

WUMS EXPOSURE FORM

Please fill in the shaded areas in-full. Follow instructions for completing form in its entirety. If you have any questions please feel free to contact Employee Health at 362-3528. After completing this form please print, sign the bottom and fax completed form to Employee Health 314-362-0058.

Employee Name Last:

First:

Employee SS#:

Employee number:

Date of birth:

Sex (**click arrow to select only one**): Female

Status (**click arrow to select only one**): Staff

Occupation (**click arrow to select only one**): **Animal Caretaker**

Department Name:

Date exposure occurred:

Time exposure occurred:

Date exposure was reported to Employee Health:

Time exposure was reported to Employee Health:

(If you have not reported this exposure, do so immediately at #362-3528)

ANIMAL

Location of where exposure occurred: Building _____ ,

Name of work area or name of laboratory _____ .

Injury type (**click arrow to select only one**): Animal bite

Exposed body part (**may select more than one**):

- | | | | |
|---|--|------------------------------------|-------------------------------------|
| <input type="checkbox"/> Left finger/hand | <input type="checkbox"/> Right finger/hand | <input type="checkbox"/> Left eye | <input type="checkbox"/> Right eye |
| <input type="checkbox"/> Mouth | <input type="checkbox"/> Face | <input type="checkbox"/> Left foot | <input type="checkbox"/> Right Foot |
| <input type="checkbox"/> Left leg | <input type="checkbox"/> Right leg | <input type="checkbox"/> Head/Neck | <input type="checkbox"/> Left Arm |
| <input type="checkbox"/> Right Arm | <input type="checkbox"/> Aerosol | | |

Animal substance involved (**click arrow to select only one**): Aerosol Transmission

Equipment or material being used (**click arrow to select only one**): **Animal Bite**

Manufacture type (**click arrow to select only one**): 3M

Activity being performed when exposure occurred (**click arrow to select only one**):
Cleaning cage

Condition leading to exposure: Agitated animal

Name of animal

Species of animal (**click arrow to select only one**): Mice

Signature/verification