# Checklist 2021, 2022 - Answers from all org units

Number of answers: Selected\_years: 8744, Total number of answers in current selection: 8744

Participants	
2021 Adm/Ek/BioNut, Patricia Degnell, Ekonomichef, Floor: 8	2022 ETR/BioNut, Oihane Garcia Irigoyen - Postdoc / Lab manager, Floor: 6
2021 CRI/BioNut, Christian Riedel, research group leader, Floor: 6	2022 JJO/ARI/BioNut, Jan Johansson, professor; Anna Rising; professor; Nina Kronq, Floor: 8
2021 ETR/BioNut, Oihane Garcia-Irigoyen (Postdoc/Lab manager), Floor: 6	2022 JKE/BioNut, Tiina Skoog Labmanager, Floor: 6, 8
2021 INA/BioNut, INA, Ivan Nalvarte, Per Antonson, Floor: 6	2022 KEK/BioNut, Karl Ekwall (group leader), Floor: 6
2021 JJO/ARI/BioNut, Jan Johansson, Anna Rising, Nina Kronqvist, Olga Shilkova, Floor: 8	2022 LAA/BioNut, Åsa Kolterud, Floor: 6
2021 JKE/BioNut, Tiina Skoog Labmanager, Floor: 6, 8	2022 LJO/BioNut, Alena & LJO, Floor:
2021 LAA/BioNut, Åsa Kolterud /LAA, Floor: 6	2022 MBE/BioNut, Xiufeng Xu, Lab Manager, Floor: 6
2021 LJO/BioNut, Ling Han, Senior Lab Manager, LJO grop, Floor: 6	2022 MGE/BioNut, Marco Gerling (PI), Natalie Geyer (postdoc), Floor: 6
2021 MGE/BioNut, Marco Gerling, Floor: 6	2022 MLÖ/BioNut, Eric Poortvliet / Marie Löf, Floor: 6
2021 PSW/BioNut, Andrea Coschiera, PhD student in Peter Swoboda group, Floor: 8	2022 PSV/BioNut, Birgitta Lindqvist, Floor: 7
2021 SOK/BioNut, None, Floor: 7	2022 PSW/BioNut, Peter Swoboda, Andrea Coschiera, Floor: 6
2021 SST/BioNut, Helene Olofsson, lab manager, Floor: 6	2022 SOK/BioNut, Ev Sam Okret, Pl, Floor: 7
2021 unknown/BioNut, Safety rep, Floor: 6	2022 SST/BioNut, Helene Olofsson, lab manager, Floor: 6
2021 Renal medicine/Clintec, Renal medicine, we are working togethe	2022 FoT/Clintec, Fernando Seoane, Elizabeth Elbvo, Floor: 5, 7, 8
Karolina Kublickiene experimental unit for renal med respons, Floor: 8	2022 Renal medicine/Clintec, Kublickiene and Reheman, Floor: 8
2021 HERM/HERM, Håkan Ottosson, Johan Dethlefsen, Julian Walfridsson, Anne-S, Floor: 7	2022 MBÄ/MedS, Magnus Bäck, PI, Floor: 8
2021 Lipidlab/Lipidlab, Na Wang(lab manager), Floor: 7	2022 Clin Geriatric/NVS, Taher Darreh-Shori (Safety representative and reaserch group, Floor: 7, 8
2021 Clinical Geriatric/NVS, This is för the section of Clinical Ge	2022 Archive and registry/UF, Dan Wistedt arkivarie, Floor: 2
Taher Darreh-Shori (Safety representative and reaserch group, Floor: 7, 8	
2021 Archive and registry/UF, Dan Wistedt Skyddsombud, Floor: 2	
2022 CRI/BioNut, Christian riedel, Manon Chevalier, Floor: 6	

#### Participant Comments

2021 Clinical Geriatric: this is for the whole division and is filled after discussions with the divisions head and other group leaders within the division

#### Floor Comments

2021 CRI: Neo building, 6-1 area 2021 CInical Geriatric: the devision of Clinical Geriatrc has only offices at Floor 7 but both Lab and offices at Floor 8. 2021 JKE: Old rooms: 8322, 8331, 8333, 8305 Present:8520, 6510, 6366, 6382 2021 Lipidlab: Blickagaingen 16 Neo, Floor 7 2021 Renal medicine: Please note that Renal Medicine at NEO shares the lab space with Prof Magnus Bäck group from Institution of Medicine Solna, however report is based on Renal medicine 2021 SST: Lab 6366, cell lab 6557, viruslab 8557

Answers - Section 1

#### Questions

1.a) Have all observations/risks from the last safety inspection (in the protocol/action plan) been handled?

1.b) Are local work environment action plans known to co-workers?
 1.c) Have all new co-workers studied relevant parts of the web-based introduction package?

1.d) Are there introductory trainings in place, for new co-workers about KI rules as well as the department's internal

rules ?

