### What is a Biological Hygiene Plan And Why do I need it?

University of Miami Environmental Health & Safety Biosafety

## **Biosafety Office**



- Shane Gillooly
  - Biosafety Officer



- Melanie Peapell
  - Biosafety Specialist
  - Laser Safety Officer



- Daniel Nunez
  - Biosafety Specialist

## Prize Winner

- Branded Laboratory Research Notebook
  - Hardcover
  - Sebastian
  - 232 pages
- Brought to you by:
  - Office of Environmental Health & Safety
  - Office of the Vice Provost for Research & Scholarship
- Yesterday's Winner:Joshi Mahesh



### What is the Biological Hygiene Plan?

### Biological Hygiene Plan

### **Biological Hygiene Plan**

### PI Last Name Lab

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Biosafety Cabinets in U	se		BSC Type:	N/A	Certification Dat	te	
BSC Room Location(s	)				Expiration Date	2	

	Section 2: Training Requirements for Lab			
Check each box that is applicable Required Training for Lab				
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	2. Human source materials	Bloodborne Pathogens		
	3. Genetically modified organisms or synthetic nucleic acid molecules	Recombinant DNA		
	<ol><li>Biological materials/specimens shipped to another facility.</li></ol>	Shipping of Dangerous Goods		
	<ul> <li>Specify designated shipper(s):</li> </ul>	Shipping of Biological Materials		

Section 3: Hazard Communication		
Type of Material Used/Stored by Lab	Specify Genus Species or Disease within Specimen	
Provide an overview of the lab and how these biological materials function to serve the aims of the research.		

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List the PPE requirements for researchers in this lab:
Gloves Safety Glasses Lab Coat Face Shield Disposable Gown N95 Respirator Other(s): List
Revision Date: 07-12-21 Page 1 5

### tion 5: Hygiene

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below and check/modify as appropriate for adoption by your lab.
t A: Engineering Controls
requiring a key or card access to gain entry.
e room will be limited to only that which is unavoidable.
n while active work on this project is ongoing.
aterials will always be performed in the biosafety cabinet(s) listed.
imize the creation of aerosols, and that which is unavoidable must
I work involved in the manipulation of the biohazardous material.
r visually labeled so as to prevent work in them.
r materials carrying viable pathogens is allowed under any
put in the biosafety cabinet.
cleaned with disinfectant before and after use.
B: Work Practice Controls
mediately after contact with potentially infectious materials,
d before exiting the lab.
; drinking; smoking; application of cosmetics; handling of contact
c
itially infectious materials (e.g., pipettes, filter units, culture
for decontamination off-site.
10 dilution of bleach and poured down the drain.
ice per day, and after any spill of viable material.
y waste will be labeled, leak-proof, and closeable.
nd other sharps directly into a labeled, puncture-proof sharps
any effort made to recap by hand, destroy or remove needles
nmunocompromised) should avoid working with potentially
d, meaning a leak-proof, sealed, inner container, a leak-proof,
ag, and a sturdy outer container such as a cooler. The container
ck-up to its delivery location, the site of manipulation, in the PI's
dual for co-delivery, it will not be left in any location except at the
sed, or materials that have a chance of having been exposed to and
sealable container and the outside surface decontaminated with
fore the container can be removed and disposed of in a biological
any such hazards must have any openings covered and/or sealed
rior to their disposal in a biohazardous bin.
ersonal Protective Equipment
posure to infectious agents, protective clothing and devices must
viduals present in the lab must wear protective clothing and
es have the potential for direct or indirect contact with blood or
ludes during handling of closed vessels containing tissue, blood, or
sue or blood. Gloves will also be worn during all cleaning and
dling of biomedical waste.
ndering or professionally cleaned.
Date: 07-12-21 Page 2 5

odborne Pathogens L-2) in terms of practices, safety equipment, and s", which assumes that all blood, body fluids, ly infectious. potentially infectious materials have been egulations (Blood-Borne Disease Standard, 29 present in human blood, or blood components, but are not limited to, hepatitis B virus (HBV) and ary occupational infection hazard to healthcare he risk of occupational infection with HIV is very bloodborne diseases that pose sporadic but ilis, malaria, babesiosis, brucellosis, relapsing gents, and arboviruses. in to be infected with HBV, HCV, HIV, herpes, or Emergency n/safety shower located in room for 15 orted to the Employee Health Office, the

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Page 3|5

### CT AGENTS ASSESSMENT

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### eck all that apply)

ERLAP SELECT AGENTS AND TOXINS Bacillus anthracis Bacillus anthracis Pasteur strain Brucella abortus Brucella melitensis Brucella suis Burkholderia mallei Burkholderia pseudomallei Hendra virus Ninah virus Rift Valley fever virus /enezuelan equine encephalitis virus A SELECT AGENTS AND TOXINS African horse sickness virus African swine fever virus Avian influenza virus Classical swine fever virus Foot-and-mouth disease virus Goat pox virus Lumpy skin disease virus Mycoplasma capricolum viycoplasma mycoides Newcastle disease virus Peste des petits ruminants virus Rinderpest virus Sheep pox virus Swine vesicular disease virus A PLANT PROTECTION AND QUARANTINE (PPQ) SELECT AGENTS D TOXINS Coniothyrium glycines (formerly Phoma glycinicola and enochaeta glycines) Peronosclerospora philippinensis ronosclerospora sacchari) Ralstonia solanacearum Rathayibacter toxicus Sclerophthora rayssiae Synchytrium endobioticum Xanthomonas orvzae

### Assessment

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Page 4|5

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Other(s): List	
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### • Section 1 – Administration

## Training Required for Lab

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	_
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### • Section 1 – Administration • Section 2 – Training Requirements

### Training Subjects Open All Tabs -**Biosafety Training** -**Recombinant DNA Training** ÷ **Bloodborne Pathogens Training** -**Shipping Training** -Lab Safety Training

### Biohazardous Agents Used

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Section 3 – Hazard Communication

## Weighing the Risks

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Section	3: Hazard Communication
Type of Material Used/Stored by Lab	Specify Genus Species or Disease within Specimen
Provide an overview of the lab and how these bio	logical materials function to serve the aims of the research.
	ion 4: Risk Assessment
What are the possible transmission/exposure rout	tes of the materials used in the lab? (ie. Inhalation, bloodborne, etc.)
List the signs and symptoms of exposure to these	materials:
Assess the exposure risks associated with the proc	cedures employed in this lab. How are these risks mitigated?
How would exposures to these hazards be handle	d/treated?
What disinfectants are used for agent inactivation	? If applicable, what disinfectants are used in the BSC?
If applicable, specify how materials are being tran	sported between facilities and/or shipped to other facilities:
List the PPE requirements for researchers in this la	ab:
🛛 Gloves 🖾 Safety Glasses 🖾 Lab Coat 🔲 F	ace Shield 🔲 Disposable Gown 📃 N95 Respirator

Gloves Safety Glasses Lab Coat Face Shield Disposable Gown N95 Respirator Other(s): List...

Revision Date: 07-12-21

Page

- Section 1 Administration
- Section 2 Training Requirements
- Section 3 Hazard Communication
- Section 4 Risk Assessment

### Hygiene Plan

### **Biological Hyg**

### PI Last Na

- This form is both a review tool to assess/develop the safety plan outlining some of the safety standards and procedures
- Please upload a copy into the biological registration docume Reaistration submission.

			Section 1: A	dminist
Principle Investigator:				
PI Email:				
Lab/Safety Manager:				
Manager Email:				
Biosafety Cabinets in U	se		BSC Type:	N/A
BSC Room Location(s	)			

Section 2: Training Req
Check each box that is applicable
<ol> <li>Infectious or otherwise risk group 2 agents</li> </ol>
2. Human source materials
<ol> <li>Genetically modified organisms or synthetic nucleic ac</li> </ol>
4. Biological materials/specimens shipped to another fac
<ul> <li>Specify designated shipper(s):</li> </ul>

Section 3: Hazard Com					
Type of Material Used/Stored by Lab	Specify Genus S				
Provide an overview of the lab and how these bio	logical materials				
Sect	tion 4: Risk Asses				
What are the possible transmission/exposure rou	tes of the materia				
List the signs and symptoms of exposure to these	materials:				

Assess the exposure risks associated with the procedures employe

How would exposures to these hazards be handled/treated?

