

## Safety Documentation

Please select the forms you require by selecting the check boxes below.  
You can select more than one.

**Method Statement**                       **Risk Assessment**                       **Chemicals COSHH**

Once you have made your selections, scroll down and complete the forms.

**Buttons:** [+ ] will add a row to a list    [- ] will delete a row from a list

You may save this file to a local drive at any time.

When you have finished, save the file to a local drive and email it to your supervisor for authorisation.

**Supervisors** - There is a sign-off section at the end of the document set that must be completed.

**Staff may "self authorise", (as a supervisor), but the forms must still be submitted to the DSO for approval.**

### **IMPORTANT:**

YOU ***MUST NOT*** START ANY PRACTICAL WORK UNTIL THESE FORMS HAVE BEEN RETURNED TO YOU  
WITH **BOTH** YOUR SUPERVISOR'S AND DSO'S APPROVAL SIGNATURES ATTACHED.

### Please complete these fields

School or Service	Wolfson School of Mechanical, Electrical and Manufacturing Engineering
Department	
Originator name	Dimitris Tampakis
email address	d.d.tampakis@lboro.ac.uk
Location	CBE Labs (H23/H24/H25/H34)
Project / Activity / Task	Study of cell proliferation with EdU via flow cytometry
Supervisor Name	



## Supervisor and Departmental Safety Office (DSO) Sign-off.

### Supervisors

Please check the documents above and if you want to approve them:

- 1) Electronically sign this document
- 2) Save it to a local drive (You will be prompted to do this)
- 3) eMail the signed document to the DSO.

### DSO

Please review the documents above and if you want to approve them:

- 1) Enter the reference numbers as appropriate
- 2) Electronically sign this document
- 3) Save it to a local drive (You will be prompted to do this)
- 3) eMail the signed document to the originator

### IF YOU DO NOT WANT TO AUTHORISE THE FORMS,

Please do not sign the form, but click the "Not Approved" check-box and return it to the originator by email stating why and what you expect them to do to put it right in the comments box below.

Not Approved

Supervisors Signature

### Form Reference Numbers

Risk Assessment

Method Statement

COSHH Assessment

SAF/MEME/1985

DSO Signature

### **This document set must be reviewed and re-approved at the following times:**

- 1) After the first occurrence of the activity described above (Review only)
- 2) After any change to the procedure or reagents used
- 3) After any incident resulting from this activity
- 4) At least annually from the date of approval

Next Review:

1 Aug 2024

Review comments