1.e) Do you have regular meetings where local work environment issues are addressed?

1.f) Do you have posters (physical or digital) in your workplace informing on the local employer representative, safety

representatives, members of the local work environment groupand the KI Work Environment Committee? 1.g) Are risk/consequence assessments conducted regarding safety, work equipment, working methods, organization

and work content when planning a major change in the activities? 1.h) Are employees offered eye examinations for work with computers (VDU:s) and if needed, working glasses?

1.i) Are all co-workers aware of the line-managers work environment tasks (according to the local work environment task delegation)?

#### Comments / Notes

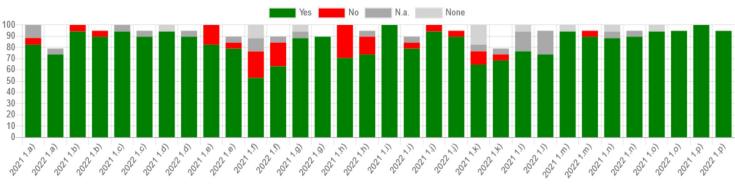
#### Comments/notes 2021

Clinical Geriatric/NVS: Concerning point 1h-1n, all co-workers will be reminded again during our next division meeting.

LAA/BioNut 1f möjligt men jag känner inte till var 1k Vet ej

Renal medicine/Clintec: the general update on all issues would be appreciated at the department level maybe more often, as well as it could be valuable when being at separate research building to have delegation for those issues to local working environmental group just to have possibility to comply first at place where we are located.

#### Answers



1.j) Are all co-workers aware of where to find work environment regulations, including legislation, provisions and possible regulations specific to KI or the department/equivalent?

1.k) Are there established routines for introducing new provisions from the Swedish Work Environment Authority and KI specific regulations to the activities?

1.J) Pregnant and breast-feeding women are entitled to a risk assessment of their work. Are all affected employees aware of these regulations? The regulation has its main application in work with chemicals, anaesthetic gases and micro-organisms, but is applicable to all types of work. (A fact sheet is available on the Staff portal).

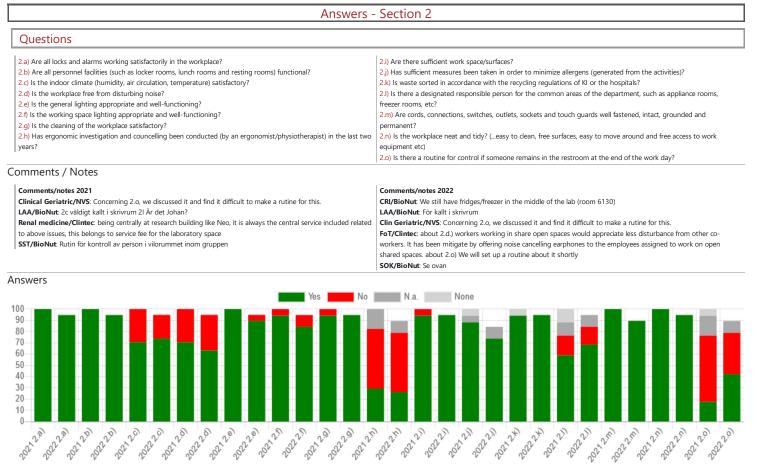
1.m) Have affected employees (and students) been informed on KI:s rules for working alone?

Have affected employees (and students) been informed about KI rules regarding minors working or visiting KI?
 At KI, there are guidelines regarding victimisation. Are your co-workers (and students) aware ofthese guidelines?

1.p) KI has instructions for reporting near-accidents, work-relatedill-health and work accidents in the KI incident reporting systems. Have co-workers (and students) received thisinformation?

Comments/notes 2022

SOK/BioNut: Har fn bara en medarbetare kvar i min grupp på 40% som har varit med mig under flera år och därför har god kännedom om lab och KI rutiner enligt ovan.



## Answers - Section 3 - Organization / Equipment / Education/ Crisis organization

### Questions

3.I) Have you checked rechargeable batteries for age (NiMH maximum 500 charge cycles, Li-Ion 500-1000 charge
cycles) in your activities?
3.m) Have you ensured that there are no series-connected electric splice boxes in your activities?
3.n) Have you ensured that there are no private electrical household equipment (e.g. coffee makers, kettles) in you
activities?
3.0) Have you ensured that nothing is stored closer than 0,5 m from fire detectors and water sprinkler heads (in a
directions from sides and under)?
3.p) Have you ensured that all co-workers have completed a basic fire training within the last four years?
3.q) Do you introduce all new co-workers to the fire safety of the workplace, according to the KI's and/or hospital
routines?
3.r) Do you have a sufficient number of co-workers with up to date training in first aid/CPR, in your activities?
3.s) Do you have access to defibrillators?
3.t) Do you inform all co-workers of KI's plan for crises and disasters?
3.u) Do you have a list with contact information on next of kin (in case of emergencies)?
Comments/notes 2022
Clin Geriatric/NVS: Concerning3.l., the owners do it for their computers, for other devices at lab they are chang
c 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3

Clin Geriatric/NVS: Concerning3.l., the owners do it for their computers, for other devices at lab they are changed regularly. SOK/BioNut: Se ovan

LJO/BioNut: 3.u) Yes, there is a list with contact information on next of kin in LJO group.

