>   Stericycle Biowaste Management (may be needed at a later time)   * Biohazardous Waste Training * DOT Training   **BSL-3 Autoclave Training - Only if authorized by Joyce** | | | D-AD-019  P-MIC-065  P-MIC-075  D-MIC-001  D-AC-017  P-MIC-049  Micro 1034  D-AD-016 Annex A  D-AD-016 Annex F  D-AD-016 Annex G  D-AD-016 Annex I  FSAP Select Agent |  |  |
| 1. Review of Facility Safety Equipment and Alarms | | |  |  |  |
| 1. Review of Facility Entry & Exit Procedures | | |  |  |  |
| 1. Emergency Action Training, Person Down Response -   VDHL Facility Tour 1 (in concert with step 13) and  A/BSL-3 Facility Tour 2 (final step) | | |  |  |  |

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| 1. **BSL-2 Basic Training Completed and A/BSL-3 SOPs Reviewed** |  |
|  |  |
| PI Signature | Date |
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|  |  |
| 1. **ABSL-2 Handling/Methods Completed and ABSL-3 Work Approval** |  |
|  |  |
| OACM Personnel | Date |
| 1. **Completed Initial VDHL/CRF Tour** |  |
|  |  |
| VDHL Biosafety Officer | Date |
| 1. **Completed Biosafety Review and Orientation Training** |  |
|  |  |
| UVM Biosafety Officer | Date |
| 1. **Reviewed all SOPs and Completed Mentored Training** |  |
|  |  |
| Trainee | Date |

**INSTRUCTIONS: GREEN** numbers 1-4 must be completed first prior to contacting UVM Biosafety for further training. **YELLOW** numbers 5-8 (plus 9-12 for ABSL3 users) can be completed in any order. All **GREEN** and **YELLOW** numbers PLUS notifying the VDH biosafety office to receive badge and initial tour MUST be completed before beginning **RED** numbers 13 & 14. All **BLUE** VDH requirements occur once UVM training is completed to receive unrestricted building access.

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| 1. **FINAL APPROVAL FOR FULL A/BSL3 ACCESS** |  |
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| UVM Biosafety Officer and VDHL Biosafety Officer | Date |