What disinfectants are used for agent inactivation? If applicable, v

If applicable, specify how materials are being transported between List the PPE requirements for researchers in this lab: 🛛 Gloves 🖾 Safety Glasses 🖾 Lab Coat 📃 Face Shield 📃 D Other(s): List...

e	Section 5: Hygiene Plan ase review the standard operating procedures below and check/modify as appropriate for adoption by your lab.
Ì	Part A: Engineering Controls
Ì	Access to this laboratory is always restricted, requiring a key or card access to gain entry.
t	When manipulating specimens, traffic into the room will be limited to only that which is unavoidable.
ł	No other research may be allowed in the room while active work on this project is ongoing.
╞	All manipulations of potentially pathogenic materials will always be performed in the biosafety cabinet(s) listed.
┞	All procedures are performed carefully to minimize the creation of aerosols, and that which is unavoidable must
l	be performed in the biosafety cabinet, as is all work involved in the manipulation of the biohazardous material.
	Biosafety cabinets will be certified annually, or visually labeled so as to prevent work in them.
	No open-bench work with infected samples or materials carrying viable pathogens is allowed under any
	circumstances, all such work must be carried out in the biosafety cabinet.
	The surface of the biological safety cabinet is cleaned with disinfectant before and after use.
	Part B: Work Practice Controls
	Employees will wash their hands with soap immediately after contact with potentially infectious materials,
	following the removal of protective gloves, and before exiting the lab.
	The following activities are prohibited: eating; drinking; smoking; application of cosmetics; handling of contact
	lenses; storage or preparation of food or drink.
	All supplies that come into contact with potentially infectious materials (e.g., pipettes, filter units, culture
	dishes) are disposed of in biohazardous waste for decontamination off-site.
	Liquid waste will be decontaminated with a 1:10 dilution of bleach and poured down the drain.
	Work surfaces are decontaminated at least once per day, and after any spill of viable material.
	Containers for potentially infectious laboratory waste will be labeled, leak-proof, and closeable.
	Long hair must be pulled back and contained.
	Employees will place used needles, scalpels, and other sharps directly into a labeled, puncture-proof sharps
	container immediately following use, without any effort made to recap by hand, destroy or remove needles
	from the syringes.
	Employees with increased risk (broken skin, immunocompromised) should avoid working with potentially
	infectious materials.
	During transport, samples will be triple packed, meaning a leak-proof, sealed, inner container, a leak-proof,
	sealed secondary container such as a Ziploc bag, and a sturdy outer container such as a cooler. The container
	shall be delivered directly from the point of pick-up to its delivery location, the site of manipulation, in the PI's
	lab. It will not be handed off to another individual for co-delivery, it will not be left in any location except at the
	lab and handed to the PI's lab directly.
	Any human specimen samples remaining unused, or materials that have a chance of having been exposed to and
	carrying viable pathogens, must be placed in a sealable container and the outside surface decontaminated with
	70% ethanol inside of the biosafety cabinet before the container can be removed and disposed of in a biological
	waste container. Any sharps bins containing any such hazards must have any openings covered and/or sealed
	prior to removal from the biosafety cabinet, prior to their disposal in a biohazardous bin.
	Part C: Personal Protective Equipment
	When there is a potential for occupational exposure to infectious agents, protective clothing and devices must
	be used.
	When there is ongoing work in the lab, all individuals present in the lab must wear protective clothing and
	devices, such as safety glasses.
Γ	In general, gloves will be worn when employees have the potential for direct or indirect contact with blood or
	other potentially infectious materials. This includes during handling of closed vessels containing tissue, blood, or
	culture medium that is contaminated with tissue or blood. Gloves will also be worn during all cleaning and
	decontamination procedures, and during handling of biomedical waste.
	Lab coats must be decontaminated before laundering or professionally cleaned.

### borne Pathogens

2) in terms of practices, safety equipment, and , which assumes that all blood, body fluids, infectious. ptentially infectious materials have been gulations (Blood-Borne Disease Standard, 29 present in human blood, or blood components, ut are not limited to, hepatitis B virus (HBV) and ary occupational infection hazard to healthcare e risk of occupational infection with HIV is very loodborne diseases that pose sporadic but is, malaria, babesiosis, brucellosis, relapsing nts, and arboviruses. to be infected with HBV, HCV, HIV, herpes, or mergency

rted to the Employee Health Office, the A project), and the PI, who will arrange for the cidents will result in suspension of protocols. 4684 aterials or agents must prepare an priately trained individuals. The EHS Biosafety diately to determine whether it can be cleaned on to mitigate aerosol creation. ating Procedures lab: Explain why and when it's needed and the

safety shower located in room for 15

g needle-stick risks. 5 is necessary, when and where they're enrollment.

AGENTS ASSESSMENT

nined to have the potential to pose a severe threat to both plant products. An attenuated strain of a select agent or an quirements of the Select Agent Regulations. Here is a list of

### ck all that apply) RLAP SELECT AGENTS AND TOXINS

acillus anthracis acillus anthracis Pasteur strain rucella abortus ucella melitensis Brucella suis urkholderia mallei urkholderia pseudomallei lendra virus lipah virus ift Valley fever virus enezuelan equine encephalitis virus A SELECT AGENTS AND TOXINS frican horse sickness virus frican swine fever virus vian influenza virus lassical swine fever virus oot-and-mouth disease virus oat pox virus umpy skin disease virus lycoplasma capricolum lycoplasma mycoides lewcastle disease virus este des petits ruminants virus inderpest virus heep pox virus wine vesicular disease virus A PLANT PROTECTION AND QUARANTINE (PPQ) SELECT AGENTS TOXINS oniothyrium glycines (formerly Phoma glycinicola and nochaeta glycines) eronosclerospora philippinensis nosclerospora sacchari) alstonia solanacearum athayibacter toxicus lerophthora rayssiae vnchytrium endobioticum anthomonas orvzae

### ASSESSMENT

urposes can be utilized for both

nces research that, based on current products, or technologies that could be to public health and safety, agricultural

### ersight of Life Sciences Dual Use Research rnment. On September 24, 2014, the US

Concern was released to establish the S Government considers these two

rojects at the University of Miami, and toxins and categories of experiments. deemed potential DURC.

15 listed agents.

enza virus

Clostridium botulinum

### can be reasonably anticipated to

ist the agent or toxin without clinical

useful prophylactic or therapeutic de detection methodologies. nce its ability to be disseminated.

sted in Question 6.2 of this form.

tices, containment equipment, personal level applicable to this project. I will his document and will follow these

