Biosafety Standard Operating Procedures – Plasmid Addition

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| ***Principal Investigator:*** Click or tap here to enter text. | ***IBC Protocol Number:*** Click or tap here to enter text. |
| **1.0 Agent and source:** Click or tap here to enter text. | Click or tap here to enter text. |
| ***Plasmid(s) added:*** Click or tap here to enter text. | ***Source (ie: Addgene, ATCC, obtained from collection,******etc.):*** |
| Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. |  |
| Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. |

* 1. Biosafety Level: [ ] BSL1 [ ] BSL2 [ ]  BSL2+
	2. Provide the link(s) to the source(s) listed above:

Click or tap here to enter text.

* 1. If applicable, provide any known oncogenes, toxin-production or eukaryotic viral nucleic acids in the vectors/plasmids:

Click or tap here to enter text.

* 1. Will modifications be made, if yes, please describe:

Click or tap here to enter text.

* 1. Identification of Plasmid product(s):

Click or tap here to enter text.

* 1. Host(s) to be used (ie: human cells, mouse cells etc.):

 Click or tap here to enter text.

* 1. Additional comments (if necessary):

Click or tap here to enter text.

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| *1.8* ***Cloned DNA Information (species and strain from which derived):*** | ***Function of gene:*** |
| Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. |

* 1. LSE Training: *It is mandatory all lab personnel complete* ***Laboratory Safety Essentials*** *per HSC OP 75.01 TTUHSC Safety Programs and the IBC Bylaws, by checking “I Agree” you are confirming that all personnel handling this/these microorganisms have been appropriately trained in its use and emergency procedures related to accidents and/or exposure events.* [ ]  **I Agree**
	2. Are there any relevant vaccines to declare? [ ] **Yes** [ ] **No**

List vaccines here if Yes:

Click or tap here to enter text.

* 1. Describe protocol to be followed for accidental exposure to agents listed above: ***REPORT ALL EXPOSURES.*** *Please include incubation period, communicability, surveillance, first aid/treatment, drug resistance, drug susceptibility, and prophylaxis for EACH viral vector or virus.*

Click or tap here to enter text.

* 1. Describe the procedures used with EACH plasmid and/or vector and the amount(s) to be used per procedure: *(Descriptions should include how it is grown, experiments, and volumes. Excess of 10L in one vessel for some viral vector and/or viruses may require BSL3 contact Safety Services for risk assessment)*

Click or tap here to enter text.

* 1. Procedures will (check all that apply):

[ ] Generate aerosols/dust

[ ] Involve sharps [ ] Potentially contaminate

hands or clothing

[ ] Other (Please provide an explanation): **Click or tap here to enter text.**

* 1. a) What room will EACH agent be stored in?

Click or tap here to enter text.

b) What room will EACH agent be used in?

Click or tap here to enter text.

* 1. What volume will be grown at one time?

Click or tap here to enter text.

* 1. How frequently will you be using each agent (e.g. daily, weekly)?

Click or tap here to enter text.

* 1. List any constraints on this material as they apply to personnel:

Click or tap here to enter text.

* 1. Personal Protective Equipment for EACH viral Vector and/or Virus. *List all PPE required to work with this/these agents; if not applicable state N/A:*

Click or tap here to enter text.

* 1. **Administrative & Engineering Controls:**
	2. a) Describe processes or procedures **established by the PI** for the purpose of reducing personnel exposure:

Click or tap here to enter text.

b) Describe any additional PPE:

Click or tap here to enter text.

* 1. Engineering Controls:

[ ] Containment: [ ]  Open Bench [ ] Fume Hood [ ] Draft Shielded Scale

[ ] Other: Click or tap here to enter text.

* 1. **Animal Use:** [ ]  **YES (***Check if used in animals, then answer questions below)* [ ] **NO** (*Check if not, skip to section 6.0)*

[ ] Sharps hazard [ ] Aerosol hazard [ ] Hazards from animal waste, bedding, and/or cage handling

[ ] Physical hazard from animal/lesions on animals related to agent

5.1 *Describe means to mitigate hazards produced from section 5.0 for each toxin:*

* + 1. Sharps Hazard: Click or tap here to enter text.
		2. Aerosol Hazard: Click or tap here to enter text.
		3. Hazards from animal: Click or tap here to enter text.
		4. Physical Hazard: Click or tap here to enter text.
	1. Describe any hazards to laboratory workers (& LARC personnel):

*(Risks generally include: ingestion, skin puncture, contact with mucous membranes [e.g., eyes, nose, mouth], contact with non-intact skin, exposure to aerosols generated during procedures)*

Click or tap here to enter text.

**6.0 Waste Disposal**: *Indicate what type of waste this agent will produce:*

[ ] Liquid [ ] Solid [ ] Contaminated Reusable Item [ ]  Animal Tissue [ ]  Animal Carcass

 [ ] Animal Bedding/waste/cage

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| *Only select the above if used in animals* |
| 6.1 Describe how you will dispose of each waste selected above for EACH viral vector or virus: |
| Liquid: Click or tap here to enter text. |
| Solid: Click or tap here to enter text. |
| Unused Agent: Click or tap here to enter text. |
| Animal Waste:Click or tap here to enter text. |
| *(Specify for each type of**animal waste)* |
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| **7.0 Accidental Cleanup Procedures**: *Describe methods to be used to address spills, including concentration and contact**time of any cleaning or deactivating agents, spill kits and/or any other necessary supplies required for cleanup.* |
| Describe appropriate PPE during cleanup: |

Click or tap here to enter text.

Procedure for liquid spill:

Click or tap here to enter text.