**BIOHAZARD RISK ASSESSMENT WORKSHEET**

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| **AGENT IDENTIFICATION** |
| **1. Name** *(genus/species or PrP isoform)*:       |
| **2. Type of Agent** *(check all that apply)*: |
| [ ]  Bacterium | [ ]  Prion |
| [ ]  Fungus | [ ]  Rickettsia |
| [ ]  Parasite | [ ]  Toxin derived from a living organism |
| [ ]  Virus | [ ]  Other:       |
| **3. Disease(s) caused by agent(s)**:       |

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| **HEALTH HAZARDS** |
| **1. Pathogenicity**: |
| [ ]  Potential pathogen | [ ]  Pathogenic |
| [ ]  Highly pathogenic | [ ]  Opportunistic pathogen |
| [ ]  Other:       |
| **2. Epidemiology**:       |
| **3. Host Range** *(check all that apply)*: |
| [ ]  Humans |
| [ ]  Animals *(specify)*:       |
| [ ]  Plants *(specify)*:       |
| **4. Infectious Dose**: |
| [ ]  Known:       |
| [ ]  Unknown:       |
| **5. Mode of Transmission** *(check all that apply)*: |
| [ ]  Direct Contact | [ ]  Human to Human |
| [ ]  Human to Animal | [ ]  Indirect Contact |
| [ ]  Vector-Borne | [ ]  Inanimate Objects |
| [ ]  Food, Water, Air | [ ]  Other:       |
| **6. Route(s) of Entry** *(check all that apply)*: |
| [ ]  Ingestion | [ ]  Inhalation |
| [ ]  Penetration through skin | [ ]  Contact with mucous membranes |
| **7. Incubation Period**:       |
| **8. Communicability**: |
| [ ]  Evidence of Person to Person Transfer |
| [ ]  Suspected Person to Person Transfer |
| [ ]  No Evidence of Person to Person Transfer |

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| **DISSEMINATION** |
| **1. Reservoir**:       |
| **2. Zoonotic Potential**: |
| [ ]  No zoonotic potential | [ ]  Zoonotic potential:       |
| **3. Vectors**: |
| [ ]  None | [ ]  Vectors include:       |

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| **VIABILITY** |
| **1. Drug Susceptibility**:       |
| **2. Disinfectant Susceptibility:**       |
| **3. Physical Inactivation:**       |
| **4. Survival Outside Host:**       |

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| **MEDICAL CONCERNS** |
| **1. Surveillance**:       |
| **2. First Aid/Treatment Options:**       |
| **3. Immunization:**       |
| **4. Prophylaxis:**       |

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| **LABORATORY HAZARDS** |
| **1. Laboratory-Acquired Infections** *(epidemiology of lab-acquired infections)*:       |
| **2. Sources/Specimens:**       |
| **3. Primary Hazards:**       |
| **4. Special Hazards:**       |

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| **RECOMMENDED PRECAUTIONS** |
| **1. Containment Requirements**:       |
| **2. Personal Protective Equipment:**       |
| **3. Other Precautions:**       |

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| **HANDLING INFORMATION** |
| **1. Spills**:       |
| **2. Disposal:**       |
| **3. Storage:**       |

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| **MISCELLANEOUS/REFERENCES** |
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**Once completed, this document may serve as a material data safety sheet for your biological agent.**