Page 5|5

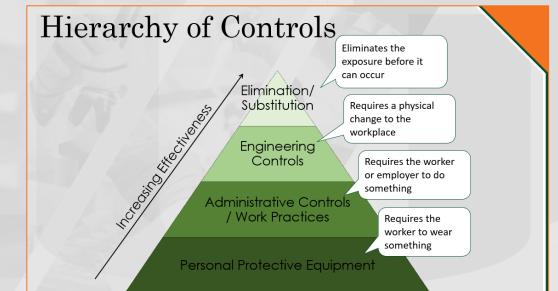
Page 4|5

## Lab Specific Safety SOPs

	Section 5: Hygiene Plan
Ple	ase review the standard operating procedures below and check/modify as appropriate for adoption by your lab.
	Part A: Engineering Controls
	Access to this laboratory is always restricted, requiring a key or card access to gain entry.
	When manipulating specimens, traffic into the room will be limited to only that which is unavoidable.
	No other research may be allowed in the room while active work on this project is ongoing.
	All manipulations of potentially pathogenic materials will always be performed in the biosafety cabinet(s) listed.
	All procedures are performed carefully to minimize the creation of aerosols, and that which is unavoidable must
	be performed in the biosafety cabinet, as is all work involved in the manipulation of the biohazardous material.
	Biosafety cabinets will be certified annually, or visually labeled so as to prevent work in them.
	No open-bench work with infected samples or materials carrying viable pathogens is allowed under any
	circumstances, all such work must be carried out in the biosafety cabinet.
	The surface of the biological safety cabinet is cleaned with disinfectant before and after use.
	Part B: Work Practice Controls
Т	Employees will wash their hands with soap immediately after contact with potentially infectious materials,
	following the removal of protective gloves, and before exiting the lab.
	The following activities are prohibited: eating; drinking; smoking; application of cosmetics; handling of contact
	lenses; storage or preparation of food or drink.
1	All supplies that come into contact with potentially infectious materials (e.g., pipettes, filter units, culture
	dishes) are disposed of in biohazardous waste for decontamination off-site.
1	Liquid waste will be decontaminated with a 1:10 dilution of bleach and poured down the drain.
i	Work surfaces are decontaminated at least once per day, and after any spill of viable material.
1	Containers for potentially infectious laboratory waste will be labeled, leak-proof, and closeable.
i	Long hair must be pulled back and contained.
t	Employees will place used needles, scalpels, and other sharps directly into a labeled, puncture-proof sharps
-	container immediately following use, without any effort made to recap by hand, destroy or remove needles
	from the syringes.
1	Employees with increased risk (broken skin, immunocompromised) should avoid working with potentially
1	infectious materials.
1	During transport, samples will be triple packed, meaning a leak-proof, sealed, inner container, a leak-proof,
	sealed secondary container such as a Ziploc bag, and a sturdy outer container such as a cooler. The container
	shall be delivered directly from the point of pick-up to its delivery location, the site of manipulation, in the PI's
	lab. It will not be handed off to another individual for co-delivery, it will not be left in any location except at the
	lab and handed to the PI's lab directly.
1	Any human specimen samples remaining unused, or materials that have a chance of having been exposed to an
1	carrying viable pathogens, must be placed in a sealable container and the outside surface decontaminated with
	70% ethanol inside of the biosafety cabinet before the container can be removed and disposed of in a biologica
	waste container. Any sharps bins containing any such hazards must have any openings covered and/or sealed
	prior to removal from the biosafety cabinet, prior to their disposal in a biohazardous bin.
	Part C: Personal Protective Equipment
1	When there is a potential for occupational exposure to infectious agents, protective clothing and devices must
1	be used.
1	When there is ongoing work in the lab, all individuals present in the lab must wear protective clothing and
1	devices, such as safety glasses.
1	In general, gloves will be worn when employees have the potential for direct or indirect contact with blood or
1	other potentially infectious materials. This includes during handling of closed vessels containing tissue, blood, of
	culture medium that is contaminated with tissue or blood. Gloves will also be worn during all cleaning and
	decontamination procedures, and during handling of biomedical waste.

Section 1 – Administration

- Section 2 Training Requirements
- Section 3 Hazard Communication
- Section 4 Risk Assessment
- Section 5 Hygiene Plan



### Lab Containment SOPs

	Section 5: Hygiene Plan						
Please review the standard operating procedures below and check/modify as appropriate for adoption by your lab.							
	Part A: Engineering Controls						
8	Access to this laboratory is always restricted, requiring a key or card access to gain entry.						
	When manipulating specimens, traffic into the room will be limited to only that which is unavoidable.						
	No other research may be allowed in the room while active work on this project is ongoing.						
	All manipulations of potentially pathogenic materials will always be performed in the biosafety cabinet(s) list						
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_	be performed in the biosafety cabinet, as is all work involved in the manipulation of the biohazardous material.						
	Biosafety cabinets will be certified annually, or visually labeled so as to prevent work in them.						
	No open-bench work with infected samples or materials carrying viable pathogens is allowed under any						
	circumstances, all such work must be carried out in the biosafety cabinet.						
	The surface of the biological safety cabinet is cleaned with disinfectant before and after use.						
	Part B: Work Practice Controls						
	Employees will wash their hands with soap immediately after contact with potentially infectious materials,						
	following the removal of protective gloves, and before exiting the lab.						
	The following activities are prohibited: eating; drinking; smoking; application of cosmetics; handling of contact						
	lenses; storage or preparation of food or drink.						
	All supplies that come into contact with potentially infectious materials (e.g., pipettes, filter units, culture						
	dishes) are disposed of in biohazardous waste for decontamination off-site.						
	Liquid waste will be decontaminated with a 1:10 dilution of bleach and poured down the drain.						
	Work surfaces are decontaminated at least once per day, and after any spill of viable material.						
	Containers for potentially infectious laboratory waste will be labeled, leak-proof, and closeable.						
	Long hair must be pulled back and contained.						
	Employees will place used needles, scalpels, and other sharps directly into a labeled, puncture-proof sharps						
_	container immediately following use, without any effort made to recap by hand, destroy or remove needles						
from the syringes.							
	Employees with increased risk (broken skin, immunocompromised) should avoid working with potentially						
_	infectious materials.						
	During transport, samples will be triple packed, meaning a leak-proof, sealed, inner container, a leak-proof,						
_	sealed secondary container such as a Ziploc bag, and a sturdy outer container such as a cooler. The container						
	shall be delivered directly from the point of pick-up to its delivery location, the site of manipulation, in the PI's						
	lab. It will not be handed off to another individual for co-delivery, it will not be left in any location except at the						
	lab and handed to the PI's lab directly.						
	Any human specimen samples remaining unused, or materials that have a chance of having been exposed to and						
_	carrying viable pathogens, must be placed in a sealable container and the outside surface decontaminated with						
	70% ethanol inside of the biosafety cabinet before the container can be removed and disposed of in a biological						
	waste container. Any sharps bins containing any such hazards must have any openings covered and/or sealed						
	prior to removal from the biosafety cabinet, prior to their disposal in a biohazardous bin.						
	Part C: Personal Protective Equipment						
	When there is a potential for occupational exposure to infectious agents, protective clothing and devices must						
_	be used.						
	When there is ongoing work in the lab, all individuals present in the lab must wear protective clothing and						
	devices, such as safety glasses.						
	In general, gloves will be worn when employees have the potential for direct or indirect contact with blood or						
	other potentially infectious materials. This includes during handling of closed vessels containing tissue, blood, or						
	culture medium that is contaminated with tissue or blood. Gloves will also be worn during all cleaning and						
	decontamination procedures, and during handling of biomedical waste.						
	Lab coats must be decontaminated before laundering or professionally cleaned.						

Section 5 – Hygiene Plan
Part A – Engineering Controls

### Lab Work Practice SOPs

	Section 5: Hygiene Plan							
Ple	Please review the standard operating procedures below and check/modify as appropriate for adoption by your lab.							
	Part A: Engineering Controls							
	Access to this laboratory is always restricted, requiring a key or card access to gain entry.							
	When manipulating specimens, traffic into the room will be limited to only that which is unavoidable.							
	No other research may be allowed in the room while active work on this project is ongoing.							
	All manipulations of potentially pathogenic materials will always be performed in the biosafety cabinet(s) listed.							
	All procedures are performed carefully to minimize the creation of aerosols, and that which is unavoidable mus							
	be performed in the biosafety cabinet, as is all work involved in the manipulation of the biohazardous material.							
	Biosafety cabinets will be certified annually, or visually labeled so as to prevent work in them.							
	No open-bench work with infected samples or materials carrying viable pathogens is allowed under any							
	circumstances, all such work must be carried out in the biosafety cabinet.							
	The surface of the biological safety cabinet is cleaned with disinfectant before and after use.							
	Part B: Work Practice Controls							
	Employees will wash their hands with soap immediately after contact with potentially infectious materials,							
_	following the removal of protective gloves, and before exiting the lab.							
	The following activities are prohibited: eating; drinking; smoking; application of cosmetics; handling of contact							
	lenses; storage or preparation of food or drink.							
	All supplies that come into contact with potentially infectious materials (e.g., pipettes, filter units, culture							
	dishes) are disposed of in biohazardous waste for decontamination off-site.							
	Liquid waste will be decontaminated with a 1:10 dilution of bleach and poured down the drain.							
	Work surfaces are decontaminated at least once per day, and after any spill of viable material.							
	Containers for potentially infectious laboratory waste will be labeled, leak-proof, and closeable.							
Long hair must be pulled back and contained.								
	Employees will place used needles, scalpels, and other sharps directly into a labeled, puncture-proof sharps							
	container immediately following use, without any effort made to recap by hand, destroy or remove needles							
	from the syringes.							
	Employees with increased risk (broken skin, immunocompromised) should avoid working with potentially							
	infectious materials.							
	During transport, samples will be triple packed, meaning a leak-proof, sealed, inner container, a leak-proof,							
	sealed secondary container such as a Ziploc bag, and a sturdy outer container such as a cooler. The container							
	shall be delivered directly from the point of pick-up to its delivery location, the site of manipulation, in the PI's							
	lab. It will not be handed off to another individual for co-delivery, it will not be left in any location except at the							
_	lab and handed to the PI's lab directly.							
	Any human specimen samples remaining unused, or materials that have a chance of having been exposed to and							
	carrying viable pathogens, must be placed in a sealable container and the outside surface decontaminated with							
	70% ethanol inside of the biosafety cabinet before the container can be removed and disposed of in a biological							
	waste container. Any sharps bins containing any such hazards must have any openings covered and/or sealed							
	prior to removal from the biosafety cabinet, prior to their disposal in a biohazardous bin.							
	Part C: Personal Protective Equipment							
	When there is a potential for occupational exposure to infectious agents, protective clothing and devices must							
_	be used.							
	When there is ongoing work in the lab, all individuals present in the lab must wear protective clothing and							
	devices, such as safety glasses.							
	In general, gloves will be worn when employees have the potential for direct or indirect contact with blood or							
	other potentially infectious materials. This includes during handling of closed vessels containing tissue, blood, or							
	culture medium that is contaminated with tissue or blood. Gloves will also be worn during all cleaning and							
	decontamination procedures, and during handling of biomedical waste.							
	Lab coats must be decontaminated before laundering or professionally cleaned.							

