

### **Laboratory Staff Health Monitoring Record**



Laboratorio de Genómica Viral y Humana BSL-3, Facultad de Medicina UASLP Last updated Apr 10, 2025 v8

Personal information			Mark answer with ■
Name:		Date:	dd/mmm/yyyy
Physician:		Age:	Male Female
Phlebotomist:		Date of birth:	dd/mmm/yyyy
Post: Researcher Administrat	ive Student Technician Ja	nitorial Date started:	dd/mmm/yyyy
Authorizations: Admin BSL-	2 BSL-2+ BSL-3 BSL-3+	Serum sampled:	dd/mmm/yyyy
Has signed: Baseline serum inform	ed consent CAR Key /PIN Issu	uance NDA Bi	obank
Family history	Mark	answer with ■ and circle the	e applicable disorder
Labelings  Carbonia  Mat. grandmother  Mat. grandfather  Pat. grandfather  Father  Mother  Siblings  Offspring	Hypertension, Coronary artery disease, Myoca		
	Atrial fibrillation, Peripheral artery disease, Strodisease, Endocarditis, Pericarditis, Deep vein disease, Angina pectoris, Heart block, Tachyca	thrombosis, Pulmonary embolisi	
Neurological	Stroke, Epilepsy, Migraine, Parkinson's diseas Peripheral neuropathy, Guillain-Barré syndrom brain injury, Spinal cord injury, Huntington's dis Neuralgia, Dementia, other.	ne, Meningitis, Encephalitis, Brai	n tumor, Traumatic
Respiratory	Asthma, Chronic obstructive pulmonary diseas Pulmonary embolism, Lung cancer, Cystic fibro Bronchiectasis, Pleural effusion, Pneumothora	osis, Pulmonary hypertension, S	
Gastrointestinal	Gastroesophageal reflux disease, Peptic ulcer bowel disease, Crohn's disease, Ulcerative col Pancreatitis, Lactose intolerance, Diverticulitis, alcoholic fatty liver disease, other.	litis, Celiac disease, Gallstones,	Hepatitis, Cirrhosis,
Endocrine	Diabetes mellitus, Hypothyroidism, Hyperthyro Polycystic ovary syndrome, Hyperparathyroidis Pheochromocytoma, Graves' disease, Hashim Multiple endocrine neoplasia syndromes, Diab Hypogonadism, Hypergonadism, other.	sm, Hypoparathyroidism, Acromoto's thyroiditis, Congenital adre	egaly, Gigantism, enal hyperplasia,
Musculoskeletal	Osteoarthritis, Rheumatoid arthritis, Osteoporo tunnel syndrome, Low back pain, Sciatica, Her spondylitis, other.		
Autoimmune	Rheumatoid arthritis, Systemic lupus erythema Psoriasis, Sjögren's syndrome, Scleroderma, A Alopecia areata, Polymyositis, Dermatomyositi	Autoimmune hepatitis, Perniciou	
Renal	Chronic kidney disease, Acute kidney injury, G kidney disease, Nephrolithiasis, Hydronephros nephropathy, Interstitial nephritis, Renal tubula Minimal change disease, Berger's disease, oth	is, Renal artery stenosis, Diaberar acidosis, Renal cell carcinoma	tic or Hypertensive
Psychiatric	Major depressive disorder, Generalized anxiety Schizophrenia, Obsessive-compulsive disorder anxiety disorder, Attention-deficit/hyperactivity Insomnia, Schizoaffective disorder, other.	r, Post-traumatic stress disorder	r, Panic or Social



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Non-pathological history	Mark answer with ■
Daily meal courses: # Animal protein Vegetables Fruit	s Grains Dairy Healthy fats
Weekly hours of exercise: # Aerobic (cardio) Strength Fle	exibility High-intensity interval Endurance
Daily hours of sleep: # Do you have a consistent sleep schedule?	Yes No
	Vape Other:
Have you traveled recently or frequently to other regions or countries? No.	
Who do you live with: Parents Romantic partner Friends	Other family Alone
Gyneco-obstetric history	Mark answer with ■
G # P # C # A # Menarche: age Cycle length:	: dd Duration: dd Regular Irregular
Current pregnancy? ☐ No ☐ Yes ☐ Gestational age: wks	
Pre-menstrual syndrome: No Yes Last menstrual period:	l/mmm/yyyy Sexual debut: age
Have you ever been diagnosed with a gynecologic condition? (e.g., Polycystic	ovaries, endometriosis, miomas): No Yes
Contraception: ☐ No ☐ Yes ☐ Oral ☐ Implant ☐ Patches	☐Injections ☐IUD ☐Barrier ☐Surgical
Occupational history and security clearence	Mark answer with ■
Previously worked in: BSL-# Academy Industry Gover	rnent Hospital
Previous workplace:	
Name of employer:	
Employer's contact phone number:	Opted out of reference follow-up
Previous employer referred any of the following:	
Disrespectful behavior Tardiness or absenteeism Emotions	al lability Dishonesty
Lack of discipline Lack of compliance Low hyg	iene or self-care
Are you Are there any legal or regulatory restrictions that would prevent you fr	No Yes er used any other legal names or aliases? legally authorized to work in this country? om working in a national strategic facility? Do you hold any dual citizenships? ever been convicted of a criminal offense?
•	legal proceedings or under investigation?
Have you ever been terminated or	asked to resign from a previous position?
Have you ever been subject to disciplinary action for misconduc	
Do you use any substances (prescribed or otherwise) that may affect Are you under treatment for any condition that may impact your ability to the condition that may affect the condition that may impact your ability to the condition that may be conditionable to the condition that may be conditionable to the condition that may be conditionable to the conditionable that may be conditionable to the conditionabl	
	er experienced severe financial hardship?
Do you have contact with foreign entities, institutions	
Have you held positions of trust (e.g., access to sens	
Are you willing to undergo background checks and/or s	security clearance procedures if required?



