Washington University is committed to providing a safe working environment for all personnel, including individuals who have contact with animals..

**If you will be handling live animals, unpreserved tissues or body fluids, animal cages or animal carcasses or working in laboratory where animals are used, please read the following information and complete the medical surveillance questionnaire.**

In order to gain access to the animal facilities please visit <https://research.wustl.edu/access-dcm-facilities/> and log in to the university’s compliance system ([Learn@Work](file:///C:\Users\kalishmanje\Desktop\learnatwork.wustl.edu)**)** to complete the compliance profile and required training.You will be reminded annually to perform OHS Medical Surveillance training through Learn@work and submit an OHS Medical surveillance questionnaire.

**Allergy Prevention**

Animal or animal products such as dander, hair, scaled fur, saliva and body wastes contain powerful allergens that can cause both respiratory and skin disorders. The development of allergies is perhaps the most common hazard associated with working with and around laboratory animals. It is estimated that as many as 40 to 70% may experience allergic reactions of some type when working with laboratory animals. Up to 20% of allergic animal users may develop occupational asthma, which can limit the ability to work and may lead to permanent disability.

Inhalation is one of the most common ways for allergens to enter the body. After a period of time (often several months, but occasionally years), workers may inhale sufficient quantities of allergens to become sensitized, thus they develop symptoms when exposed again, even to tiny amounts of the allergen.

Personnel with a history of allergic reactions are much more likely to develop laboratory animal allergies and the incidence increases with increasing exposure. The purpose of the medical surveillance program and questionnaire is to identify employees with conditions that could place them at increased risk.

**Types of allergic reactions to animals can include:**

* Hives: Called contact urticaria, these are raised, clearly demarcated red lesions
* Allergic conjunctivitis: The conjunctiva of the eyes is red, itchy, and the eyes may water.
* Nasal Congestion: Called rhinitis, this is experienced by sneezing, an itchy nose, and clear nasal discharge.
* Asthma: Coughing, wheezing, shortness of breath, and chest tightness.
* Anaphylaxis: This is an extreme and sometimes life-threatening reaction which can include hives, generalized itching, throat tightness, eye or lip swelling and difficulty breathing or swallowing.

Personnel with a past history of anaphylaxis are required to consult with Occupational Health **prior** to working with animals or entering areas animals are housed.

Employees who are experiencing allergic symptoms from an exposure to animals at work should report these symptoms to Occupational Health #314-362-3528. In the case of severe symptoms with difficulty breathing, call #314-362-HELP, for transport to the emergency room.

Animal related allergies can often be managed by a combination of medical management and work place strategies. Wearing particulate masks, gloves, hair bonnets, shoe covers, laboratory coats, safety glasses, performing animal manipulations within biological hoods, and showering after the workday all help decrease exposure and allergic reactions. Employees should always wash their hands after contact with animals, potentially infective materials and after taking off gloves.

Those reporting significant animal allergy symptoms will be contacted by Occupational Health for further evaluation.

Additional information regarding animal related allergies can be found at <http://www.cdc.gov/niosh/docs/97-116/>

**Information for Immune Comprised individuals**

Immune compromised personnel may be at increased risk for development of infectious diseases as a result of research activities, including working directly with potential pathogens as well as caring for infected animals and their environment.

There are many medical conditions that many cause immune compromise. These conditions may mean that the individual’s immune system does not work as well as it does in healthy individuals. Some examples include:

* Infection with Human Immunodeficiency Virus (HIV)
* Prolonged use of corticosteroid (cortisone) medications by mouth or by injection. These drugs are given for a variety of diseases including asthma, allergies and autoimmune disorders such as lupus and rheumatoid arthritis.
* Monoclonal antibody therapy
* Medications used by people who have received organ transplants
* Long term diabetes mellitus, kidney or liver disease
* Blood diseases (diseases that affect the bone marrow or white blood cells, for example leukemia or lymphoma)
* Certain forms of cancer, leukemia and lymphoma
* Chemotherapy and radiation therapy
* Chronic under nutrition (malnutrition)
* Spleen removal
* Pregnancy will cause some degree of immunosuppression

**Pregnancy**

Individuals who are pregnant or attempting to conceive may need to take special precautions when working with animals, or in research laboratories since there are certain hazards and pathogens that may pose a health threat to the fetus. Individuals should contact Occupational Health for an evaluation of their circumstances.

Radiation Safety

The Washington University Department of Radiation Safety is responsible for protecting human health and the environment from radiation hazards by providing appropriate programs and services. The Nuclear Regulatory Commission has established specific guidelines for occupational exposure during pregnancy. Please email the Department of Radiation Safety ( [radsafety@wustl.edu](mailto:radsafety@wustl.edu)) or more information.