Section 5 – Hygiene Plan
Part A – Engineering Controls

Part B – Work Practice Controls

### Lab PPE SOPs

	Costion F. Hustone Dan
	Section 5: Hygiene Plan
Ple	ase review the standard operating procedures below and check/modify as appropriate for adoption by your lab.
	Part A: Engineering Controls
	Access to this laboratory is always restricted, requiring a key or card access to gain entry.
	When manipulating specimens, traffic into the room will be limited to only that which is unavoidable.
	No other research may be allowed in the room while active work on this project is ongoing.
	All manipulations of potentially pathogenic materials will always be performed in the biosafety cabinet(s) listed.
	All procedures are performed carefully to minimize the creation of aerosols, and that which is unavoidable must
_	be performed in the biosafety cabinet, as is all work involved in the manipulation of the biohazardous material.
	Biosafety cabinets will be certified annually, or visually labeled so as to prevent work in them.
	No open-bench work with infected samples or materials carrying viable pathogens is allowed under any
	circumstances, all such work must be carried out in the biosafety cabinet.
	The surface of the biological safety cabinet is cleaned with disinfectant before and after use.
	Part B: Work Practice Controls
	Employees will wash their hands with soap immediately after contact with potentially infectious materials,
	following the removal of protective gloves, and before exiting the lab.
	The following activities are prohibited: eating; drinking; smoking; application of cosmetics; handling of contact
	lenses; storage or preparation of food or drink.
	All supplies that come into contact with potentially infectious materials (e.g., pipettes, filter units, culture
	dishes) are disposed of in biohazardous waste for decontamination off-site.
	Liquid waste will be decontaminated with a 1:10 dilution of bleach and poured down the drain.
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	Employees will place used needles, scalpels, and other sharps directly into a labeled, puncture-proof sharps
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	from the syringes.
	Employees with increased risk (broken skin, immunocompromised) should avoid working with potentially
	infectious materials.
	During transport, samples will be triple packed, meaning a leak-proof, sealed, inner container, a leak-proof,
	sealed secondary container such as a Ziploc bag, and a sturdy outer container such as a cooler. The container
	shall be delivered directly from the point of pick-up to its delivery location, the site of manipulation, in the PI's
	lab. It will not be handed off to another individual for co-delivery, it will not be left in any location except at the
_	lab and handed to the PI's lab directly.
	Any human specimen samples remaining unused, or materials that have a chance of having been exposed to and
	carrying viable pathogens, must be placed in a sealable container and the outside surface decontaminated with
	70% ethanol inside of the biosafety cabinet before the container can be removed and disposed of in a biological
	waste container. Any sharps bins containing any such hazards must have any openings covered and/or sealed
	prior to removal from the biosafety cabinet, prior to their disposal in a biohazardous bin.
	Part C: Personal Protective Equipment
	When there is a potential for occupational exposure to infectious agents, protective clothing and devices must
_	be used.
	When there is ongoing work in the lab, all individuals present in the lab must wear protective clothing and
	devices, such as safety glasses.
	In general, gloves will be worn when employees have the potential for direct or indirect contact with blood or
	other potentially infectious materials. This includes during handling of closed vessels containing tissue, blood, or
	culture medium that is contaminated with tissue or blood. Gloves will also be worn during all cleaning and
	decontamination procedures, and during handling of biomedical waste.
	Lab coats must be decontaminated before laundering or professionally cleaned.
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- Part A Engineering Controls
- Part B Work Practice Controls
- Part C Personal Protective Equipment

### Lab BBP SOPs

### Part D: Human Materials and Bloodborne Pathog

	We will apply the criteria recommended for biosafety level 2 (BSL-2) in terms of practices, safety equipment, and				
	facilities, and we will adopt the concept of "universal precautions", which assumes that all blood, body fluids,				
	tissues, secretions, and excretions from all persons are potentially infectious.				
1.1	Standard practices for occupational exposure to blood or other potentially infectious materials have been				
defined by the University of Miami in accordance with Federal Regulations (Blood-Borne Disease Standard,					
	Code of Federal Regulations 1910.1030).				
Bloodborne pathogens are pathogenic microorganisms that are present in human blood, or blood com					
	which can cause disease in humans. These pathogens include, but are not limited to, hepatitis B virus (HBV) and human immunodeficiency virus (HIV). HBV constitutes the primary occupational infection hazard to healthcare				
	workers, wherein approximately 18,000 cases occur annually. The risk of occupational infection with HIV is very				
	low, although the consequences are much more severe. Other bloodborne diseases that pose sporadic but				
	infrequent occupational infection risks include: hepatitis C, syphilis, malaria, babesiosis, brucellosis, relapsing				
	fever, human T-lymphotropic viruses, viral hemorrhagic fever agents, and arboviruses.				
	Specimens will come from otherwise healthy patients, not known to be infected with HBV, HCV, HIV, herpes, or				
_	any other highly contagious pathogen.				
ſ	Part E: Exposure, Spill, and Emergency				
	In the event of an exposure, research staff will use sink/eyewash/safety shower located in room for 15				
_	minutes.				
	Spills and accidents that result in exposure are immediately reported to the Employee Health Office, the				
	Biosafety Office, the IBC (if material is used on a recombinant DNA project), and the PI, who will arrange for the				
	appropriate medical evaluation and follow-up. Failure to report incidents will result in suspension of protocols.				
	<ul> <li>EHS Office: 305-243-3267; after business hours: 305-299-4684</li> </ul>				
1	Employees who experience exposures to potentially infectious materials or agents must prepare an				
	Injury/Exposure Intake Form and submit it to Employee Health.				
11.1	All spills shall be immediately contained and cleaned up by appropriately trained individuals. The EHS Biosafety				
1.1	All spills shall be immediately contained and cleaned up by appropriately trained individuals. The EHS Biosafety Office and IBC (when applicable) will be notified of the spill immediately to determine whether it can be cleaned				
1.1					
	Office and IBC (when applicable) will be notified of the spill immediately to determine whether it can be cleaned				
	Office and IBC (when applicable) will be notified of the spill immediately to determine whether it can be cleaned by lab staff or if professional services are needed.				
	Office and IBC (when applicable) will be notified of the spill immediately to determine whether it can be cleaned by lab staff or if professional services are needed. • EHS Biosafety Office: 305-243-3400				
	Office and IBC (when applicable) will be notified of the spill immediately to determine whether it can be cleaned by lab staff or if professional services are needed. • EHS Biosafety Office: 305-243-3400 In the event of a spill in the biosafety cabinet, the BSC will be left on to mitigate aerosol creation. Part F: Special Use Standard Operating Procedures				
	Office and IBC (when applicable) will be notified of the spill immediately to determine whether it can be cleaned by lab staff or if professional services are needed. • EHS Biosafety Office: 305-243-3400 In the event of a spill in the biosafety cabinet, the BSC will be left on to mitigate aerosol creation. Part F: Special Use Standard Operating Procedures				
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	Office and IBC (when applicable) will be notified of the spill immediately to determine whether it can be cleaned by lab staff or if professional services are needed.            EHS Biosafety Office: 305-243-3400             In the event of a spill in the biosafety cabinet, the BSC will be left on to mitigate aerosol creation.             Part F: Special Use Standard Operating Procedures             Recapping of needles is sometimes needed for procedures in this lab: Explain why and when it's needed and the techniques and/or engineering controls used to mitigate recapping needle-stick risks.             Use of N55 respirators are required for this lab: Explain why ann N95 is necessary, when and where they're				

