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**The University of Texas at El Paso**

**Institutional Biosafety Committee**

**Appendix B Form**

*Instructions:* Forms need to be completed and submitted via [IRBNet](http://www.irbnet.org/) on the 1st of every month. Submissions entered after the two weeks from the meeting date will be considered for review at the following meeting. Meeting dates are posted on the [IBC website](http://research.utep.edu/Default.aspx?tabid=58993). Any questions contact the IBC office at ibc@utep.edu.

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| **B.** **APPENDIX B: RISK GROUP 2 ORGANISMS***See also, the NIH guidance document, Biosafety Considerations for Research with Risk Group 2 Organisms,* <https://www.cdc.gov/biosafety/publications/bmbl5/bmbl5_sect_ii.pdf> |
| **Question:** | **Agent:**       | **Agent:**       | **Agent:**       |

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| --- | --- | --- | --- |
| **B.1 Where will the experiments involving the use of Risk Group 2 agents be performed?** (List all locations applicable and specify building and room number):  |       |       |       |
| **B.2 Will needles, glassware or other sharps be used while working with risk group 2 organisms** (to assess the risk)? | [ ]  **NO** [ ]  **YES** If **yes,** describe what precautions will be taken by the PI and lab personnel to minimize the exposure risk.      | [ ]  **NO** [ ]  **YES** If **yes,** describe what precautions will be taken by the PI and lab personnel to minimize the exposure risk.      | [ ]  **NO** [ ]  **YES** If **yes,** describe what precautions will be taken by the PI and lab personnel to minimize the exposure risk.      |
| **B.3 Will risk group 2 organisms be injected into animals?**  | [ ]  **NO** [ ]  **YES**  | [ ]  **NO** [ ]  **YES**  | [ ]  **NO** [ ]  **YES**  |
| **B.4: List and describe the experiments that will be conducted with the selected agent(s)** (e.g., how will the infection occur, how will it be monitored, assess the risks) |       |       |       |
| **B.5 Can this agent infect or cause disease in immunocompromised individuals?**  | [ ]  **NO** [ ]  **YES** If **yes,** provide a description of potential mechanism of laboratory transmission     If **yes,** is the infection associated with replication in humans or is it abortive (no progeny)?[ ]  **Replication** [ ]  **Abortive**  | [ ]  **NO** [ ]  **YES** If **yes,** provide a description of potential mechanism of laboratory transmission     If **yes,** is the infection associated with replication in humans or is it abortive (no progeny)?[ ]  **Replication** [ ]  **Abortive**  | [ ]  **NO** [ ]  **YES** If **yes,** provide a description of potential mechanism of laboratory transmission     If **yes,** is the infection associated with replication in humans or is it abortive (no progeny)?[ ]  **Replication** [ ]  **Abortive**  |
| **B.6 Please list or describe any known vaccine or chemo prophylactic drugs available to treat infections from the proposed risk group 2 organisms?**  |       |       |       |
| **B.7 Provide agents Safety Data Sheet (SDS) (Formerly known as Material Safety Data Sheets [MSDS]) if available, upload into IRBNet or with application.**  |