Chemical and Biological Safety

Washington University’s Environmental Health &Safety is responsible for providing biological, chemical, and general safety training and management of hazardous waste disposal, injury/illness response, and emergency preparedness. The Institutional Biological & Chemical (IBC) Safety Committee is responsible for ensuring that research carried out at WUSTL is conducted in a safe and responsible manner. The IBC oversees research involving recombinant DNA, infectious or potentially infectious agents, and/or hazardous chemicals. Please contact the Environmental Health and Safety office (ehs.wustl.edu) for more information.

|  |  |
| --- | --- |
| **Date:** |  |

**Participant information**

**Status:** Faculty/Staff/Student of Danforth Campus only

Faculty/Staff /Medical Campus only

Student of the Medical School

Student of the Danforth Campus working at the medical school

Summer Employee/Temp  BJ Resident  Visitor

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name: |  | | | | | | Employee ID # | | | |  | | |
| Gender: |  | | | | | School/Department: | | | | | |  | |
| Telephone# |  | | | | | Email Address | |  | | | | | |
| Job Title |  | | | | | Supervisor’s/PI’s Name: | | | |  | | | |
| Number of years employed at this facility? | | |  | How many months/years at your present position? | | | | | | | | |  |
| Did you work with laboratory animals prior to employment at this facility? Yes No | | | | | | | | | | | | | |
| What species of animals? | |  | | |  | | | |  | | | | |
|  | |  | | | | | | | | | | | |

**Workplace Environment**

|  |  |  |
| --- | --- | --- |
| Does your position require work with infectious agents? Yes No | if “yes” please list the infectious agent. |  |
| **Indicate the types of animal contact you will have:** | | |
| I will not have contact with animals  I am not handling animals but will be working in areas where animals are housed  I have direct contact and handling of non-fixed animals tissues, animal fluids or animal wastes  I have direct contact with non-sanitized animal caging or enclosures  I will have direct contact with non-human primates or tissues  I will be working with human blood/body fluids, human cells lines or “humanized mice.” | | |

|  |  |  |
| --- | --- | --- |
| **Please indicate the animals you will be exposed to-(this includes direct contact with animals, animal tissues, and/or wastes, and animal enclosures/cages/bedding) and document the approximate contact hours per week.** | | |
| Rodents (mice, rats, hamsters ) | hours per week |  |
| Small animals (rabbits, chinchilla, guinea pigs, other) | hours per week |  |
| Dogs, cats, pigs, other | hours per week |  |
| Sheep | hours per week |  |
| Frogs, Fish or other aquatics | hours per week |  |
| Marmosets | hours per week |  |
| Nonhuman Primates | hours per week |  |

Medical History

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Do you have any indoor pets? | Yes  No  If yes, please list the species | |  | |
|  | |
| Do you have an allergy to animals encountered outside the workplace? | Yes  No  If yes, list animal species. | |  | |
|  | |
|  | |
| Have you been skin tested for allergies? | Yes  No  If yes, what substances were you found to be allergic to or sensitized to? | | Ragweed Dust Grass Cats  Dogs  Mice  Trees Other | |
|  | |
| Has a doctor ever said you have asthma? | | Yes  No | | |
| Are there any animals you cannot work with because of allergy problems? | | Yes  No  If yes, which animal species? | |  |
|  |
| Do you feel you are allergic to any animals that you may encounter in the workplace? | | Yes  No  If yes, which animal species? | |  |
|  |
| If yes, does wearing personal protective equipment alleviate your symptoms? | | | | Yes  No |
| If you feel like you are allergic to lab animals, how soon after exposure to lab animals do these symptoms start? | | | | <10 minutes  10 minutes – 1 hour  1 hour – 8 hours  >8 hours |
| Do you take any medicines for these symptoms?  If yes, list medications | | | | Yes  No |
|  |

If you have symptoms, Please indicate year of onset, whether the symptom is present now, and the times at which you are most troubled by the symptom. **(Mark box with a “X” if applies)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Symptom** | **Year of Onset** | **Present now?** | **Symptoms are present at home** | **Symptoms are present at work** | **Symptoms are present away from home (vacation)** |
| Watery or itchy eyes |  |  |  |  |  |
| Runny or stuffy nose |  |  |  |  |  |
| Sneezing spells |  |  |  |  |  |
| Frequent cough |  |  |  |  |  |
| Difficulty swallowing |  |  |  |  |  |
| Sinus problems |  |  |  |  |  |
| Frequent colds |  |  |  |  |  |
| Hives |  |  |  |  |  |
| Swelling of Lips or eyes |  |  |  |  |  |
| Eczema |  |  |  |  |  |
| Wheezing/chest tightness |  |  |  |  |  |

Do you routinely use or wear any of the following items when working with animals?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Safety equipment | **Never** | **Less than ½ time** | **Most of the time** | **Always** |
| **Wear gloves** |  |  |  |  |
| **Wear a surgical mask** |  |  |  |  |
| **Wear a N95 respirator** |  |  |  |  |
| **Wear a gown** |  |  |  |  |
| **Wear hair bonnets** |  |  |  |  |
| **Wear shoe covers** |  |  |  |  |
| **Wash hands after handling animals** |  |  |  |  |
| **Wear eye protection** |  |  |  |  |

Do you have any health concerns that may affect your health at work that you would like to confidentially discuss with WUMS Occupational Health?  Yes No

I verify that the information I provided is accurate.

Please email this form along with any questions to [www.occupationalhealthservice@wustl.edu](http://www.occupationalhealthservice@wustl.edu)