- Part A Engineering Controls
- Part B Work Practice Controls
- Part C Personal Protective Equipment
- Part D Human Materials (BBPs)

## Lab Emergency Response SOPs

### Part D: Human Materials and Bloodborne Pathogen

	Part D: Human Materials and Biooddorne Partiogens					
	We will apply the criteria recommended for biosafety level 2 (BSL-2) in terms of practices, safety equipment, and					
	facilities, and we will adopt the concept of "universal precautions", which assumes that all blood, body fluids,					
	tissues, secretions, and excretions from all persons are potentially infectious.					
	Standard practices for occupational exposure to blood or other potentially infectious materials have been					
	defined by the University of Miami in accordance with Federal Regulations (Blood-Borne Disease Standard, 29					
	Code of Federal Regulations 1910.1030).					
	Bloodborne pathogens are pathogenic microorganisms that are present in human blood, or blood components,					
	which can cause disease in humans. These pathogens include, but are not limited to, hepatitis B virus (HBV) and					
	human immunodeficiency virus (HIV). HBV constitutes the primary occupational infection hazard to healthcare					
	workers, wherein approximately 18,000 cases occur annually. The risk of occupational infection with HIV is very					
	low, although the consequences are much more severe. Other bloodborne diseases that pose sporadic but					
	infrequent occupational infection risks include: hepatitis C, syphilis, malaria, babesiosis, brucellosis, relapsing					
	fever, human T-lymphotropic viruses, viral hemorrhagic fever agents, and arboviruses.					
	Specimens will come from otherwise healthy patients, not known to be infected with HBV, HCV, HIV, herpes, or					
	any other highly contagious pathogen.					
_	Part E: Exposure, Spill, and Emergency					
	In the event of an exposure, research staff will use sink/eyewash/safety shower located in room for 15					
	minutes.					
100	Spills and accidents that result in exposure are immediately reported to the Employee Health Office, the					
	Biosafety Office, the IBC (if material is used on a recombinant DNA project), and the PI, who will arrange for the					
	appropriate medical evaluation and follow-up. Failure to report incidents will result in suspension of protocols.					
_	<ul> <li>EHS Office: 305-243-3267; after business hours: 305-299-4684</li> </ul>					
	Employees who experience exposures to potentially infectious materials or agents must prepare an					
_	Injury/Exposure Intake Form and submit it to Employee Health.					
	All spills shall be immediately contained and cleaned up by appropriately trained individuals. The EHS Biosafety					
	Office and IBC (when applicable) will be notified of the spill immediately to determine whether it can be cleaned					
	by lab staff or if professional services are needed.					
	EHS Biosafety Office: 305-243-3400					
	In the event of a spill in the biosafety cabinet, the BSC will be left on to mitigate aerosol creation.					
	Part F: Special Use Standard Operating Procedures					
1.0	Recapping of needles is sometimes needed for procedures in this lab: Explain why and when it's needed and the					
	techniques and/or engineering controls used to mitigate recapping needle-stick risks.					
	Use of N95 respirators are required for this lab: Explain why an N95 is necessary, when and where they're					
	required, and the need for annual respiratory protection program enrollment.					
1.1	Additional special procedures: Detail					

- Part A Engineering Controls
- Part B Work Practice Controls
- Part C Personal Protective Equipment
- Part D Human Materials (BBPs)
- Part E Exposure, Spill, & Emergency

### Other Critical SOPs

### Part D: Human Materials and Bloodborne Pathoge

	Part D: Human Materials and Bloodborne Pathogens				
	We will apply the criteria recommended for biosafety level 2 (BSL-2) in terms of practices, safety equipment, and	1			
	facilities, and we will adopt the concept of "universal precautions", which assumes that all blood, body fluids,				
	tissues, secretions, and excretions from all persons are potentially infectious.				
	Standard practices for occupational exposure to blood or other potentially infectious materials have been				
	defined by the University of Miami in accordance with Federal Regulations (Blood-Borne Disease Standard, 29				
	Code of Federal Regulations 1910.1030).				
	Bloodborne pathogens are pathogenic microorganisms that are present in human blood, or blood components,				
	which can cause disease in humans. These pathogens include, but are not limited to, hepatitis B virus (HBV) and				
	human immunodeficiency virus (HIV). HBV constitutes the primary occupational infection hazard to healthcare				
	workers, wherein approximately 18,000 cases occur annually. The risk of occupational infection with HIV is very				
	low, although the consequences are much more severe. Other bloodborne diseases that pose sporadic but				
	infrequent occupational infection risks include: hepatitis C, syphilis, malaria, babesiosis, brucellosis, relapsing				
	fever, human T-lymphotropic viruses, viral hemorrhagic fever agents, and arboviruses.				
1	Specimens will come from otherwise healthy patients, not known to be infected with HBV, HCV, HIV, herpes, or	1			
	any other highly contagious pathogen.				
	Part E: Exposure, Spill, and Emergency	1			
	In the event of an exposure, research staff will use sink/eyewash/safety shower located in room for 15	1			
	minutes.				
1.1	Spills and accidents that result in exposure are immediately reported to the Employee Health Office, the	1			
	Biosafety Office, the IBC (if material is used on a recombinant DNA project), and the PI, who will arrange for the				
	appropriate medical evaluation and follow-up. Failure to report incidents will result in suspension of protocols.				
	<ul> <li>EHS Office: 305-243-3267; after business hours: 305-299-4684</li> </ul>				
	Employees who experience exposures to potentially infectious materials or agents must prepare an	1			
_	Injury/Exposure Intake Form and submit it to Employee Health.				
	All spills shall be immediately contained and cleaned up by appropriately trained individuals. The EHS Biosafety	1			
_	Office and IBC (when applicable) will be notified of the spill immediately to determine whether it can be cleaned				
	by lab staff or if professional services are needed.				
	EHS Biosafety Office: 305-243-3400				
	in the event of a spill in the biosafety cabinet, the BSC will be left on to mitigate aerosol creation.	1			
	Part F: Special Use Standard Operating Procedures	1			
	Recapping of needles is sometimes needed for procedures in this lab: Explain why and when it's needed and the	1			
_	techniques and/or engineering controls used to mitigate recapping needle-stick risks.				
	Use of N95 respirators are required for this lab: Explain why an N95 is necessary, when and where they're	1			
	required, and the need for annual respiratory protection program enrollment.				
	Additional special procedures: Detail	h			
	Radional Special procedures, peran	1.			

- Part A Engineering Controls
- Part B Work Practice Controls
- Part C Personal Protective Equipment
- Part D Human Materials (BBPs)
- Part E Exposure, Spill, & Emergency
- Part F Special Use SOPs
  - Additional boxes (if needed)

### Screening & Acknowledgement

### Biological Hygiene Plan

### PI Last Name Lab

- This form is both a review tool to assess/develop the safety practices of the lab, as well as a biological hygiene
  plan outlining some of the safety standards and procedures associated with the lab for lab staff review.
- Please upload a copy into the biological registration documents section at the bottom of your Biological Registration submission.

Section 1: Administration								
Principle Investigator:						PI Phone:		
PI Email:								
Lab/Safety Manager:					N	Manager Phone:		
Manager Email:								
Biosafety Cabinets in Use			BSC Type:	N/A		Certification Dat	te	
BSC Room Location(s)			·			Expiration Date	2	

	Section 2: Training Requirements for Lab					
Che	ck each box that is applicable	Required Training for Lab				
	<ol> <li>Infectious or otherwise risk group 2 agents</li> </ol>	Biosafety				
	2. Human source materials	Bloodborne Pathogens				
	3. Genetically modified organisms or synthetic nucleic acid molecules	Recombinant DNA				
	<ol><li>Biological materials/specimens shipped to another facility.</li></ol>	Shipping of Dangerous Goods				
	<ul> <li>Specify designated shipper(s):</li> </ul>	Shipping of Biological Materials				

Section 3: Hazard Communication						
Type of Material Used/Stored by Lab	Specify Genus Species or Disease within Specimen					
Provide an overview of the lab and how these biological materials function to serve the aims of the research.						

Section 4: Risk Assessment	
What are the possible transmission/exposure routes of the materials used in the lab? (ie. Inhalation, blood	borne, etc.)
List the signs and symptoms of exposure to these materials:	
bis the signs and symptoms of exposure to these materials.	
Assess the exposure risks associated with the procedures employed in this lab. How are these risks mitigate	ed?
How would exposures to these hazards be handled/treated?	
What disinfectants are used for agent inactivation? If applicable, what disinfectants are used in the BSC?	
If applicable, specify how materials are being transported between facilities and/or shipped to other faciliti	0.51
In applicable, specify now materials are being transported between facilities and/or simpped to other facilitie	125.
List the PPE requirements for researchers in this lab:	
Gloves Safety Glasses Lab Coat Face Shield Disposable Gown N95 Respirator Other(s): List	
Revision Date: 07-12-21	Page 1 5

### tion 5: Hygiene

tion 5: Hygiene Plan
below and check/modify as appropriate for adoption by your lab.
t A: Engineering Controls
requiring a key or card access to gain entry.
e room will be limited to only that which is unavoidable.
n while active work on this project is ongoing.
aterials will always be performed in the biosafety cabinet(s) listed.
imize the creation of aerosols, and that which is unavoidable must
I work involved in the manipulation of the biohazardous material.
r visually labeled so as to prevent work in them.
r materials carrying viable pathogens is allowed under any
out in the biosafety cabinet.
cleaned with disinfectant before and after use.
B: Work Practice Controls
mediately after contact with potentially infectious materials, d before exiting the lab.
drinking; smoking; application of cosmetics; handling of contact
tially infectious materials (e.g., pipettes, filter units, culture
for decontamination off-site.
10 dilution of bleach and poured down the drain.
ice per day, and after any spill of viable material.
y waste will be labeled, leak-proof, and closeable.
nd other sharps directly into a labeled, puncture-proof sharps any effort made to recap by hand, destroy or remove needles
nmunocompromised) should avoid working with potentially
d, meaning a leak-proof, sealed, inner container, a leak-proof,
ag, and a sturdy outer container such as a cooler. The container
ck-up to its delivery location, the site of manipulation, in the PI's
idual for co-delivery, it will not be left in any location except at the
sed, or materials that have a chance of having been exposed to and
a sealable container and the outside surface decontaminated with
fore the container can be removed and disposed of in a biological
any such hazards must have any openings covered and/or sealed
rior to their disposal in a biohazardous bin.
ersonal Protective Equipment
posure to infectious agents, protective clothing and devices must
ividuals present in the lab must wear protective clothing and
es have the potential for direct or indirect contact with blood or
cludes during handling of closed vessels containing tissue, blood, or
sue or blood. Gloves will also be worn during all cleaning and
dling of biomedical waste.
indering or professionally cleaned.
Date: 07-12-21 Page 2 5

### SECTION 6: SELECT AGENTS ASSESSMENT

 The following biological agents and toxins have been determined to have the potential to pose a severe threat to both human and animal health, to plant health, or to animal and plant products. An attenuated strain of a select agent or an inactive form of a select toxin may be excluded from the requirements of the Select Agent Regulations. Here is a list of <u>excluded agents and toxins</u>.

2.1	Agent or Toxin Actively Used By Or Stored In La	b (check all that apply)
	HHS SELECT AGENTS AND TOXINS	OVERLAP SELECT AGENTS AND TOXINS
	Abrin	Bacillus anthracis
	Bacillus cereus Biovar anthracis	Bacillus anthracis Pasteur strain
	Botulinum neurotoxins	Brucella abortus
	Botulinum neurotoxin producing species of	Brucella melitensis
	Clostridium	Brucella suis
	Conotoxins (Short, paralytic alpha	Burkholderia mallei
	conotoxins containing the following amino	Burkholderia pseudomallei
	acid sequence X1CCX2PACGX3X4X5X6CX7)	Hendra virus
	Coxiella burnetii	Nipah virus
	Crimean-Congo haemorrhagic fever virus	Rift Valley fever virus
	Diacetoxyscirpenol	Venezuelan equine encephalitis virus
	Eastern Equine Encephalitis virus	
	Ebola virus	USDA SELECT AGENTS AND TOXINS
	Francisella tularensis	African horse sickness virus
	Lassa fever virus	African swine fever virus
	Lujo virus	Avian influenza virus
	Marburg virus	Classical swine fever virus
	Monkeypox virus	Foot-and-mouth disease virus
	Reconstructed replication competent	Goat pox virus
	forms of the 1918 pandemic influenza virus	Lumpy skin disease virus
	containing any portion of the coding regions of	Mycoplasma capricolum
	all eight gene segments (Reconstructed 1918	Mycoplasma mycoides
	Influenza virus)	Newcastle disease virus
	Ricin	Peste des petits ruminants virus
	Rickettsia prowazekii	Rinderpest virus
	SARS-associated coronavirus (SARS-CoV)	Sheep pox virus
	Saxitoxin	Swine vesicular disease virus
	South American Haemorrhagic Fever	
	viruses:	USDA PLANT PROTECTION AND QUARANTINE (PPQ) SELECT AGENTS
	Chapare Chapare	AND TOXINS
	Guanarito	Coniothyrium glycines (formerly Phoma glycinicola and
	Junin	Pyrenochaeta glycines)
	Machupo	Peronosclerospora philippinensis
	Sabia Sabia	(Peronosclerospora sacchari)
	Staphylococcal enterotoxins (subtypes	Ralstonia solanacearum
	A,B,C,D,E)	Rathayibacter toxicus
	T-2 toxin	Sclerophthora rayssiae
	Tetrodotoxin	Synchytrium endobioticum
	Tick-borne encephalitis complex (flavi)	Xanthomonas oryzae
	viruses:	
	Far Eastern subtype	
	Siberian subtype	NONE NONE
	Kyasanur Forest disease virus	
	Omsk hemorrhagic fever virus	
	Variola major virus (Smallpox virus)	
	Variola minor virus (Alastrim)	

### SESSMENT

poses can be utilized for both

inces research that, based on current products, or technologies that could be to public health and safety, agricultural

### rsight of Life Sciences Dual Use Research nment. On September 24, 2014, the <u>US</u> <u>Concern</u> was released to establish the Government considers these two

ojects at the University of Miami, nd toxins and categories of experiments. eemed potential DURC.

5 listed agents.

enza virus

Clostridium botulinum

### can be reasonably anticipated to

ist the agent or toxin without clinical

useful prophylactic or therapeutic de detection methodologies. ce its ability to be disseminated.

ted in Question 6.2 of this form.

### ces, containment equipment, personal level applicable to this project. I will s document and will follow these

Revision Date: 07-12-21

Yersinia pestis

### Screening: Select Agents

### SECTION 6: SELECT AGENTS ASSE

numan and animal health, to plant health, or to animal and plant products. An attenuated strain of a select agent or an inactive form of a select toxin may be excluded from the requirements of the Select Agent Regulations. Here is a list of excluded agents and toxins

2.1	Agent or Toxin Actively Used By Or Stored In La	eck all that apply)	
	HHS SELECT AGENTS AND TOXINS	ERLAP SELECT AGENTS AND TOXINS	
	Abrin	Bacillus anthracis	
	Bacillus cereus Biovar anthracis	Bacillus anthracis Pasteur strain	
	Botulinum neurotoxins	Brucella abortus	
	Botulinum neurotoxin producing species of	Brucella melitensis	
	Clostridium	Brucella suis	
	Conotoxins (Short, paralytic alpha	Burkholderia mallei	
	conotoxins containing the following amino	Burkholderia pseudomallei	
	acid sequence X1CCX2PACGX3X4X5X6CX7)	Hendra virus	
	Coxiella burnetii	Nipah virus	
	Crimean-Congo haemorrhagic fever virus	Rift Valley fever virus	
	Diacetoxyscirpenol	Venezuelan equine encephalitis virus	
	Eastern Equine Encephalitis virus		
	Ebola virus	DA SELECT AGENTS AND TOXINS	
	Francisella tularensis	African horse sickness virus	
	Lassa fever virus	African swine fever virus Avian influenza virus	
	Lujo virus		
	Marburg virus	Classical swine fever virus Foot-and-mouth disease virus	
	Monkeypox virus	Goat pox virus	
	Reconstructed replication competent forms of the 1918 pandemic influenza virus		
	containing any portion of the coding regions of	Lumpy skin disease virus Mycoplasma capricolum	
	all eight gene segments (Reconstructed 1918	Mycoplasma mycoides	
	Influenza virus)	Newcastle disease virus	
	Ricin	Peste des petits ruminants virus	
	Rickettsia prowazekii	Rinderpest virus	
	SARS-associated coronavirus (SARS-CoV)	Sheep pox virus	
	Saxitoxin	Swine vesicular disease virus	
	South American Haemorrhagic Fever		
	viruses:	DA PLANT PROTECTION AND QUARANTINE (PPQ) SELE	CT AGENTS
	Chapare Chapare	D TOXINS	
	Guanarito	Coniothyrium glycines (formerly Phoma glycinicola and	
	Junin	enochaeta glycines)	
	Machupo Machupo	Peronosclerospora philippinensis	
	Sabia 🔲	ronosclerospora sacchari)	
	Staphylococcal enterotoxins (subtypes	Ralstonia solanacearum	
	<u>A,B</u> ,C,D,E)	Rathayibacter toxicus	
	T-2 toxin	Sclerophthora rayssiae	
	Tetrodotoxin	Synchytrium endobioticum	
	Tick-borne encephalitis complex (flavi)	Xanthomonas oryzae	
	viruses:		
	Far Eastern subtype		
	Siberian subtype	NONE	
	Kyasanur Forest disease virus		
	Omsk hemorrhagic fever virus		
	🔜 Variola major virus (Smallpox virus)		

• Section 1 – Administration

- Section 2 Training Requirements
- Section 3 Hazard Communication
- Section 4 Risk Assessment
- Section 5 Hygiene Plan
- Section 6 Select Agents Assessment

Variola minor virus (Alastrim)

Page 4|5

### Screening: Dual Use Research

### SECTION 7: DUAL USE RESEARCH OF CONCERN (DURC) ASSESSMENT

- Despite its value and benefits, certain types of research conducted for legitimate purposes can be utilized for both benevolent and harmful purposes. Such research is called Dual Use Research (DUR)
- Dual Use Research of Concern (DURC) is a subset of DUR and is defined as "life sciences research that, based on current understanding, can be reasonably anticipated to provide knowledge, information, products, or technologies that could be directly misapplied to pose a significant threat with broad potential consequences to public health and safety, agricultural crops and other plants, animals, the environment, materiel, or national security."
- On March 29, 2012, the US Government released the US Government Policy for Oversight of Life Sciences Dual Use Research of Concern to establish the requirements for the oversight of DURC by the US Government. On September 24, 2014, the US Government Policy for Institutional Oversight of Life Sciences Dual Use Research of Concern was released to establish the requirements for institutional (i.e., non-US Government) oversight of DURC. The US Government considers these two policies to be complementary.
- These definitions could potentially encompass a number of life sciences research projects at the University of Miami, however, the current scope of the policy has been limited to the following agents and toxins and categories of experiments. Research must involve both a listed agent/toxin and category of experiment to be deemed potential DURC.

### 1.1 Agent or Toxin Actively Used By Or Stored In Lab (check all that apply)

 rigent of fourier end of or otorea in Ea	~ (c	neek un chuc uppijj	
Verify if this project directly involves non-attenue	nted	forms of 1 or more of the 15 listed agents.	
Avian Influenza (highly pathogenic	Marburg virus		
Bacillus anthracis		Reconstructed 1918 influenza virus	
Botulinum neurotoxin (any quantity)		Rinderpest virus	
Burkholderia mallei		Toxin producing strains of Clostridium botulinum	
🔲 Burkholderia pseudomallei		Variola major virus	
Ebola virus		Variola minor virus	
Foot-and-mouth disease virus		Yersinia pestis	
Erancisella tularensis		NONE	

2.2 Experimental Effects (check all that apply)

Indicate whether the research project indicated above produces, aims or can be reasonably anticipated to produce any of the following experimental effects.

- Enhances the harmful consequences of the agent or toxin.
  Disrupts the immunity or the effectiveness of an immunization against the agent or toxin without clinical or agricultural justification.
- Confers to the agent or toxin resistance to clinically or agriculturally useful prophylactic or therapeutic interventions against the agent or toxin or facilitates its ability to evade detection methodologies.
- Alters properties of the agent or toxin in a manner that would enhance its ability to be disseminated.

Alters the host range or tropism of the agent or toxin.

Enhances the susceptibility of a host population to the agent or toxin.

Generates or reconstitutes an eradicated or extinct agent or toxin listed in Question 6.2 of this form. **NONE** 

If you checked any of the above experimental effects, please explain:

### Section 8: Acknowledgement and E-Signature

I have read and am familiar with the standard and special microbiological practices, containment equipment, personal protective equipment, and laboratory facilities recommended for the biosafety level applicable to this project. I will ensure that all faculty, staff, and students working on this project will review this document and will follow these recommendations as a condition of approval of this project.

Type Your Full Name Date Completed

- Section 1 Administration
- Section 2 Training Requirements
- Section 3 Hazard Communication
- Section 4 Risk Assessment
- Section 5 Hygiene Plan
- Section 6 Select Agents Assessment
- Section 7 DURC Assessment

## Confirm Lab Policy

### SECTION 7: DUAL USE RESEARCH OF CONCERN (DURC) ASSESSMENT

- · Despite its value and benefits, certain types of research conducted for legitimate purposes can be utilized for both benevolent and harmful purposes. Such research is called Dual Use Research (DUR).
- Dual Use Research of Concern (DURC) is a subset of DUR and is defined as "life sciences research that, based on current understanding, can be reasonably anticipated to provide knowledge, information, products, or technologies that could be directly misapplied to pose a significant threat with broad potential consequences to public health and safety, agricultural crops and other plants, animals, the environment, materiel, or national security."
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- These definitions could potentially encompass a number of life sciences research projects at the University of Miami, however, the current scope of the policy has been limited to the following agents and toxins and categories of experiments. Research must involve both a listed agent/toxin and category of experiment to be deemed potential DURC.

### 1.1 Agent or Toxin Actively Used By Or Stored In Lab (check all that apply)

Verify if this project directly involves non-attenua	ted forms of 1 or more of the 15 listed agents.
Avian Influenza (highly pathogenic	Marburg virus
Bacillus anthracis	Reconstructed 1918 influenza virus
Botulinum neurotoxin (any quantity)	Rinderpest virus
🔲 Burkholderia mallei	Toxin producing strains of Clostridium botulinum
🔲 Burkholderia pseudomallei	🔲 Variola major virus
Ebola virus	Variola minor virus
Foot-and-mouth disease virus	Yersinia pestis
Francisella tularensis	NONE

2.2 Experimental Effects (check all that apply)

Indicate whether the research project indicated above produces, aims or can be reasonably anticipated to produce any of the following experimental effects.

- Enhances the harmful consequences of the agent or toxin. Disrupts the immunity or the effectiveness of an immunization against the agent or toxin without clinical or agricultural justification.
- Confers to the agent or toxin resistance to clinically or agriculturally useful prophylactic or therapeutic interventions against the agent or toxin or facilitates its ability to evade detection methodologies.
- Alters properties of the agent or toxin in a manner that would enhance its ability to be disseminated.

Alters the host range or tropism of the agent or toxin.

Enhances the susceptibility of a host population to the agent or toxin.

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If you checked any of the above experimental effects, please explain:

### Section 8: Acknowledgement and E-Signature

I have read and am familiar with the standard and special microbiological practices, containment equipment, personal protective equipment, and laboratory facilities recommended for the biosafety level applicable to this project. I will ensure that all faculty, staff, and students working on this project will review this document and will follow these recommendations as a condition of approval of this project.

Type Your Full Name Date Completed

- Section 1 Administration
- Section 2 Training Requirements
- Section 3 Hazard Communication
- Section 4 Risk Assessment
- Section 5 Hygiene Plan
- Section 6 Select Agents Assessment
- Section 7 DURC Assessment
- Section 8 Acknowledgement / Sign

## The Small Fine Print

### **Biological Hygiene Plan**

### PI Last Name Lab

- This form is both a review tool to assess/develop the safety practices of the lab, as well as a biological hygiene
  plan outlining some of the safety standards and procedures associated with the lab for lab staff review.
- Please upload a copy into the biological registration documents section at the bottom of your Biological
  Registration submission.