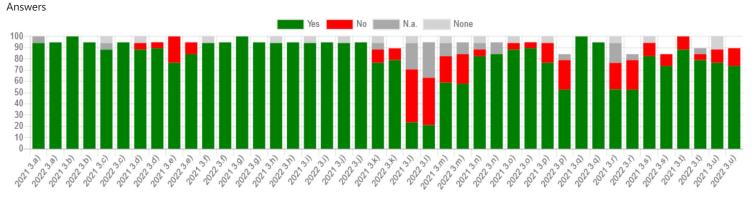
they are changed regularly. LAA/BioNut: 3r vet ej 3u finns hos HR?

LJO/BioNut: 3.u) Yes, there is a list with contact information on next of kin in LJO group.

Renal medicine/Clintec: emergency evacuation training is plan in november, obs it was covid and very little people

at place, obs more information on crises and disasters on the central KI level would be appreciated if presented more

in details, very relevant to Covid situation when we have faced issues towards lack of face masks, gloves etc.



## Answers - Section 4 - Laboratories

## Questions

4.a) Have risk assessments for hazardous work involving machines, working equipment and tools (such as centrifuges) been conducted?Are they available in writing and easily accessible? 4.h) Have the appropriate signs (prohibitions, warnings and dire

4.b) Are the written handling instructions followed for all operations with this type of apparatus that have been

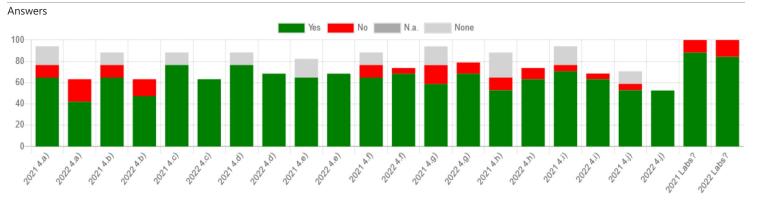
identified as risks according to the risk assessments?

4.c) Have all persons working with this type of apparatus received the required training in terms of both risks and handling?

4.d) Is personal protective equipment (PPE) used as described in the risk assessment/handling instructions?4.e) Is the equipment ergonomically designed?

4.f) Are the instructions/routines for maintenance as well as for inspections/controls followed?

Comments / Notes



Answers - Section 5

### Questions

5.a) Are all new co-workers trained in laboratoryroutines such as handling instructions, safety work, waste management and incident reporting?

5.b) Are the affected co-workers given instructions when new procedures or facilities are introduced?

5.c) Have service personnel such as cleaning personnel, security guards and caretakers been informed of the risks within the laboratory environment they are working in?

5.d) Are the emergency showers regularly inspected and the inspection documented (at least once every six months)?
5.e) Are the emergency eye showers regularly inspected (once per month) and is the inspection documented (at least once every six months)?

5.f) All chemicals must be registered and annually entered in the inventory in the product database KLARA. Is this conducted?

5.g) Are the chemical products safety data sheets available in the lab (in KLARA)?

5.h) In KLARA, are the safety data sheet for your chemical products up to date (latest version)?

5.i) Are all prepared solutions marked with name, owner, content and relevant CLP hazard pictogram?

5.j) Are the ventilated work stations adapted to the type of work? Compare fume hoods, downflow bench, local extraction systems, biological safetycabinet class 1 and 2. Note whether the safety ventilated workplace is connected to an extractor or not.

5.k) Is the ventilated work space free from irrelevant material? (too much material impedes the airflow and impairs the ergonomy).

5.] Is the safety ventilation in the workplace inspected annually? Note that the person with 'house responsibility' or their equivalent are only responsible for ensuring the correct flow, whereas it is the user who is responsible for any

Comments / Notes

eventual filter changes, such as HEPA.

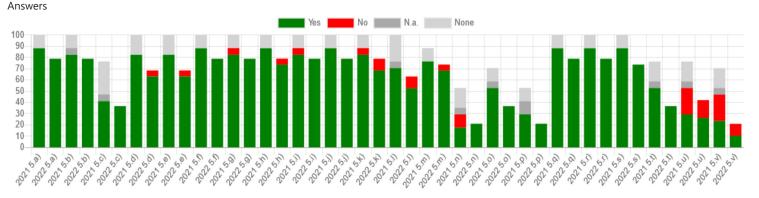
#### Comments/notes 2021

Clinical Geriatric/NVS: 5n & 5p: As far as we know we are not working with allergy-causing substances. 5u & 5v: it is not clear if we have or RA is done. it will be checked.

