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| Animal Hazard Safety Evaluation - IACUC # | | | | | | |
| The Principal Investigator is responsible for informing all personnel handling animals of the hazards involved and precautions to be taken. The Principal Investigator is also responsible for updating the form in the case of changes in agent or experimental procedure. Hazardous agents to which LACU personnel may be exposed must be identified below. | | | | | | |
| **Principal Investigator:**  **Department:** | **Campus Phone:**  **901-448-** | | **Alternate Phone:** | | | **E-Mail:**  **@uthsc.edu** |
| **List Biohazardous Agents:**  C:\Users\rray3\Desktop\Biohazard.png  Administered via: | | **List Chemical Agents:**  Administered via: | | | | |
| **Infectious to humans (Y/N):** **Y** | | **Biosafety Level: ABSL-2** | | | **IBC #:** | |
| **Personal Protective Equipment (PPE): LACU required standard ABSL-2 PPE** | | | | | | |
| **Route of Excretion:** | | | | | | |
| **Precautions for Handling Live or Dead Animals:** **Standard ABSL-2 practices** | | | | | | |
| Animal Disposal: **bagged within BSC and disposal through normal waste stream** | | | | | | |
| **Bedding / Waste Disposal: Use BSC or change station to dump cage bedding, dispose of as hazardous waste through the SteriCycle waste stream.** | | | | | | |
| **Cage Decontamination:** **spray with SporKlenz when cages are removed from BSC.** | | | | | | |
| **Additional Precautions to Protect Personnel, Adjacent Research, and Environment:**   * Clean area where animals and biological agents are handled with SporKlenz * Cages will be labeled “Biohazard” by the PI. Label(s) will remain on the cage card for the duration of the study * Needles used for the injection will be disposed of in an approved sharps containers immediately following use and these containers will be disposed of into biological waste bins for incineration. * Microisolator cages must be used to house animals after infection. | | | | | | |
| **Study Location(s) - building and room number(s):** | | | | **Form reviewed/approved by: Ramesh Ray**  **Date reviewed/approved:**  **Contact: Biosafety (**[**rray3@uthsc.edu**](mailto:rray3@uthsc.edu)**) for approval.** | | |