Section 1: Administration										
Principle Investigator:							PI Phone:			
PI Email:										
Lab/Safety Manager:							Manager Phone:			
Manager Email:										
Biosafety Cabinets in U	se			BSC Type:	N/A		Certification Dat	te		
BSC Room Location(s)							Expiration Date	2		

Section 2: Training Requirements for Lab						
Check each box that is applicable	Required Training for Lab					
<ol> <li>Infectious or otherwise risk group 2 agents</li> </ol>	Biosafety					
2. Human source materials	Bloodborne Pathogens					
<ol> <li>Genetically modified organisms or synthetic nucleic acid molecules</li> </ol>	Recombinant DNA					
4. Biological materials/specimens shipped to another facility.	Shipping of Dangerous Goods					
<ul> <li>Specify designated shipper(s):</li> </ul>	Shipping of Biological Materials					

Section	3: Hazard Communication
Type of Material Used/Stored by Lab	Specify Genus Species or Disease within Specimen
Provide an overview of the lab and how these bio	logical materials function to serve the aims of the research.

Section 4: Risk Assessment	
What are the possible transmission/exposure routes of the materials used in the lab? (in	e. Inhalation, bloodborne, etc
List the signs and symptoms of exposure to these materials:	
Assess the exposure risks associated with the procedures employed in this lab. How are	these risks mitigated?
How would exposures to these hazards be handled/treated?	
What disinfectants are used for agent inactivation? If applicable, what disinfectants are	used in the BSC?
If applicable, specify how materials are being transported between facilities and/or ship	ped to other facilities:
List the PPE requirements for researchers in this lab:	
Gloves Safety Glasses Lab Coat Face Shield Disposable Gown	N95 Respirator
Revision Date: 07-12-21	Page 1

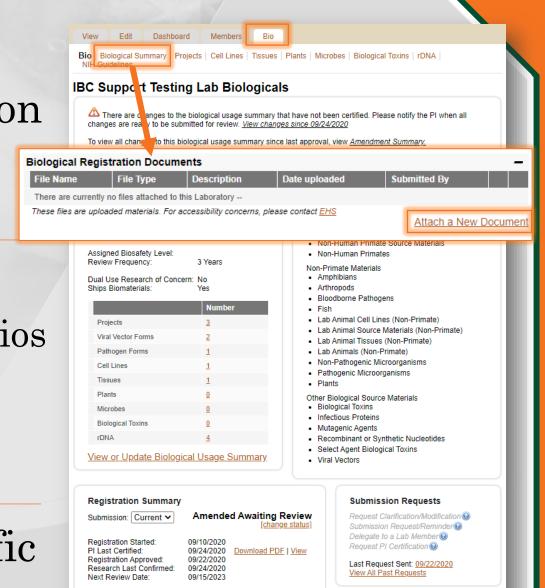
- Revision Date: 07-12-2021
- Updates coming this summer
- Feedback/suggestions welcome

### Parking Completed Forms

- Submit *Biological Hygiene Plan* under the *Biological Registration* on BioRAFT (SciShield)
  - Or send to biosafety@miami.edu
- Biological Registrations
  Required for all labs working with bios

  Ie, BHP req'd for all bio labs

  Provides overview of lab work
  rDNA must go to IBC for review
- Umbrella vs Protocol/Agent Specific



View Registration History and Download PDFs

## Yeah... But **why** the Biological Hygiene Plan?

### Let's Recap – What's Captured

- Section 1 Lab Admin & Emergency Contacts
- Section 2 Training Required of Lab Staff
- Section 3 Agent Specific Hazard Communication
- Section 4 Agent Specific Risk Assessment
- Section 5 Lab Specific Hygiene Plan
- Sections 6 & 7 Highly Regulated Materials Screening
- Section 8 Acknowledgement & Sign

## Why We Should Do It

- 1. Ensures we know who the emergency contacts are and how to get ahold of them 24/7
- 2. Ensures all lab personnel know what training is req'd of them
- 3. Serves as agent specific training to lab personnel
- 4. Ensures lab personnel understand the risks in the lab and how to mitigate them
- 5. Meets universal standard for hygiene plans
- 6. Screens for materials that could require additional oversight and be a risk to the University
- 7. Confirms lab understands and has planned accordingly for hazardous work
- 8. Gives EHS Biosafety quick opportunity to provide safety guidance
- 9. Best practice, always prepared for regulatory inspections

## Yeah But Hit Me With a Citation

### Biosafety in Microbiological and Biomedical Laboratories (BMBL) For BSL-1 – BSL-4

A safety manual specific to the facility is prepared or adopted in consultation with the facility director and appropriate safety professionals. The safety manual is available, accessible, and periodically reviewed and updated, as necessary.

- a. The safety manual contains sufficient information to describe the biosafety and containment procedures for the organisms and biological materials in use, appropriate agent-specific decontamination methods, and the work performed.
- b. The safety manual contains or references protocols for emergency situations, including exposures, medical emergencies, facility malfunctions, and other potential emergencies. Training in emergency response procedures is provided to emergency response personnel and other responsible staff according to institutional policies.

Biosafety in Microbiological and Biomedical Laboratories

6th Edition

Centers for Disease Control and Prevention National Institutes of Health

### https://www.cdc.gov/labs/bmbl/index.html

# Wrap Up

## **Biosafety Website**

### **Biological Safety**

### **Biological Safety**

Default Folder

**Biohazardous Emergencies** 

**Biological Protocol Review** 

Shipping of Dangerous Goods

Laboratory Inspections

Equipment

Frequently Asked Ouestions

Resources

Fire Safety

Hazardous Materials

Industrial Hygiene and Air Quality

Laboratory Safety

Laser Safety

Safety Data Sheets

Radiation Control

Biological Safety

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**Biohazardous Emergencies** 

General Office Contact

biosafety@miami.edu 305-243-3269

We offer a variety of services to our campus researchers and clinicians as outlined in the links below. Please reach out to us if there is anything further we can do for your lab!





Equipment









**Occupational Health** Program





**Frequently Asked** Questions



### ehs.miami.edu/biosafety



Shipments

Training

Inspections



Biosafety Manager Shane Gillooly

786-797-0387

**Biosafety Specialist** 

Melanie Peapell 305-389-9931

Biosafety Specialist

Daniel Nunez



305-901-9327

## Bio Hygiene Plan Form Online

ENVIRONMENTAL HEALTH AND SAFETY			Search B	Q	
		Services	Resources	Contact Us	About Us
FACILITIES OPERATIONS AND PLANNING > HOME > SERVI					AAA 🖪
ROLLINES OPERATIONS AND PLANNING 7 HOME 7 SERVI	UES / BIOLOGICAL SAFETT / KESOURUES				
Resources					
Default Folder					
	Manuals & Guidance				
Biohazardous Emergencies	Biosafety Manual				
Training	<ul> <li>Lab Safety Manual</li> <li>Hurricane Lab Preparation Checklist</li> </ul>				
	<ul> <li>Employee Workday Injury-Illness Reporting Ir</li> </ul>	nstructions			
Biological Protocol Review	Spill Clean-Up Procedure SOPs				
Shipping of Dangerous Goods	<ul> <li>BioRAFT Biological Registration Guidance</li> </ul>				
Laboratory Inspections					
	Documents & Templates				
Equipment	Biological Hygiene Plan				
Frequently Asked Questions	Biological Ancillary Review Assessment (BAR)	A) Form			
Trequency Joked Questions	Lab Inspection Checklist				
Resources	Exposure Injury Intake Form				

- Exposure Injury Intake Form Researcher Incident Report Form
- Chemical Inventory Template

F

Training

Nature of Shipment Document

### Postings

- Laboratory Emergency Procedures & SOPs
- BSL-2 Biohazard Door Sign
- Lab Safety Information & Emergency Contact Card
- Stop Wash Call Poster
- No Gloves on Doors Signs
- Biological Spill Response
- Biosafety Cabinets Tips & Spills
- Sharps Safety
- Gloves Dos and Donts
- Lab Waste Disposal Guide

### Biological Hygiene Plan

### Additional Resources

Biosafety Month 2023 Presentation

## October is Biosafety Month



- Biosafety Focus All Month
- Lunch & Learns
- Free Food
- Prizes
- Lab of the Year Awards

## Questions

- Shane Gillooly
  786-797-0387
  sxg1519@med.miami.edu
- Contact the Biosafety Office:
  305-243-3269
  biosafety@miami.edu
- Website
  - <u>http://ehs.miami.edu</u>