



University of Florida
 College of Medicine
 Health Science Center
 PO Box 100235
 Gainesville, FL 32610-0235
 Telephone: 352-392-3588
 1-800-628-2594

**ANATOMICAL BOARD OF THE
 STATE OF FLORIDA**

**Inspection of Facilities Housing, and Inventory of, Anatomical Specimens Provided by
 the Anatomical Board of the State of Florida**

Miami Office:
 University of Miami
 Miller School of Medicine
 Office of Medical Education
 P.O. Box 016960 (R-160)
 Miami, FL 33101
 Telephone: 305-243-6691

Orlando Office:
 University of Central Florida
 College of Medicine
 Health Sciences Campus-Lake Nona
 6850 Lake Nona Blvd.
 Orlando, FL 32827-7408
 Telephone: 407-266-1142

NAME OF FACILITY: _____

DATE OF INSPECTION: _____

NAME OF INSPECTOR: _____

AFFILIATION OF INSPECTOR: _____

(i) INSPECTION OF FACILITIES

- a) PLEASE PROVIDE A BRIEF DESCRIPTION OF THIS FACILITY (include type of building, number of doors, windows, work stations, flooring, AV equipment. If there are windows, are they adequately covered?)

- b) AIR FLOW

It is required that laboratories in which specimens fixed with formaldehyde are used be inspected annually by Environmental Health and Safety personnel (or equivalent authority) to ensure adequate air flow and levels of formaldehyde not exceeding 0.75 parts per million for an eight hour period, in compliance with OSHA regulation 1910.1048c.

Report Attached

(ii) SECURITY

- a) Which courses utilize these facilities?

- b) What type of security is in place at this facility? (key card, code, video surveillance?)



- c) Who monitors security measures in place? Is the list of those who have access to these facilities updated (within 30 days of the end of each course) and are security access procedures similarly updated?
- _____
- _____
- d) What records pertaining to security are kept? (e.g. are video surveillance tapes kept? If so, for how long?)
- _____
- _____
- e) Where are specimens not in use stored? (different rooms, buildings, under refrigeration?)
- _____
- _____
- f) How are specimens no longer in use disposed of? (returned to Anatomical Board, cremated)
- _____
- _____

(iii) SAFETY

- a) Is there a copy of the rules and regulations which must be followed when working in the laboratory clearly visible and available for consultation by all individuals handling human specimens?

YES

NO

- b) It is recommended that the following safety materials be available for those handling anatomical specimens provided by the Anatomical Board at this facility:

Gloves

Lab Coats

Eye protection

Face masks

Eye wash

First Aid Kit

Emergency plan for stick injury

Security / Emergency telephone numbers clearly posted

(iv) RESPECT

- a) PLEDGE OF RESPECT FORMS

Pledge of Respect forms are / are not completed and filed for **ALL** personnel with access to rooms where specimens are housed at this facility.



(Pledge of Respect forms were updated in 2012 and are available on the Anatomical Board website at <http://www.med.ufl.edu/anatbd/forms>. Additional forms may be completed to comply with regulations at individual facilities.)

- b) Are the No Visitors Policy, no photography of any kind without permission from the Anatomical Board and no posting of any information pertaining to courses at this facility utilizing specimens provided by the Anatomical board on any social media verbally stated at the beginning of each course offered at this facility?

YES NO

(v) VERIFICATION OF SPECIMEN INVENTORY

- a) Individuals responsible for specimens at this facility are:

1. _____
2. _____
3. _____

- b) The inspector should attach a copy of the specimen inventory for this facility, verifying that they have accounted for all specimens and that the specimens are appropriately housed and secured.
- c) Please comment or list any concerns you may have pertaining to the housing or use of anatomical specimens at this facility.

I verify that the information contained within this report is correct and that Anatomical Board policies have been made clear to those responsible for anatomical specimens supplied by the Anatomical Board to this facility.

Signature of Inspector

Date

Telephone number of Inspector