Comparative Medicine Branch Occupational Risk Assessment Form

CMB Risk Assessment #:	Risk Assessor(s):	Ris	sk Assessment date(s):	Location:	
		Gap Analysis:			
		Trial Run:			
		Review: Annual Survey:			
	<u></u>	Arindai Survey.			
CMB SOPs:	Personnel:	Pathogens of Concern:	Ongoing Research (Customer Labs):	PPE:	
		1			
Medical Surveillance:	1				

	CMB Risk Assessment #:		T	Diel: Area	essor(s):		Comparative Medicine Branch Occupational Risk Assessment Form Risk Assessment date(s):				Job/Task:						
	CMB Risk Assessment #:		1	KISK ASSE	essor(s):		Gap Analysis		Assessment date(s):		Location:					JOD/ I ask:	
							Gap Analysis Trial Run:	-									
							Review: Annual Surve	21/									
			_														
	CMB SOPs:			Perso	nnel:		Pathogens	of Concern:	Ongoing Research (Customer Labs):		PPE:					Training:	
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	Medical Surveillance:		I														
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	Procedure	Identified hazards	rds Current Current Risk: R _e =L*M* Mitigations		//*T*N*C	Gap analysis & recommended mitigations	Performance: Trial run observations	Review & recommendations	Review & recommendations Justified Risk acceptance	Adjust	Adjusted Risk: R _a =L*M*T*N*C Contingency pla			Contingency plans			
			mitigations				C R _c	initigations				L	M T N C R _a		R _a	<u> </u>	
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		Current Risk: R _e =L [™] T [*] N*C or Adjusted Risk: Ra=L [*] M*T [*] N*C										
Risk Matrix	Likelihood of risk occurrence	Mitigation Factors	Task/Job Frequency	Number of people who do the task	Consequence severity							
Scale	L	М	Т	N	С							
5	FREQUENT	UNKNOWN/DON'T EXIST	SEVERAL TIMES DAILY	≥ 101	CATASTROPHIC							
4	LIKELY	DEFICIENCIES	DAILY	61-100	CRITICAL							
3	OCCASIONAL	WEAKNESSES/LACK OF IMPLEMENTATION	WEEKLY-MONTHLY	31-60	SERIOUS							
2	REMOTE	SUFFICIENT/ROOM FOR IMPROVEMENT	MONTHLY-YEARLY	11-30	MINOR							
1	UNLIKELY	GOOD/WELL-IMPLEMENTED	RARELY-REMOTELY	1-10	NEGLIGIBLE							

Comments:		
Date approved:		
Approved by:		
	Assessor	Date
Approved by:		
	Branch Chief	Date

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