

SUNY ESF COVID-19 Research Safety Plan

(Return completed plan to Patricia Henson at phenson@esf.edu)

Date of Submission

Is this an update to a previously approved plan? _____
(Each active project requires an approved COVID-19 Research Safety Plan)

PI Last Name

PI First Name

PI Email Address

Department Name

Type of Research:

Is this a research project? _____

If yes, is the plan being submitted to cover multiple active projects? _____
(see last page to list the additional active project acct # and project names)

If yes:

Research Project account # (project/task/award) _____

Research Project Name: _____

Location where the Field or Laboratory Research will be conducted (be specific: ex: Huntington Forest, Jahn Lab Rooms 231 & 233):

Duration the staff/students will be conducting the Field or Laboratory Research? (ex: Monday-Friday 8am-4pm, May 11-August 7, 2020):

Start Date: _____

End Date: _____

Additional Details:

_____ For Field Work, will staff/students share a residence?

_____ Is there a need for masks to comply with the Governor's Executive order?

_____ For Laboratory Research: Is the lab(s) identified above in compliance?

Review the **Laboratory Inspection Checklist** at: <https://www.esf.edu/ehs/lsg/i.htm>

Within the 2 columns below, list all those currently involved or anticipated to be involved in the Field or Laboratory Research:

Note: After approved plan is in place, changes in personnel only do not require a submittal of an updated plan.

(Last Name, First Name and Email Address for each)

(Last Name, First Name and Email Address for each)

PI Last Name (cont.)

Page 3 optional, should you need to include additional information.

For all research plans, how will you implement standard social distancing? For field research plans, how will you implement social distancing/safety measures both getting to the site and on site while maintaining safety requirements for whatever activity you or your staff/students are doing (ex: If you are going on a boat and require 2 people, are you able to maintain social distance and safety while operating the boat? How can you assure that multiple individuals mitigate risk of exposure or transfer of COVID-19)?

Page 3 optional, should you need to include additional information.

How will you implement environmental hygiene practices (ex: Frequent handwashing, wiping down shared equipment with disinfectants, etc.)?

PI Last Name (cont.)

Page 3 – Optional should you need to include additional information

Include Additional Information for Field or Laboratory Research Plan, if need be.

If submitting the plan to cover multiple active projects, please list the additional information below:

Research Project account # (project/task/award) _____
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