

## Department Environment and Biodiversity

|                             |                   |
|-----------------------------|-------------------|
| Laboratory Unit:            | Geology           |
| Room:                       | E-K.012           |
| Responsible:                | Gertrude Friedl   |
| Co-Responsible:             | Bjarne Friedrichs |
| Consultation prior to work: | Gertrude Friedl   |
| Latest update:              | November 2023     |

### Local Safety Rules for the Magnetic Separation Laboratory

- The use of the lab is only allowed after approval by the responsible persons.
- Persons with a heart pacemaker are not allowed to work with the FRANTZ™ magnetic separator due to its strong magnetic field
- Eating, drinking, and smoking are not permitted in this laboratory.
- Due to the influence of the strong magnetic field, please move cell phones, watches, credit cards or any metal objects out of the range of the magnetic field before using the magnetic separator.
- It is recommended to wear ear protection when using the magnetic separator and/or the compressed air device
- The Fire Protection Ordinance applies! Fire protection equipment must not be put out of operation.
- Before starting work, every user must sign in the lab book.
- Please inform the lab manager immediately of any defects in the equipment and of any consumables that have run low.
- Mineral separation requires a high degree of cleanliness, so the greatest possible cleanliness must be ensured during all working steps to prevent contamination of the samples.
- Upon completion of work, make sure that all devices are switched off and the compressed air is turned off.

## Emergency



Building manager (Hausdienst): 6821  
Fire: 0 – 122  
Ambulance: 0 – 144  
Info Poisoning Treatment: 01- 406 43 43

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### User:

I confirm that I have read and understood the above Local Safety Rules

Date: \_\_\_\_\_ Name: \_\_\_\_\_ Signature: \_\_\_\_\_

### Laboratory Responsible:

I confirm that above named person was trained on the basis of the Local Safety Rules.

Date: \_\_\_\_\_ Name: \_\_\_\_\_ Signature: \_\_\_\_\_

### Authorization for work in specialized labs:

I confirm that above named person has been instructed to work in the following labs:

Room E-K.012: **Magnetic separation**

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Gertrude Friedl