Greetings from the BSO

Greetings from the Biosafety Office! We hope that you are enjoying the cooler weather and that the fall semester is treating you all well. As graduating students leave your lab at the end of the semester, please make an effort to update the “Project Personnel” section of your IBC protocols. Personnel updates can be made easily using the Protocol Modification Form which is available on the Biosafety webpage (http://compliance.vpr.okstate.edu/IBC/forms.aspx).

The next Institutional Biosafety Committee (IBC) meeting is scheduled for Wednesday, November 20th. Please submit protocols requiring full committee review by Wednesday, November 6th so that they may be reviewed at this meeting.

Please don’t hesitate to contact us with any comments, suggestions, or questions that you may have. We always try to be available to our researchers and we are happy to help in any way we can.

Safe Handling of Laboratory Sharps

We are not yet half-way through the semester and our office has already received multiple reports of injuries due to improper use of laboratory sharps. If you utilize sharps in your lab, please take a moment to review the following information and to retrain your students or other lab personnel on procedures for the safe handling of sharps.

Sharps that are commonly found in the lab include:

- Needles and syringes;
- Lancets;
- Scalpel or razor blades;
• Pasteur pipets;
• Microscope slides and coverslips; and
• Broken glassware.

Observe these rules when handling laboratory sharps:
• Perform all procedures involving sharps carefully and attentively.
• Needles must not be bent, sheared, broken, recapped, removed from disposable syringes, or otherwise manipulated by hand before disposal.
• Only needle-locking syringes or syringes with permanently affixed needles are to be used for injection/aspiration of infectious materials.
• Broken glassware and other sharps should only be picked up using mechanical means (i.e., dustpan and hand broom, tongs, forceps, etc.).
• Report all sharps injuries to the lab PI and the Biosafety Office.

**Reporting Incidents Involving Biohazardous Material**

It is the policy of the IBC that all incidents involving biohazardous material be reported to the Biosafety Office within 48 hours of occurrence. Such incidents may include, but are not limited to:

• Needlestick injuries with a needle that has been exposed to biohazardous material;
• Bites or scratches from animals infected with biohazardous materials;
• Other sharps injuries where the skin is broken and may be exposed to biohazardous materials;
• Inhalation of infectious aerosols;
• Lab personnel displaying symptoms of disease that may be caused by pathogens present in the lab; and
• Minor spills (i.e., less than 10 mL) of biohazardous material outside of primary containment (e.g., biosafety cabinet).
  - Note: Major spills (i.e., greater than 10 mL) that occur outside of primary containment must be reported to the Biosafety Office immediately.

Following the initial notification to the Biosafety Office, a Laboratory Incident Report (available from: [http://compliance.vpr.okstate.edu/IBC/forms.aspx](http://compliance.vpr.okstate.edu/IBC/forms.aspx)) must be completed and submitted within 1 week.
The biosafety office will not reprimand you for reporting incidents that occur within your lab. Incident reports allow our office to ensure that injured personnel receive proper medical treatment and allow the IBC to suggest work practices or specialized equipment that will allow you to conduct your research in the safest manner possible.

The IBC’s policy on incident reporting and the Laboratory Incident Report form are included at the end of this issue of the Biozone for your reference.

**Toxin Due Diligence Provision**

All research involving biological toxins must be reviewed and approved by the OSU IBC prior to initiation. However, work with the following select toxins is excluded from federal registration and regulation if the amount under the control of a PI does not exceed, at any time, the amounts indicated in the table below.

<table>
<thead>
<tr>
<th>HHS Toxins [42 CFR Part 73.3(d)(3)]</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Abrin</td>
<td>100 mg</td>
</tr>
<tr>
<td>Botulinum neurotoxins</td>
<td>0.5 mg</td>
</tr>
<tr>
<td>Short, paralytic alpha conotoxins</td>
<td>100 mg</td>
</tr>
<tr>
<td>Diacetoxyscirpenol (DAS)</td>
<td>1000 mg</td>
</tr>
<tr>
<td>Ricin</td>
<td>100 mg</td>
</tr>
<tr>
<td>Saxitoxin</td>
<td>100 mg</td>
</tr>
<tr>
<td>Staphylococcal enterotoxins (Subtypes A, B, C, D, &amp; E)</td>
<td>5 mg</td>
</tr>
<tr>
<td>T-2 toxin</td>
<td>1000 mg</td>
</tr>
<tr>
<td>Tetrodotoxin</td>
<td>100 mg</td>
</tr>
</tbody>
</table>

All OSU PIs working with or storing these toxins (even in exempt amounts) must register their work with the IBC, and conform to the University’s Toxin Due Diligence policy when transferring toxin to other researchers.

