**Nova Southeastern University**

**Biological Agents Incident Reporting Form**

 Revised 11/17

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| Protocol Number (assigned by IBC): |  |
| Name:  | Title:       | Today’s Date:  |
| Department:       | Phone #:       | Report Date: |
| Laboratory Room #:       | E-mail:       |
| Project Title:  |
| Funding Source:       |

The *NIH Guidelines for Research Involving Recombinant or Synthetic Nucleic Acid Molecules* (*NIH Guidelines*) states that "...any significant problems, violations of the *NIH Guidelines*, or any significant research-related accidents and illnesses" must be reported to NIH within 30 days. Certain types of incidents must be reported on a more expedited basis. Spills or accidents occurring in Biosafety Level (BL) 2 laboratories resulting in an overt exposure must be immediately reported to NIH. Spills or accidents occurring in high containment (BL3 or BL4) laboratories resulting in an overt or potential exposure must be immediately reported to NIH.

Completed reports must be sent to IBC@nova.edu

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| --- |
| 1. Does this incident involve research subject to the NIH Guidelines [ ]  Yes [ ]  No?
 |
| 2. Date of Incident:       |
| 1. Is this an NIH-funded project [ ]  Yes [ ]  No?

If yes, please provide the following information (if known)*NIH grant of contract number:**NIH funding institute or center:**NIH program officer (name, email address):* |
| 1. What was the nature of the incident?

[ ]  Failure to follow approved containment conditions[ ]  Failure to obtain IBC approval[ ]  Incomplete inactivation[ ]  Loss of containment[ ]  Loss of a transgenic animal[ ]  Personnel exposure[ ]  Spill[ ]  Other (please describe):       |
| 1. Did the Institutional Biosafety Committee (IBC) approve this research?
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| 1. What was the approved biosafety level of the research?
 |
| 1. What section(s) of the NIH Guidelines is the research subject to?
 |
| 1. Has a report of this incident been made to any of the below agencies?

[ ]  NIH [ ]  CDC [ ]  USDA [ ]  FDA [ ]  EPA[ ]  OSHA[ ]  Funding agency/sponsor[ ]  State or local Public Health Office[ ]  Law Enforcement[ ]  Other (please describe:       |
| 1. **Nature of recombinant or synthetic material involved in incident (strain, attenuation, etc.):**
 |

Please provide a narrative of the incident including a timeline of events. The incident should be described in sufficient detail to allow for an understanding of the nature and consequences of the incident. **Include the following information as applicable.**

A description of:

* The incident/violation location (e.g. laboratory biosafety level, vivarium, non-laboratory space)
* Who was involved in the incident/violation, including others present at the incident location?

Include gender and position titles (e.g., graduate student, post doc, animal care worker, facility maintenance worker)

* Actions taken immediately following the incident/violation, and by whom, to limit any health or environmental consequences of the event
* The training received by the individual(s) involved and the date(s) the training was conducted
* The institutional or laboratory standard operating procedures (SOPs) for the research and whether there was any deviation from these SOPS at the time of the incident/violation
* Any deviation from the IBC approved containment level or other IBC approval conditions at the time of the incident/violation
* The personal protective equipment in use at the time of the incident/violation
* The occupational health requirements for laboratory personnel involved in the research
* Any medical surveillance provided or recommended after the incident
* Any injury or illness associated with the incident
* