

The University of Texas at El Paso

**Institutional Biosafety Committee**

**Appendix C 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](mailto:ibc@utep.edu).

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| **C.** **APPENDIX C: RISK GROUP 3 ORGANISMS**  *See also, the NIH guidance document, Biosafety Considerations for Research with Risk Group 3 Organisms,* <http://osp.od.nih.gov/sites/default/files/NIH_Guidelines.html#_Toc446948325> | | | |
| **Question:** | **Agent:** | **Agent:** | **Agent:** |

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| **C.1** Provide the building and room # where experiments will be conducted |  |  |  |
| **C.2** Describe pathogenicity ( include disease incidence and severity) |  |  |  |
| **C.3** Provide the route of transmission |  |  |  |
| **C.4:** Describe agent stability |  |  |  |
| **C.5:** List the infectious dosage |  |  |  |
| **C.6:** Provide the concentration (number of infectious organism per unit volume) and the volume of the concentrated material being handled. |  |  |  |
| **C.7:** Provide the origin of the infectious material (may refer to geographic location, host or nature of source). |  |  |  |
| **C.8:** Is there an effective prophylaxis or therapeutic intervention available? | **NO**  **YES**  If **yes,** list prophylaxis or therapeutic intervention | **NO**  **YES**  If **yes,** list prophylaxis or therapeutic intervention | **NO**  **YES**  If **yes,** list prophylaxis or therapeutic intervention |
| **C.9:** Is medical surveillance recommended prior to commencement of work | **NO**  **YES** | **NO**  **YES** | **NO**  **YES** |
| **C.10** What systems are you using to propagate or study the agent(s) listed? |  |  |  |
| **C.11:** Will needles, glassware or other sharps be used while working with risk group 3 organisms? | **NO**  **YES**  If **yes**, list the sharp(s) to be used and describe what precautions will be taken by the PI and lab personnel to minimize the exposure risk. | **NO**  **YES**  If **yes**, list the sharp(s) to be used and describe what precautions will be taken by the PI and lab personnel to minimize the exposure risk. | **NO**  **YES**  If **yes**, list the sharp(s) to be used and describe what precautions will be taken by the PI and lab personnel to minimize the exposure risk. |
| **C.12:** Will risk group 3 organisms be used in animals? | **NO**  **YES**  If **yes**, describe route of transmission. | **NO**  **YES**  If **yes**, describe route of transmission. | **NO**  **YES**  If **yes**, describe route of transmission. |
| **C.13** What is the availability of data from animal studies (pathogenicity, infectivity and route of transmission in animals)? |  |  |  |
| **C.14** Provide agents Safety Data Sheet **(SDS)** if available, upload into IRBNet or with application (Formerly known as Material Safety Data Sheets [MSDS]). | | | |