



Environmental Health & Safety

FLORIDA INTERNATIONAL UNIVERSITY

Jobs Hazard Analysis (JHA)

DATE: Feb 8 2017

TOOLS/EQUIPMENT REQUIRED

Latex Gloves
Lab Coat

MATERIAL REQUIRED

Microtome Slicer A0860 (1950s vintage)
Super Histo Freezer

JOB/ACTIVITY/TASK NAME:

Brain Slicing

DEPARTMENT/GROUP NAME

Neurocircuitry & Cognition

BLDG/AREA LOCATION(s):

AHC-4 Lab 343

PRIORITY RANKING:

SEVERITY: 1=Imminent Danger 2=Serious 3=Minor 4=Not Applicable

PROBABILITY: A=Probable B=Reasonably Probable C=Remote
D= Extremely Remote

Severity (S) * Probability (P) = Priority Ranking (PR)

Example: An employee working at a height of 20 feet without fall protection:
S(1) * P(A) = 1A or Probable Imminent Danger

Step	Sequence Of Steps	Potential Incidents Or Hazards	Priority Ranking	Controls			Revised Priority Ranking with additional controls
				Controls In Place	Controls In Place	Controls In Place	
				Engineering	Administrative	PPE	
1	Mount blade on Microtome	1a Laceration	2A	Cart	Restricted Access Initial Training or OTJ Training	Latex Gloves Lab Coat	3B – use cut resistant gloves and sleeve gauntlet. Fabricate knife edge guard 3D – Discontinue use of old Microtome and use a modern guarded Cryostat
2	Mount brain on freeze plate	1a Laceration	2A	Cart HEPA Ventilated Dump Station	Restricted Access Initial Training or OTJ Training	Latex Gloves Lab Coat	3B – use cut resistant gloves and sleeve gauntlet. Fabricate knife edge guard 3D – Discontinue use of old Microtome and use a modern guarded Cryostat
3	Lower brain plate and slice brain	1a Laceration 1b Repetitive Motion	2A	Cart	Restricted Access Initial Training	Latex Gloves Lab Coat	3B – use cut resistant gloves and sleeve gauntlet. Fabricate knife edge guard

					or OTJ Training		3D – Discontinue use of old Microtome and use a modern guarded Cryostat
4	Remove brain slice and put on culture trays	1a Laceration	2A	Cart Cage Wash Rack	Restricted Access Initial Training or OTJ Training	Latex Gloves Lab Coat	3B – use cut resistant gloves and sleeve gauntlet. Fabricate knife edge guard 3D – Discontinue use of old Microtome and use a modern guarded Cryostat

I understand & will adhere to the steps, hazards & controls as described in this JHA. I understand that performing steps out of sequence may pose hazards that have not been evaluated, nor authorized. I will contact my supervisor prior to continuing work, if the scope of work changes or new hazards are introduced. I understand I have the authority and responsibility to stop work I believe to be unsafe.

<u>Worker Name (please print)</u>	<u>Signature</u>	<u>Date</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

I have reviewed the steps, hazards & controls described in this JHA with all workers listed above and authorize them to perform the work. Workers are qualified (i.e. licensed or certified, as appropriate, & in full compliance with FIU training requirements) to perform this activity.

_____	_____	_____
Supervisor	Signature	Date

REQUIRED ONLY FOR MAINTENANCE ACTIVITIES WHERE OCCUPANTS MAY BE AFFECTED BY THE TASK - I have communicated area hazards with the supervisor or listed worker(s) for this activity and have coordinated the described activity with affected occupants. The above listed workers are released to perform described scope of work in the following area(s): _____

_____	_____	_____
Area or Building Manager	Signature	Date