LAA/BioNut. 5c utgår ifrån att de fått en generell introduktion/genomgång 5l osäker på rutiner kring byte av filter SST/BioNut. 5C) vet ej 5G) Inte tillgång till Klara i labbet 5I) delvis 5N) har inte varit aktuellt hos oss

Comments/notes 2022

Clin Geriatric/NVS: 5n & 5p: As far as we know we are not working with allergy-causing substances. 5u & 5v: We are not sure but last time it was mentioned that there are. Anyway, it will be checked.



5.m) Are there locked poison/medicine cabinets where needed? 5.n) Are medical controls of persons working with substances that require this conducted (e.g. certain allergy-causing

substances, see AFS 2019:3)? For some work, it is compulsory to undergo a medical control with employability assessment (for example for work with lead, cadmium and mercury; see AFS 2019:3).

5.0) Are all co-workers who are going to lead a work or actively work with allergenic substances informed about the risks of handling and the protective measures (see AFS 2011:19).

5.p) Have all persons who are going to lead a work or actively work with certain allergenic substances completed a training (see AFS 2011:19)? The training must be proven by training certificate not older than 5 years.

5.q) Is work with chemicals that may causeharmful exposureconducted in a fume hood? For example formaldehyde and mercaptoethanol.

- 5.r) Are all employees informed about KI:s central routines for handling spills and emissions?
- 5.s) Is material for decontamination of spills and emissions easily available?
- 5.t) Are the written routines used for handling of infectiousor in other ways hazardous aerosols?
- 5.u) Have sources of electromagnetic fields been identified?
- 5.v) Have risk assessments of the identified sources of electromagnetic fields been conducted?

4.h) Have the appropriate signs (prohibitions, warnings and directions) been posted?

4.i) Is the location of the equipment's main switch/emergency shutdown clearly marked and known to all?
4.j) Are the routines for pressurised devices followed? Such as autoclaves, vacuum equipment and gas distribution network (risk assessment, documentation, responsible person, on-going supervision, inspection, labeling).

Labs? ARE THERE LABORATORIES AT THE DEPARTMENT?

## Answers - Section 6 - Risk management

## **Ouestions**

- 6.a) Is there a signed delegation for one or more chemical inventory takers within the research group/equivalent?
- 6.b) Do you know who is the Supervisor for flammable goods at the department/equivalent? 6.c) Do you have designated Controllers for flammable goods in your activities?
- 6.d) Have risk assessments for all hazardous operations with chemicals been conducted? Are they available in writing and easily accessible?

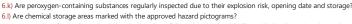
6.e) If, according to the risk assessment, a certain operation has been considered as a risk, written handling instructions shall be drawn up. Are such instructions followed for all hazardous operations with chemicals? 6.f) Have all persons working with these types of chemicals received the required training in terms of both risks and safe handling?

6.g) Is personal protective equipment (PPE) used as described in the risk assessment/handling instructions? 6.h) Are the chemical waste managed in accordance with KI regulations or those of the respective hospitals? 6.i) Requirement: 'Flammable chemicals shall be stored in fire safety cabinets. Only the amount required for the day's work shall be out during the experiment/work day, and must be put back in the fire safety cabinet at the end of the experiment/work day.' Is the amount of flammable chemicals stored openly in the laboratory minimised? 6.)) Are chemicals adequately stored? Chemicals shall be separated according to their characteristics and when

needed, storage shall be well-ventilated, fire safe, locked up, cool, dark, organised/not too packed, bunded, and marked with signs. Comments / Notes

## Comments/notes 2021

SST/BioNut: 6O) har inte varit aktuellt 6P) har inga sådan ämnen 6S) utförs arbetet enligt hanteringsbeskrivningen i riskbedömningen sker ingen exponering. Vid eventuellt tillbud kommer detta anmälas och register upprättas



6.m) Are routines for newly received chemical products followed, regarding labelling with the date when the seal was broken?

6.n) Are chemicals transported in a secure manner from a work environment and environmental perspective and due to transport legislation?

6.0) Requirement: Permits are required for certain chemicals (A- and B-substances (see appendix 1 in AFS 2011:19), mercury compounds, goods dangerous to health (addictive substances) and drug precursors (reference lists can be found in KLARA)). Do you apply for a permit when required?

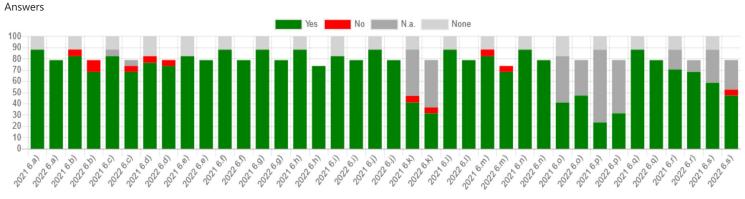
6.p) Requirement: For the use of controlled ozone depleting substances (eg carbon tetrachloride and 1,1,1trichloroethane), an approved registration in the LabODS is required. Are these registered when required? 6.q) Are all employees informed about KI's central routines for handling spills and emissions of hazardous chemicals?