**Toxin Due Diligence Requirements**

All OSU PIs in possession of the select agent toxins listed above must maintain a record of all toxin transfers outside of their laboratory. This documentation must include:

- Name and contact information of the recipient;
- Toxin name and quantity transferred; and
- Knowledge of recipient’s legitimate need to handle or use the toxin.
Reporting Suspected Violations or Suspicious Activities

If an OSU PI detects a known or suspected violation of Federal law or becomes aware of suspicious activity related to a select agent toxin, he or she must immediately notify the OSU Responsible Official or an Alternate Responsible Official using the contact information below. These individuals will then contact the Federal Select Agent Program.

Stephen W.S. McKeever, Ph.D.
Vice President for Research and Technology Transfer
Responsible Official
203 Whitehurst Hall
Stephen.McKeever@okstate.edu
Office phone: (405) 744-6501

Steven O’Geary, Ph.D.
Assistant Vice President for Research Compliance
Alternate Responsible Official
218 Cordell North
Ogeary@okstate.edu
Office Phone: (405) 744-0405 or (405) 744-1676

Mindy James, Ph.D.
Biological Safety Officer
Alternate Responsible Official
220 Cordell North
Mindymc@okstate.edu
Office Phone: (405) 744-3203 or (405) 744-1676
1. POLICY
The Oklahoma State University Institutional Biosafety Committee (IBC) requires all laboratory biosafety incidents occurring in a BSL-2, ABSL-2, BSL-2P, ACL-2, BSL-3, ABSL-3, BSL-3P, ACL-3 be reported to the Biosafety Officer within 48 hours. A Laboratory Incident Report Form must be completed and submitted to the Office of University Research Compliance within one week. The form is available at: [http://compliance.vpr.okstate.edu/IBC/forms.aspx](http://compliance.vpr.okstate.edu/IBC/forms.aspx). The Employee Injury Report may be submitted in lieu of the Laboratory Incident Report Form if an employee is injured. The form is available at: [http://hr.okstate.edu/sites/default/files/docfiles/WCEmployeeInjuryReport.pdf](http://hr.okstate.edu/sites/default/files/docfiles/WCEmployeeInjuryReport.pdf).

2. SCOPE
This policy applies to all research laboratories and facilities falling within the purview of Oklahoma State University (Stillwater) Institutional Biosafety Committee.

3. RESPONSIBILITY
Principal Investigators and Laboratory/Facility Managers/Directors/Department Heads have a responsibility to adhere to this policy.

4. APPLICABLE REGULATIONS, GUIDELINES, & OSU POLICIES
- Oklahoma State University Biological Research Safety Plan
- Oklahoma State University Biosafety Policy
Report of Laboratory Biosafety Incident

Laboratory Supervisor: ___________________________ Department: ___________________________

Location of Incident: ___________________________ Date of Incident: ___________________________ Time: ___________

Employee(s) knowledgeable of the incident (name(s) and phone number(s):

Description of incident:

Was medical attention sought?  ☐ No  ☐ Yes, where: _____
  • If YES, describe:

Was the unit department head (or equivalent) notified?  ☐ No  ☐ Yes
  • If YES, when:

Was the Biological Safety Officer notified?  ☐ No  ☐ Yes
  • If YES, when:

Describe the employee/departmental/medical/biological safety officer actions.

Additional corrective measures taken or to be taken.

Describe policy or security failures contributing to the incident.

__________________________________________  ___________________________________________
Signature of Principal Investigator or Lab Supervisor  Signature of Department Head (or equivalent)

Printed Name: ___________________________  ___________________________

---

Incidents involving major spills must be reported to the Biological Safety Officer (BSO) (744-3203) immediately. All other incidents must be reported to the BSO within 48 hours. A copy of this incident report must be submitted to the Office of University Research Compliance, 219 Cordell North within 1 week of the incident.