Checklist

**ADAPTATION OF LABORATORY WORK FOR PREGNANT EMPLOYEES**

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| **Unit:**Click or tap here to enter text | **Date:**Click or tap to enter a date. |
| **Immediate superior:**Click or tap here to enter text |
| **Employee:**Click or tap here to enter text |

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| **WORK TASKS AND RISK** |
| Can the work tasks entail a risk to the pregnant employee and the foetus? If **YES** – fill in the **MEASURE** field and who is **RESPONSIBILE** for implementing the measures(s). |
| **PHYSICAL AND ERGONOMIC FACTORS** | **YES** | **NO** | **MEASURE** | **RESPONSIBLE** |
| Thrusts, vibrations? |[ ] [ ]  Click or tap here to enter text | Click or tap here to enter text |
| Physically heavy work / physical strain?  |[ ] [ ]  Click or tap here to enter text | Click or tap here to enter text |
| Noise? |[ ] [ ]  Click or tap here to enter text | Click or tap here to enter text |
| Radiation / radioactive substances? |[ ] [ ]  Click or tap here to enter text | Click or tap here to enter text |
| Other relevant conditions? |[ ] [ ]  Click or tap here to enter text | Click or tap here to enter text |
| **CHEMICAL FACTORS** | **YES** | **NO** | **MEASURE** | **RESPONSIBLE** |
| Use of harmful/toxic chemicals? |[ ] [ ]  Click or tap here to enter text | Click or tap here to enter text |
| Chemical substances labelled with H phrases? |[ ] [ ]  Click or tap here to enter text. | Click or tap here to enter text |
| Substitution of harmful/toxic chemicals? |[ ] [ ]  Klikk eller trykk her for å skrive inn tekst. | Klikk eller trykk her for å skrive inn tekst. |
| Lead and lead derivatives? |[ ] [ ]  Click or tap here to enter text | Click or tap here to enter text |
| Has a risk assessment of the chemicals been conducted in EcoOnline? |[ ] [ ]  Click or tap here to enter text | Click or tap here to enter text |

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| **BIOLOGICAL FACTORS** | **YES** | **NO** | **MEASURE** | **RESPONSIBLE** |
| Exposure to infectious biological agents (bacteria, viruses, other infectious agents) that can damage the unborn child by infection? |[ ] [ ]  Click or tap here to enter text | Click or tap here to enter text |
| **PROTECTIVE MEASURES AND PERSONAL PROTECTIVE EQUIPMENT** | **YES** | **NO** | **MEASURE** | **RESPONSIBLE** |
| Are protective measures / personal protective equipment (PPE) used in accordance with the safety data sheet recommendations?  |[ ] [ ]  Click or tap here to enter text | Click or tap here to enter text |
| What protective measures/PPE are used (specify):Click or tap here to enter text |

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| **OTHER MATTERS** |
| Klikk eller trykk her for å skrive inn tekst. |
| **MEASURES TO BE IMPLEMENTED** | **YES** | **NO** | **MEASURE** | **RESPONSIBLE** |
| Switching work tasks? |[ ] [ ]  Click or tap here to enter text | Click or tap here to enter text |
| Can others perform parts of the task? |[ ] [ ]  Click or tap here to enter text | Click or tap here to enter text |
| Postpone the laboratory task? |[ ] [ ]  Click or tap here to enter text | Click or tap here to enter text |
| Redeployment to other work? |[ ] [ ]  Click or tap here to enter text | Click or tap here to enter text |

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| **ASSISTANCE FROM THE SAFETY AND OCCUPATIONAL HEALTH SERVICE UNIT DESIRED? DESCRIBE IN DETAIL.**  |
| Click or tap here to enter text |
| Number of attachments: ?  |
| **SEND THE FORM TO:** |
| Occupational Health Service Unit University of Oslo,P.O. Box 1043 Blindern 0316 Oslo | **E-mail:** ebht-post@admin.uio.no |