 <i>David H. Murdock Research Institute</i>	Document Title Occupational Health Program Acknowledgement and Receipt			Document ID FM-0101	DCO ID 16-002
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Occupational Health Program Acknowledgement and Receipt

While not complete, this document identifies the zoonotic and infectious agents most likely to pose a health threat to animal users, employees and visitors of the David H. Murdock Research Institute (DHMRI) Center for Laboratory Animal Science. These guidelines are to be followed by employees, animal users and visitors. As necessary, situations will be handled on case-by-case basis in keeping with safety considerations and procedures for the humans and animals alike, and in keeping with current regulatory requirements e.g. CDC, OSHA, and AAALAC.

I understand that it is my responsibility to ensure:


- 1.) I receive periodic TB testing or screening (at least annually) and provide results to the Occupational Health Coordinator.
- 2.) That my tetanus immunization is up to date (within last ten years)
- 3.) I report any occupational injuries or illnesses to the Attending Veterinarian promptly and complete required documentation.
- 4.) I have read this document and had an opportunity ask questions. (please direct question to the Occupational Health Coordinator)

Your signature below acknowledges that you have read this document, agree to follow it requires, and have had an opportunity to questions about its content.

 Employee/Visitor Name
 (PRINT)

 Signature

 Date

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REVISION HISTORY		
Superseded Revisions	DCO Number	Effective Date
N/A	16-002	13MAY2016
Current Revision:	1.0	
Section Number	Description of Changes	Justification of Changes
All	New Form	New Form