6.r) CMR substances may only be handled if there is a documented investigation that shows that it is not technically possible to replace the product with a less dangerous product. Is this conducted?

6.s) Personnel that have been exposed to CMR chemicals shall be documented in a specific register. See guidance on the staff portal under Chemical safety. Is this conducted?

## Comments/notes 2022

SST/BioNut: 6s) ingen exponering vid korrekt hantering. Om exponering ändå skulle ske upprättas register



## Answers - Section 7 - LIN

LIN? Is liquid nitrogen used?

## **Ouestions**

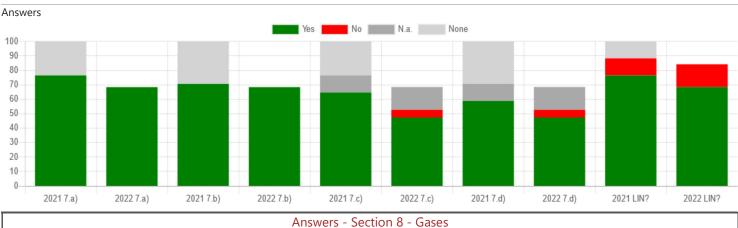
## 7.a) Are theKI rules for handling of liquid nitrogen followed?

7.b) Are the storage areas (also storage of aliquots) marked with the authorised signs?

7.c) Are there low oxygen level alarms where large amounts of liquid nitrogen are handled? Make an estimation of the

size of room together with max volume of liquid nitrogen stored within the room.

## Comments / Notes



## Questions

8.a) Have risk assessments for all hazardous operations with gas been conducted? Are they available in writing and easily accessible?

8.b) If, according to the risk assessment, a certain operation was proven to be a risk, written handling instructions shall be drawn up. Are such instructions followed for all hazardous operations with gas?

- 8.c) Have all persons working with gas received the required training in terms of risks and handling?
- 8.d) Is personal protective equipment (PPE) used as described in the risk assessment/handling instructions?
- 8.e) Are flammable gases and aerosols stored in a fireproof manner (i.e. specific fire rated and ventilated storage

cabinet or fire rated and appropriatly ventilated gas storage room)?

8.f) Are areas where gas cannisters are stored well marked with the authorised symbols? 8.g) Are gas cannisters fixed to protect from falling over?

8.i) Is the use of hose connections with flammable gas minimized to only where the connected equipment/instrument requires it for mobility reasons?

8.h) Are gas pipes marked with the name of the gas, the direction and the CLP hazard pictogram?

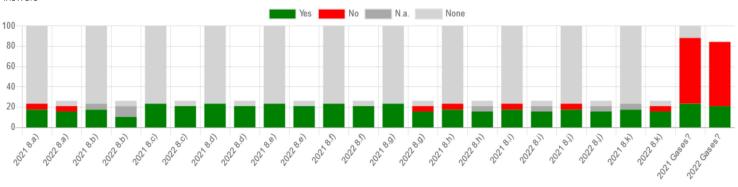
8.j) When hose with flammable gas is used, is it leak tested annually?

7.d) Is the routine for service of the low oxygen alarm system followed?

- 8.k) Are gas cannisters inventoried in the chemical register KLARA?
- Gases? ARE GASES HANDLED?

Comments / Notes

Answers



## Answers - Section 9 - Unknown substances

### Questions

9.a) Have risk assessments for all operations with products of unknown properties been conducted? Are they available in writing and easily accessible? Handling shallbe in accordance with the precautionary principle and all risks shall beinvestigated.

9.b) If, according to the risk assessment, a certain operation has proven to be a risk, written handling instructions shall be drawn up. Are such instructions followed for all hazardous operations using this type of product with

9.e) Is waste managed in accordance with KI regulations and those of the respective hospitals? 9.f) Are products with unknown properties stored securely in accordance with the risk assessment? Unknown? ARE PRODUCTS OF UNKNOWN PROPERTIES HANDLED (for example not-vet authorized medicines, synthesized substances or product libraries)

unknown properties? 9.c) Have all persons working with this type of product with unknown properties received the required training in

## terms of risk and handling?

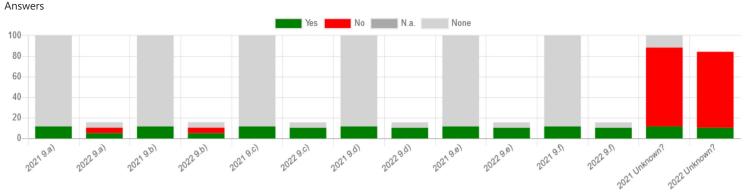
9.d) Is personal protective equipment (PPE)used as described in the risk assessment/handling instructions?