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Mark answer with ■

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	Date diagnosed	Tx	
Cardiovascular	dd/mmm/yyyy		Hypertension, Coronary artery disease, Myocardial infarction, Congestive heart failure, Arrhythmia, Atrial fibrillation, Peripheral artery disease, Stroke, Aortic aneurysm, Cardiomyopathy, Valvular heart disease, Endocarditis, Pericarditis, Deep vein thrombosis, Pulmonary embolism, Congenital heart disease, Angina pectoris, Heart block, Tachycardia, Bradycardia, other.
Neurological 🔲	dd/mmm/yyyy		Stroke, Epilepsy, Migraine, Parkinson's disease, Alzheimer's disease, Amyotrophic lateral sclerosis, Peripheral neuropathy, Guillain-Barré syndrome, Meningitis, Encephalitis, Brain tumor, Traumatic brain injury, Spinal cord injury, Huntington's disease, Myasthenia gravis, Bell's or Cerebral palsy, Neuralgia, Dementia, other.
Respiratory	dd/mmm/yyyy		Asthma, Chronic obstructive pulmonary disease, Emphysema, Chronic bronchitis, Tuberculosis, Pulmonary embolism, Lung cancer, Cystic fibrosis, Pulmonary hypertension, Sleep apnea, Bronchiectasis, Pleural effusion, Pneumothorax, Sinusitis, other.
Gastrointestinal 🔲	dd/mmm/yyyy		Gastroesophageal reflux disease, Peptic ulcer disease, Irritable bowel syndrome, Inflammatory bowel disease, Crohn's disease, Ulcerative colitis, Celiac disease, Gallstones, Hepatitis, Cirrhosis, Pancreatitis, Lactose intolerance, Diverticulitis, Hemorrhoids, Esophagitis, Colorectal cancer, Non-alcoholic fatty liver disease, other.
Endocrine	dd/mmm/yyyy		Diabetes mellitus, Hypothyroidism, Hyperthyroidism, Addison's disease, Cushing's syndrome, Polycystic ovary syndrome, Hyperparathyroidism, Hypoparathyroidism, Acromegaly, Gigantism, Pheochromocytoma, Graves' disease, Hashimoto's thyroiditis, Congenital adrenal hyperplasia, Multiple endocrine neoplasia syndromes, Diabetes insipidus, Thyroid nodules, Goiter, Hypogonadism, Hypergonadism, other.
Musculoskeletal 🔲	dd/mmm/yyyy		Osteoarthritis, Rheumatoid arthritis, Osteoporosis, Gout, Fibromyalgia, Tendinitis, Bursitis, Carpal tunnel syndrome, Low back pain, Sciatica, Herniated disc, Scoliosis, Kyphosis, Ankylosing spondylitis, other.
Autoimmune	dd/mmm/yyyy		Rheumatoid arthritis, Systemic lupus erythematosus, Type 1 diabetes mellitus, Multiple sclerosis, Psoriasis, Sjögren's syndrome, Scleroderma, Autoimmune hepatitis, Pernicious anemia, Vitiligo, Alopecia areata, Polymyositis, Dermatomyositis, other.
Renal 🔲	dd/mmm/yyyy		Chronic kidney disease, Acute kidney injury, Glomerulonephritis, Nephrotic syndrome, Polycystic kidney disease, Nephrolithiasis, Hydronephrosis, Renal artery stenosis, Diabetic or Hypertensive nephropathy, Interstitial nephritis, Renal tubular acidosis, Renal cell carcinoma, Alport syndrome, Minimal change disease, Berger's disease, other.
Psychiatric 🔲	dd/mmm/yyyy		Major depressive disorder, Generalized anxiety disorder, Borderline or Bipolar disorder, Schizophrenia, Obsessive-compulsive disorder, Post-traumatic stress disorder, Panic or Social anxiety disorder, Attention-deficit/hyperactivity disorder, Autism spectrum disorder, Eating disorders, Insomnia, Schizoaffective disorder, other.
Surgical 🔲	dd/mmm/yyyy		Appendectomy, Cholecystectomy, Hernia repair, C-section, Hysterectomy, Mastectomy, Thyroidectomy, Tonsillectomy, Adenoidectomy, Joint replacement, Spinal surgery, Bowel resection, Coronary artery bypass graft, Angioplasty, Kidney transplant, Liver transplant, Splenectomy, Cataract surgery, Sinus surgery, Skin lesion excision, other.
Hospitalizations [	dd/mmm/yyyy		Severe infection, Pneumonia, Asthma exacerbation, COPD exacerbation, Diabetic ketoacidosis, Hypoglycemia, Myocardial infarction, Stroke, Seizure, Head injury, Surgery recovery, Childbirth, Mental health crisis, Kidney stones, Acute abdominal pain, Gastroenteritis with dehydration, Allergic reaction, Blood transfusion, Trauma or accident, Cancer treatment, other.
Transfusions	dd/mmm/yyyy		Red blood cell transfusion, Platelet transfusion, Plasma transfusion, Cryoprecipitate transfusion, Whole blood transfusion, Autologous blood transfusion, Granulocyte transfusion, Stem cell transplant (hematopoietic), Immunoglobulin infusion, other.
Trauma 🔲	dd/mmm/yyyy		Head injury, Concussion, Traumatic brain injury, Facial trauma, Spinal cord injury, Fractures, Dislocations, Soft tissue injury, Lacerations, Burn injury, Crush injury, Eye trauma, Dental trauma, Chest trauma, Abdominal trauma, Pelvic trauma, Limb amputation, Penetrating injury, Blunt force trauma, Occupational injury, Vehicle accident, Recreational accident, gun-shot wound, other.
Allergies [	dd/mmm/yyyy		Drug allergy, Food allergy, Latex allergy, Insect sting allergy, Environmental allergy, Seasonal allergy, Mold allergy, Animal dander allergy, Dust mite allergy, Pollen allergy, Chemical sensitivity, Fragrance allergy, Metal allergy (e.g., nickel), Vaccine allergy, Contrast dye allergy, other.



