



Assessment of the Biological/Chemical Hazards of Cells to be processed on the Cell Sorter

Cell Type?

Please answer the following declarations by ticking the boxes **Yes or No**

1 Biological Hazard

Do you have a Bio-COSHH risk assessment covering the handling of the cells?

Yes No

(You must have a valid Bio-COSHH assessment)

Have the cells to be sorted been screened and are negative for:-

- | | | |
|--|------------|-----------|
| 1. HIV | Yes | No |
| 2. Hepatitis B | Yes | No |
| 3. Hepatitis C | Yes | No |
| 4. Other known HG2 or HG3 pathogens | Yes | No |

(This laboratory cannot handle pathogens of HG2 or higher)

Are the cells of high biological risk (e.g. primary tumour cells, uncharacterised or unauthenticated cells)

Yes No

(This laboratory cannot handle high risk cells)

2 Chemical Hazard

Have the cells been fixed? **Yes No**

Which fixative was used?

Please state that the hazardous fixative was removed prior to cell sorting

Yes No

3 GM declaration: *(to complete if handling genetically modified cells)*

Do you have a GMSC-approved GM risk assessment covering the handling of these cells?

Yes **No**

(You must have a valid GM assessment)

GM Class of activity

(This laboratory is only approved to handle GM Class 1 activities)

Do the GM cells express?

Known oncogene(s) **Yes** **No**

Known toxin(s) **Yes** **No**

Known immune-modulatory factors **Yes** **No**

Known factor that can alter susceptibility to treatment/prophylaxis
Yes **No**

(If you have answered yes to any of the above, these cells could be classified as higher risk. This laboratory cannot handle high risk cells)

Have the cells been sufficiently washed and proven to be clear of any free viral vectors

(E.g. lentivirus, adenovirus) **Yes** **No**

Declaration of Hazard. Please provide a signature declaring that the samples provided constitute no health risk to the cell sorter operators and other members of staff using the Flow Cytometry Core Facility.

Signature.....

Name

Centre

Head of Centre