#### Comments / Notes

#### Comments/notes 2021

No comments submitted ARE PRODUCTS OF UNKNOWN PROPERTIES HANDLED? - Comments/notes 2021 Clinical Geriatric/NVS: Product libraries

CRI/BioNut: Only really low amounts/concentrations handled (compounds libraries) ARE PRODUCTS OF UNKNOWN PROPERTIES HANDLED? - Comments/notes 2022 Clin Geriatric/NVS: Product libraries



Comments/notes 2022

### Answers - Section 10 - Radionuclides

#### Questions

10.a) Has head of department (prefekt) arranged a signed delegation for radiation protection representative (strålskyddsombud) for your department (institution)?

10.b) Has head of department arranged a signed delegation for radiation protection assistant(strålskyddsbiträde) for each research group/core facility?

10.c) Has your radiation protection representative (strålskyddsombud) been informed regarding the signed delegations for radiation protection assistant?

10.d) Has all staff (involved in work with radiation) valid radiation protection course certificates not older than five

years? 10.e) Has either KI's radiation protection expert or the hospital's radiation protection expert inspected your facilities

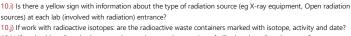
(strålskyddsrond)within the last 12 months? 10.f) Does staff report radiation related incidents (spillage, contamination, unintentional exposure, etc) in the KI incident reporting system?

10.g) Is it documented that all staff (involved with radiation) has knowledgeof the KI guidelines regarding radiation

related incidents?

10.h) Have all research groups/core facilities (involved with radiation) a documentedradiation risk assessment?

## Comments / Notes

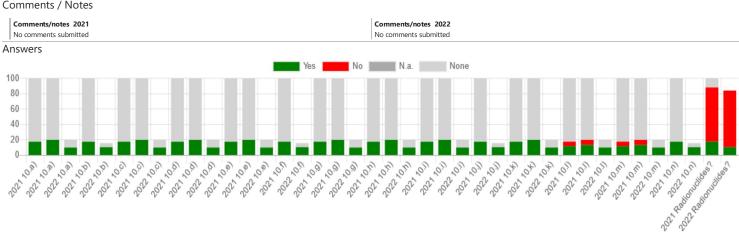


10.k) If work with radioactive isotopes: does each research group/core facility log theradioactive waste? 10.I) If there is a sink for liquid radioactive waste: is the yellow sign 'Liquid radioactive waste' displayingcorrect

information with respect to amount of activity disposed per month and research group/core facility? 10.m) If there is a sink for liquid radioactive waste: does each research group/core facility document each amount of

activity per disposal?

10.n) If storage of radioactive isotopes: is there a yellow sign 'Storage radioactive isotopes' displaying correct information with respect to isotope, amount of activity and research group on each storage location? Radionuclides? DOES ANY WORK INVOLVE RADIATION?



## Answers - Section 11 - Human sample material

## **Ouestions**

11.a) Are written risk assessments available for all hazardous operations with blood or other humansample materials? 11.b) Local written handling instructions must always be in place for handling of blood and other humansample materials that are not free from contamination. Are such written instructions easily available?

11.c) Have all persons working with blood and other humansample materials received the required training in terms of risks and handling?

11.d) Is personal protective equipment (PPE) used as described in the risk assessment/handling instructions?

11.e) Is there access to skin disinfectants and hand washing facilities in direct addition to the workplace?

11.1) Has vaccination for Hepatitis B been offered to all persons who come into contact with blood and other human test materials? (it is provided from the Occupational health care service and payed for by an overall KI budget). 11.g) Is waste management for blood and humansample materials in accordance with KI regulations? Human? ARE HUMAN SAMPLE MATERIALS HANDLED?

12.h) Is the workplace marked with the authorised symbols? For risk group 2 or higher.

12.j) Are microorganisms transported in a secure manner from a work environment and environmental perspective

12.k) Is there an available list of microorganisms? This must be distributed to the departmental contact person for

12.I) Have everybody, who are staying in premises where microorganisms in risk class 2 or higher are handled,

MO? ARE CELL CULTURES OR MICROORGANISMS THAT ARE NOT GENETICALLY MODIFIED HANDLED?

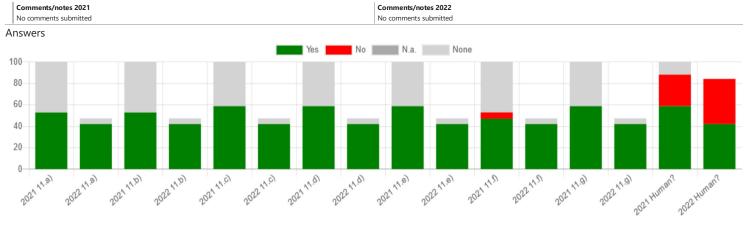
12.i) Are microorganisms safely stored? For risk group 2 or higher

and due to transport legislation? For risk group 2 or higher

biosafety for risk group 2 or higher.

received information about the risks?