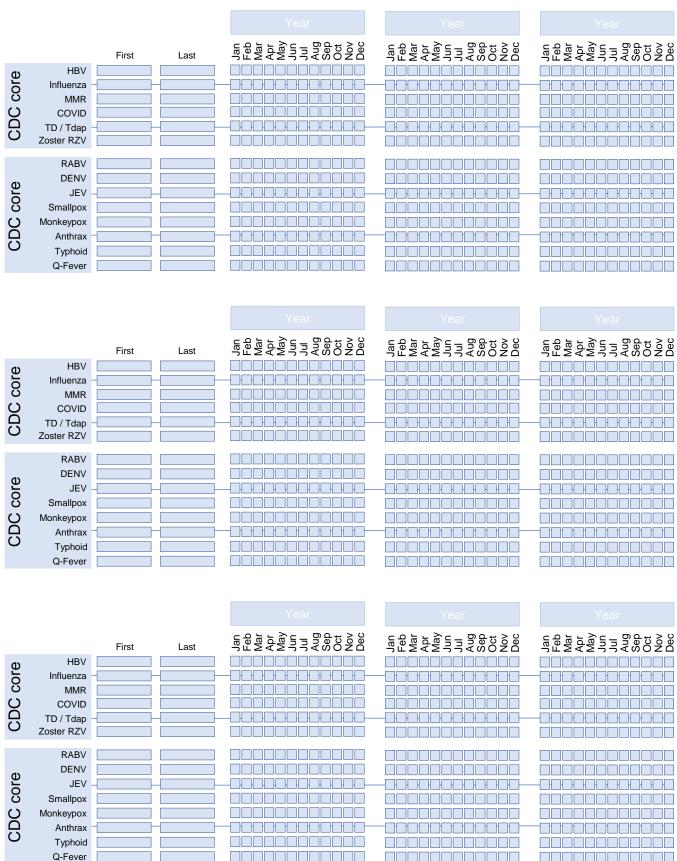
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Immunization history \_\_\_\_\_

Mark the date of vaccine administration with ■





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Medical notes	
dd/mmm/yyyy	
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dd/mmm/yyyy	
dd/mmm/yyyy	
dd/mmm/yyyy	