Form 1: General Information **IBC Number:** Click or tap here to enter text.

*Committee Use Only*

**Principal Investigator (PI) Name:**  Click or tap here to enter text.

**Please check the boxes for any forms that are applicable to the research project you are registering. Form 1 – General Information MUST be completed for all submitted project registrations, regardless of the type of research.**

Form 1 – General Information (this must be completed for all projects)

Form 2 – Recombinant and/or synthetic nucleic acid molecules (rDNA; even if exempt from the NIH Guidelines)

Form 3 – Risk Group 2 or Risk Group 3 Organisms (pathogenic to humans/plants/animals)

Form 4 – Biological Toxins

Form 5 – Human or nonhuman primate materials IRB Protocol # (if applicable): Click or tap here to enter text.

Form 6 – Animals or animal tissues and any of the above categories; transgenic animals, wild vertebrates or tissues

AUP # (if applicable): Click or tap here to enter text.

Form 7 -Plants, plant tissues, or seeds and any of the above categories; transgenic plants, tissues, or seeds

Form 8 – Pat Walker Health Center form

Form 9 – Mammalian Tumor Cell Lines

1. To initiate the review process, you must attach and send all completed registration forms via email to: [ibc@uark.edu](mailto:ibc@uark.edu). All registration forms should be submitted electronically.

2. If you (the PI) are unable to sign electronically, please print out page 1 of this form, sign and date it, then scan and email to [ibc@uark.edu](mailto:ibc@uark.edu). You may also mail it to: IBC Compliance Coordinator, University of Arkansas, 109 MLKG, Fayetteville, AR 72701.

**As Principal Investigator (please read and check all boxes):**

I attest that the information in this form is accurate and complete. I will submit changes to the IBC in a timely manner.

I am familiar with and agree to abide by current, applicable regulations and guidelines governing my research, including, but not limited to, the *NIH Guidelines for Research Involving Recombinant or Synthetic Nucleic Acid Molecules (*[*NIH Guidelines*](https://osp.od.nih.gov/biotechnology/nih-guidelines/)*)* and *Biosafety in Microbiological and Biomedical Laboratories, 6th edition* ([BMBL](https://www.cdc.gov/labs/pdf/SF__19_308133-A_BMBL6_00-BOOK-WEB-final-3.pdf))

I agree to accept responsibility for training all laboratory and animal care personnel involved in this research on potential biohazards, relevant biosafety practices, techniques, and emergency procedures.

If applicable, I have carefully reviewed the NIH Guidelines and accept the responsibilities described therein for principal investigators (Section IV-B-7).

I will submit a written report to the IBC and to the NIH Office of Science Policy (as applicable) concerning: any research-related accident, exposure incident, or release of rDNA materials to the environment; problems pertaining to the implementation of biological and/or physical containment procedures; or violations of the NIH Guidelines.

I agree that no work will be initiated prior to project approval by the IBC.

I agree that either the PI or a co-Investigator will appear before the IBC to answer any questions or address concerns about this protocol to secure approval.



Date: Click or tap here to enter text.

# Contact Information

**Principal Investigator:**

Name: Click or tap here to enter text. Title: Click or tap here to enter text.

Department: Click or tap here to enter text. Campus Address: Click or tap here to enter text.

Phone Number: Click or tap here to enter text. Email address: Click or tap here to enter text.

After hours phone number (required if research is at BSL-2): Click or tap here to enter text.

**Co-Investigator:**

Name: Click or tap here to enter text. Title: Click or tap here to enter text.

Department: Click or tap here to enter text. Campus Address: Click or tap here to enter text.

Phone Number: Click or tap here to enter text. Email address: Click or tap here to enter text.

After hours phone number (required if research is at BSL-2): Click or tap here to enter text.

# Project Information

1. Have you previously registered **any** project with the IBC? Yes  No

Is this a new project, a modification, or a renewal of a previously approved project?

