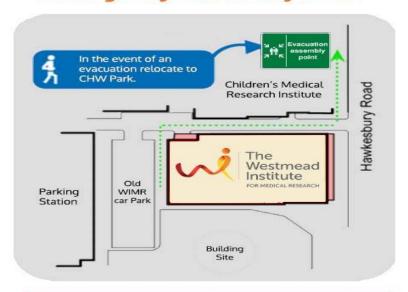


Training Record – Histology

Employment Details									
Trainee's Name:		Email:		Mobile:					
Affiliation:		Group:		Position:					
Cura	n isan /N Asia a san'a Nama	- Francil		Dhana	wmala.am.				
Supervisor/Manager's Name:		Email:		Phone number:					
Emer	Emergency Contact / Next of Kin Details								
Emergency contact name:		Relationship to you:		Phone number:					
Induction Checklist (Histology Lab, Level 1)									
Have you previously completed an induction for this laboratory? Yes No									
-	If yes, for which equipment? Go to p. 3, no signature for induction is required								
-	omplete the induction below:			o.g					
	· 								
2	Evacuation, emergency exits, emergency contacts								
3	Histology laboratory equipment and services induction Workplace surveillance: sampra_semputer and other tracking								
4	Workplace surveillance: camera, computer and other tracking PPE, safety shower, eye wash, hand wash sink, spills and ergonomics								
5	Sharps injury, first aid, incident forms								
6	PC1 laboratory								
7	Training request PPMS								
8	Booking policy PPMS								
9	Operation of biosafety cabinets and fume cupboards								
10	Disposal of solvents, dyes and chemicals								
11	Waste bins, general, recycling, contaminated sharps								
12	Infection control								
13	Access hours and visitors								
14	Fees								
15	Publication acknowledgement								
Induc	tion Completion								
Signature of Inductee:					Date:				
Name of Inductor:			Signature of Inductor:						

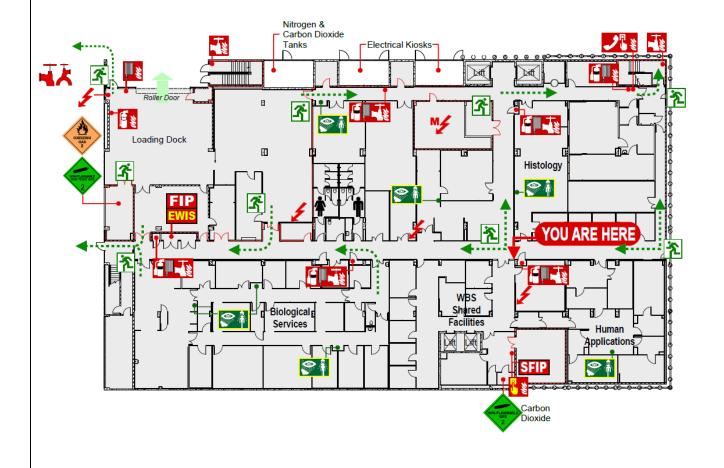
EMERGENCY ASSEMBLY AREA – CHILDREN'S HOSPITAL PARK

Emergency Assembly Area



DO NOT ASSEMBLE IN FRONT OF CMRI.

EMERGENCY EGRESS ROUTES LEVEL 1 - 3 FIRE STAIRS LOCATED IN THE BUILDING



Instrument Training (Cryostat Nx70, Histology Lab, Level 1)

	Training Checklist	Tick when completed:
1	Workstation requirements and anti-cut gloves	
2	Safety approach, ergonomics	
3	Specimen preparation	
4	Operating the control panel	
5	Trimming and cutting protocol steps with mandatory safety stops	
6	Puncture wound / near miss protocol	
7	Cleaning workstation, decontamination, do not clean with blade inserted	

instrument training completion								
Signature of trainee:		Date:						
Name of trainer:	Signature of trainer:	l						