

# NEW EMPLOYEE PRELIMINARY HEALTH RISK ASSESSMENT

**Employee Name:** \_\_\_\_\_ **Job Title:** \_\_\_\_\_ **Status(HR Use Only):** \_\_\_\_\_

**Job #/Fcvg:** \_\_\_\_\_ **Supervisor:** \_\_\_\_\_ **Supervisor Phone:** \_\_\_\_\_

**Department/Address:** \_\_\_\_\_

**Employee Phone:** \_\_\_\_\_ **Go r m{ gg'Rgt uqpcnG/O clx**

**Please complete and submit this form for all new hires (faculty, staff, students, temporaries and research grant funded) to the School of Medicine Human Resources Office.**

**Form must be received prior to the effective date of hire.**

Please answer the questions below for our employee health records. Will this employee be exposed to any of the following occupational health risks? (Mark all that apply.)

Supervisor's  
Assessment:

Agree  
(Official Use Only)

Yes No

Yes No

1. Direct patient care or routine face to face contact with patients.
2. Routine work within 100 feet of a patient care area, or in a hospital setting.
3. Exposure or potential exposure to human blood, other body fluids, or unpreserved (unfixed) human tissues.
4. Work with infectious agents in a laboratory.
5. Work with laboratory animals.
6. Will there be occasions when this employee is expected to wear a respirator (mask) to prevent the acquisition of tuberculosis or another respiratory infection?
7. Work with radioactivity, dangerous chemicals or similar hazards in a laboratory setting.
8. Work around loud noise and/or respiratory irritants.

If any of questions one through six are marked yes, the supervisor should schedule the employee for a New Employee Health Assessment with Kayla Spires, USC SoM Employee Student Health Nurse.  
kayla.spires@uscmed.sc.edu -803-434-2479- Family Practice Center at 3209 Colonial Drive.

If questions seven or eight are marked yes, the employee will be contacted by the SoM Health and Safety Office for training related to Occupational Health, Tony Johnson - tony.johnson@uscmed.sc.edu - 803-216-3319.

\_\_\_\_\_  
Supervisor Date

\_\_\_\_\_  
Employee Health Date

\_\_\_\_\_  
Health & Safety Date