## Comments / Notes



## Answers - Section 12 - Microorganisms

### Questions

12.a) Are written risk assessments available for all hazardous operations with cell cultures/microorganisms? Microorganisms in riskgroup 2 or higher always present a risk, however even cell cultures/other microorganisms can pose risks of infection.

12.b) If, according to the risk assessment, a certainhandlling has proven to be a risk, written handling instructions shall be performed. Are such instructions easily available for all hazardoushandling with cell cultures/microorganisms? 12.c) Have all persons working with cell cultures/ micro-organisms received the required training in terms of risks and handling?

12.d) Is personal protective equipment (PPE) used as described in the risk assessment/handling instructions?

12.e) Is there direct access to hand washing facilities in the workplace?

12.f) Is waste management for cell cultures/microorganisms in accordance with KI regulations and those of the respective hospitals?

12.g) Has the handling of infectious microorgansims been notified/ is there a permit for work with infectious microorganisms?

## Comments / Notes

Comments/notes 2021 Comments/notes 2022 No comments submitted SST/BioNut: Avser tex cancer cellinjer som ej är genetiskt modifierade KEK/BioNut: Yeast strains are listed in filemaker database. They are non-toxic and not harmful Answers N.a. None 100 90 80 70 60 50 40 30 20 10 202122.61 2022 2.81 122. 22. 22. 20212:11 122 C2 2022,12,10) 2022 2.01 2022 2.0 2022,2.9 2021212 2021211 2021,231 2022 2.24 202122.10 2021,2,0) 2022 2.11 2022 221 2021221 2022 2.11 2021 22.9 2022 22. 20. Son white 22 2.00.2 2022 MOS 2022 202 202

Answers - Section 13 - GMM L/R

## **Ouestions**

13.a) All work with GMM needs to be notified to or granted permission from the Swedish Work Environement 13.j) Are there written handling instructions for work with GMM? 13.k) Are GMM transported in a secure manner from a work environment and environmental perspective and due to Authority regardless of the risk. Have the handling of GMM been notified or has permission been granted 13.b) Is all work with GMM risk assessed on the forms from the Swedish Work Environment Authority? Applicable to transport legislation? all work with GMM, regardless of whether it is believed to pose a risk or not. 13.I) Is the workplace marked with the authorised symbols? 13.c) Are there risk assessments for GMM storedeasily accessible in connection with the workplace? 13.m) Are GMM safely stored? 13.d) Have all persons working with GMM received the required training in terms of risk and handling? 13.n) All persons who have been in areas where GMM levelL and up are present should be informed of the risks. 13.e) Is personnel protective equipment (PPE) used as described in the application forms? Have all the concernedpersons received this information? 13.f) Is there access to skin disinfectants and separate hand washing facilities in direct addition to the workplace? GMM L/R? Work with GMM is divided into three risk levels, F. L and R. F (negligible risk) corresponds to work in a Biosafety Level 1 (BSL1), L (low risk) corresponds to work in a BSL2 laboratory and R (high risk) corresponds to work 13.g) Are regulations followed for waste management of GMM as defined in the GMM application? 13.h) Work with GMM in level L requires notification to the Swedwish Work Environment Authority. Has each type of in BSL3 or 4 laboratory. The following section is only applicable for work with GMM in level L or R. Are you working experiment been notified? with GMM in level L or R? GMM? ARE CELL CULTURES OR MICROORGANISMS THAT ARE GENETICALLY MODIFIED HANDLED? 13.i) Work with GMM in level R requires permit from the Swedish Work Environment Authority. Has each type of experiment a permit?

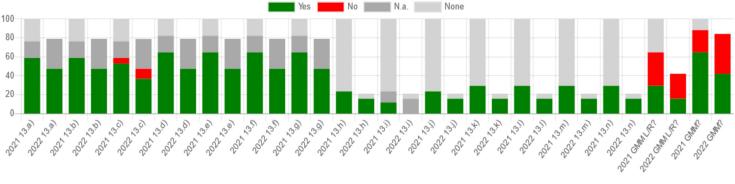
## Comments / Notes

Comments/notes 2021 No comments submitted

#### Comments/notes 2022

SOK/BioNut: All cellodlingsverksamhet är avslutad.





## Answers - Section 14 - Cytostatics

## Questions

14.a) Have risk assessments for all operations with cytostatic agents and other toxic agents been conducted? Are they 14.g) Is waste management in accordance with KI regulations and those of the respective hospitals? available in writing and easily accessible? 14.h) Are the cytostatic agents or equivalent safely stored?

14.b) Are the written handling instructions followed in the workplace? It is especially important that these also are available in English when needed.