New project  Modification  Renewal (required after three years)

1. Project Title: Click or tap here to enter text.
2. Indicate the containment conditions you propose to use (check all that apply):

Biosafety Level 1  Plant Biosafety Level 1  Animal Biosafety Level 1

Biosafety Level 2  Plant Biosafety Level 2  Animal Biosafety Level 2

1. If proposing work at BSL-2, has your laboratory been inspected by the Biological Safety Officer or a member of the IBC? Choose an item.

If yes, date of inspection (if known): Click or tap here to enter text. If no, please schedule an inspection with the Biological Safety Officer.

**References (click to view):**

1. [University of Arkansas Biological Safety Manual](https://enhs.uark.edu/_resources/documents/other/UA_biosafety_manual_2019.pdf)

2. [Biosafety in Microbiological and Biomedical Laboratories (BMBL) – 6](https://www.cdc.gov/labs/pdf/SF__19_308133-A_BMBL6_00-BOOK-WEB-final-3.pdf)[th](https://www.cdc.gov/labs/pdf/SF__19_308133-A_BMBL6_00-BOOK-WEB-final-3.pdf) [edition (CDC/NIH)](https://www.cdc.gov/labs/pdf/SF__19_308133-A_BMBL6_00-BOOK-WEB-final-3.pdf)

3. [NIH Guidelines for Research Involving Recombinant or Synthetic Nucleic Acid Molecules](https://osp.od.nih.gov/wp-content/uploads/NIH_Guidelines.pdf)

Please provide the following information on the research project. **Please DO NOT** attach or insert the entire grant proposal(s).

This information can be attached as a Word document or entered into the space provided.

1. Project Abstract:

Click or tap here to enter text.

1. Specific Aims:

Click or tap here to enter text.

1. Relevant Materials and Methods (*this information should be specific to this research project)*:

Click or tap here to enter text.

# Personnel Qualifications and Facility Information

1. List all personnel, including PI and Co-Investigators) involved with this project:

|  |  |
| --- | --- |
| **Name (First and Last), Position (Title, academic degrees, certifications, field of expertise), and Role on project (PI, Co-I, student, etc.)** | **Qualifications/Trainings/Relevant experience:** Describe previous work or training with biological materials, including biosafety levels |
| Ex: Bob Biohazard, Professor, Ph.D. Molecular Genetics, PI | 14 years exp. with *E. coli* at BSL-1, *S. enterica* at BSL-2, 8 yrs exp transgenic mice |
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Additional Personnel Information (if needed):

Click or tap here to enter text.

1. List all the laboratories/facilities where research is to be conducted. Specify building, room number and category for each (*e.g.* laboratories, cold/warm rooms, animal care facilities or farms, growth chambers and greenhouses, biological material storage areas, tissue culture rooms, *etc.*)

**Building and Room Number Category Biosafety Level Signage\***

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**\* Signs are required for entrances to BSL-2 areas, including Animal Biosafety Level 2 (ABSL-2) areas. The Office of Environmental Health and Safety will supply these signs.**

Additional Laboratory/Facility Information (if needed):

Click or tap here to enter text.

1. If an updated biohazard sign is required, please indicate the location and what agents/organisms/hazards should be included on the sign.

Click or tap here to enter text.

# Safety Procedures

1. Please indicate which of the following personal protective equipment (PPE) will be used to minimize exposure of laboratory personnel during all procedures involving the handling or manipulation of biological materials.

**Gloves:**

Latex  Vinyl  Nitrile  Leather  Other, specify: Click or tap here to enter text.

**Face and Eye Protection:**

Face Shield  Safety Goggles  Safety Glasses  Other, specify: Click or tap here to enter text.

**Clothing Protection:**

Disposable lab coat  Reusable Lab Coat  Reusable Coverall

Other, specify: Click or tap here to enter text.

1. How will protective clothing be cleaned once dirty or contaminated (Check all that apply):

Autoclaved prior to laundering or disposal  Laundered in on-site facilities with bleach

Laundered by qualified commercial service  Other, specify: Click or tap here to enter text.

