

LAWSON COMPLIANCE WAIVER

Registration for Western paid employees, graduate students, undergraduate students or work study students conducting clinical research at Lawson

All individuals involved in research at Lawson who are not hospital-paid employees must be registered with Lawson (LHSC). We have established a registration process to ensure that Lawson is aware that these individuals are on site and that they have completed all of the required training. Our goal is to provide everyone with the knowledge to make them aware of how to work safely in research.

Personnel Information

Return the complete document to lawsonhealthandsafety@lawsonresearch.com

Name:			
Cell:			
Email:			
Position:			
Emergency Contact Name:			
Emergency Contact Number:			
Supervisor Name:			
Badge ID# (if applicable):			
I have completed the training modules under the Hospital Mandated Training section which			
STATEMENTS TO BE TRUE:	tion which		
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	Emergency Codes
_	Fall Prevention
	-
	Hand Hygiene Influenza
	Musculoskeletal Disorder Prevention Program
	Patient Experience – Empathy Video
	Routine Practices
	Safe Handling of Hazardous Drugs
	Sharps Awareness
	Workplace Hazardous Materials Information System (WHMIS) [can be completed through Western]
	Workplace Violence Prevention
	e completed the training modules under the <mark>Clinical Research</mark> section which includes (please poxes):
	Behaviour Safety Alert
	Panic Alarms
	Standard Operating Procedures for Clinical Research (SOPs)
	TCPS2 (Tri-Council Policy Statement 2) - Please create your own account and login, and your affiliation
	should be with Lawson Health Research Institute
l banı	a your condensation and serves to the following under the Decrease section (places tiels
boxes	e read, understood, and agree to the following under the <mark>Documents</mark> section (please tick
	7. The Harrassment & Discrimination Policy
	Young workers Safety Tips (if 25 years of age or under)
	Radiation Awareness
	Patient Experience – Definitions & Concepts
	Patient Safety/CPSI Competencies
If roa	uired by Western/my supervisor, I have completed all necessary training listed below through
-	ern (please tick boxes):
	Supervisor or Worker Health and Safety Awareness (OWL – one time only - Western Students/Staff)
_	WHMIS *New* (OWL- renewable every 3 years)
	Safe Campus Community-Preventing Harassment, Violence, and Domestic Violence at Western (OWL –

 $[*]Please\ email\ your\ Western\ certificates: \underline{\textbf{lawsonhealthandsafety@lawsonresearch.com}}$

If required by my supervisor, I have completed the additional training below:

- 1. Radiation Safety Nuclear (renewable every 3 yrs 6hrs, in class through Western)
- 2. X-ray Safety (2hrs, Online)
- 3. Laser Safety Mandatory for all class 3b or class 4 laser users (2hrs, online renewable every 3yrs)
- Laser Safety Awareness (Online for anyone using confocal microscopes or any other equipment with

Date	
Perso	onnel Signature
	required of the as oddined in this training package
	I have read, understood all required documents and completed all training that is required of me as outlined in this training package
SIGN	-OFF (PLEASE TICK BOX):
	Western Certificates (if any)
I have	sent the following item to lawsonhealthandsafety@lawsonresearch.com:
	Compressed Gas
	Any additional training specific to the laboratory as required by the immediate supervisor
5	lasers inside the equipment unit) Transportation of Dangerous Goods (renewable every 2yrs)
4.	<u>Laser Safety Awareness</u> (Unline for anyone using confocal microscopes or any other equipment with