14.i) Are cytostatic agents or equivalent only prepared in rooms that are specially designed and furnished for the

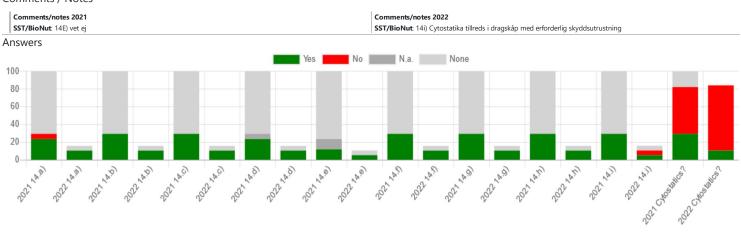
purpose? 14.c) Have all persons working with cytostatics and other medicines with toxic effects received the required training in Cytostatics? ARE CYTOSTATICS OR OTHER PHARMACEUTICALS WITH ENDURING TOXIC EFFECT HANDLED? terms of risks and handling?

14.d) Has information been provided on risks for pregnant women upon handling or exposure?

14.e) Have service personnel as well as cleaning personnel, security guards and caretakers received oral and written

instructions as to how risks can be avoided? Also applicable to craftsmen who will work temporarily in the premises.

#### 14.f) Is personal protective equipment (PPE) used as described in the risk assessment/handling instructions? Comments / Notes



## Answers - Section 15 - Animals

## Questions

15.a) Are all persons who are about to begin work withlaboratory animals offered amedical controlat the

Occupational healthcare service? The assessment is foremost for allergy towards rodents.

15.b) Is work withlaboratory animals planned so that the risk is minimized for personnel being exposed to contact with allergens? 15.c) Are written risk assessments available for this type of activity? Note that the risk assessment shall include how

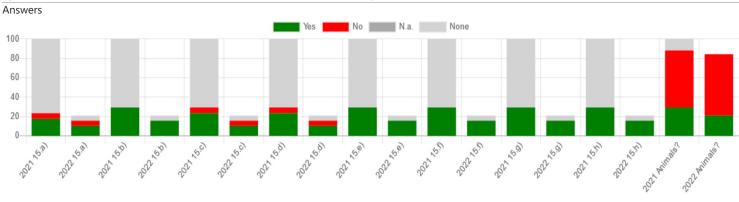
the animal influences the risk, such as any eventual use of chemicals, cytostatics, infectious substances as this may in turn pose a risk to actions such as emptying animal cages

15.d) Are there written handling instructions, easily accessible, for every stage of the experiment, that according to the

#### Comments / Notes

Comments/notes 2021

No comments submitted



Comments/notes 2022

15.f) Is personal protective equipment used as described in the risk assessment/handling instructions? 15.g) Is waste management in the animal house in accordance with KI regulations and those of the respective

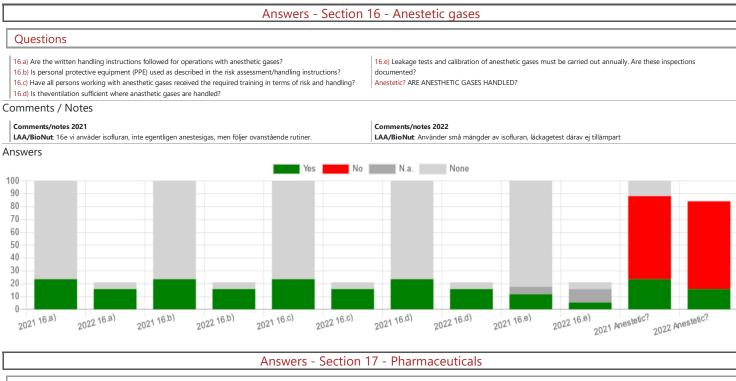
SOK/BioNut: All sådan verksamhet för min del hanteras av PKL3 och kommer att avslutas under året.

hospitals? 15.h) Are there procedures that ensure that veterinarians are aware of risks, such as treatment with toxic or other harmful substances that may remain in the animal, when handling the animal?

Animals? ARE LABORATORY ANIMALS HANDLED?

risk assessment, are considered to pose a risk?

15.e) Have all persons that work with laboratory animals received the required training in terms of risks and handling?



### Questions

17.a) Is there a signed delegation of manager for pharmaceuticals that require prescription induding narcotics?
17.b) Is there an implemented routine for notes of usage of narcotic drugs? The notes shall not be possible to alter without a control afterwards and shall include information of each single event that results in changes of the possession. The notes shall also include information of usage of narcotic drugs? The activities. For detailed information about these notes, see LVFS 2011:9, 16-21 16-21 95. The notes shall be kept at least 5 years.
17.c) Is it documented which persons who are allowed to handle narcotic drugs and which person who use which

17.d) Are narcotic drugs kept so as to remove the risk of unlawful handling? Prescrip. drugs? Are pharmaceuticals that require a prescription, including narcotics, handled?