Outline procedures for routine decontamination of work surfaces, instruments, equipment, glassware and liquids containing infectious materials. Autoclaving or freshly prepared 10% bleach as a chemical disinfectant are preferred treatments; please specify and justify exceptions. **Note that bleach solutions should not be autoclaved.**

Click or tap here to enter text.

1. Describe waste disposal methods employed for all biological and recombinant materials used. Include methods for the following categories. Please refer to the [Biological Safety Manual](https://enhs.uark.edu/_resources/documents/other/UA_biosafety_manual_2019.pdf) as needed:

**Sharps:**

Click or tap here to enter text.

**Cultures, stocks, and disposable labware:**

Click or tap here to enter text.

**Biohazardous Waste:**

Click or tap here to enter text.

**Other (describe):**

Click or tap here to enter text.

**Indicate location(s) of autoclave(s) used for waste disposal and describe validation procedures:**

Click or tap here to enter text.

1. Will biological safety cabinets (BSC) be used for this project? Yes\_\_\_\_ No\_\_\_\_

If yes, please provide the following information:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Make/Model** | **Location (building and room number)** | **Date of last certification** | **Serial Number** | **FAMA #** |
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1. Indicate if any of the following aerosol-producing procedures will be used:

Centrifuging  Pipetting  Grinding  Dissection  Stomacher

Vigorous shaking/mixing  Inoculating animals intranasally  Sonic disruption

Other, describe: Click or tap here to enter text.

1. Describe the procedures and equipment that will be used to prevent personnel exposure during aerosol-producing procedures:

Click or tap here to enter text.

**Emergency Procedures**

1. In the event of personnel exposure (e.g. mucous membrane exposure or parenteral inoculation), describe what steps will be taken including treatment, notification of proper supervisory and administrative officials, and medical follow up evaluation or treatment:

Click or tap here to enter text.

1. In the event of environmental contamination, describe what steps will be taken including a spill response plan incorporating necessary personal protective equipment (PPE) and decontamination procedures.

Click or tap here to enter text.

**Transportation and/or Shipment of Biological Materials**

1. As per the Department of Transportation [49 CFR Parts 171-173](https://www.ecfr.gov/cgi-bin/text-idx?SID=4d39b41b6e6f1ebd2c34f5def60398d2&mc=true&tpl=/ecfrbrowse/Title49/49CIsubchapC.tpl), some biological materials are regulated as hazardous materials and require special training of all personnel involved in packaging and shipping. Will you be transporting and/or shipping any biological materials off campus?

Yes\_\_\_\_ No\_\_\_\_

If yes, check all that apply:

Cultures of human or animal pathogens

Environmental samples known or suspected to contain a human or animal pathogen

Human or animal material (including excreta, secreta, blood and its components, tissue or tissue fluids, and cell lines) containing or suspected of containing a human or animal pathogen

1. Have you or anyone in your lab involved in packaging, labeling, and/or completing/signing paperwork received training to ship infectious substances or diagnostic specimens within the past three years?

Yes\_\_\_\_ No\_\_\_\_

If yes, please provide the following information:

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| **Name** | **Date Trained** | **Training Provided by** |
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# References (click to view)

1. [University of Arkansas Office of Research Compliance (RSCP)](https://research.uark.edu/units/rscp/)

2. [BMBL, 6th edition](https://www.cdc.gov/labs/pdf/SF__19_308133-A_BMBL6_00-BOOK-WEB-final-3.pdf)

3. [NIH Guidelines](https://osp.od.nih.gov/wp-content/uploads/NIH_Guidelines.pdf)

4. [University of Arkansas Office of Environmental Safety](https://enhs.uark.edu/)

5. [Department of Transportation – Hazardous Materials: Standards for Infectious Substances](https://www.ecfr.gov/cgi-bin/text-idx?SID=4d39b41b6e6f1ebd2c34f5def60398d2&mc=true&tpl=/ecfrbrowse/Title49/49CIsubchapC.tpl)