## Risk Assessment Form (3)

Must be completed before experimentation.
Student's Name(s) Lauren Kitts
Title of Project The Effect of Diet on Immune Cells in Humanized Gnotobiotic Mice colonized with IBD Microbiome
To be completed by the Student Researcher(s) in collaboration with Designated Supervisor/Qualified Scientist: (All questions must be answered; additional page(s) may be attached.)
<ol> <li>List all hazardous chemicals, activities, or devices that will be used; identify microorganisms exempt from pre-approval (see Potentially Hazardous Biological Agent rules).</li> <li>processing mouse tissue cultured microbes derived from human stool samples</li> </ol>
2. Identify and assess the risks involved in this project. possible cut from instruments used in the processing of tissue
<ol> <li>Describe the safety precautions and procedures that will be used to reduce the risks.</li> <li>PPE-gloves, gown, hair net, shoe covers, lab coat</li> <li>Use of biosafety cabinet, sharps containers</li> <li>Proper training</li> </ol>
<ol> <li>Describe the disposal procedures that will be used (when applicable).</li> <li>Sharps containers</li> <li>Biohazard bins</li> </ol>
5. List the source(s) of safety information.  Safety data sheets
To be completed and signed by the Designated Supervisor (or Qualified Scientist, when applicable):  I agree with the risk assessment and safety precautions and procedures described above. I certify that I have reviewed the Research Plan/Project Summary and will provide direct supervision.  Sophia Sim  Designated Supervisor's Printed Name  Signature  Signature  Suphia Sin 2 C ms:s m. edy  Position & Institution  Phone or email contact information  Previous work in Faith Lab
Experience/Training as relates to the student's area of research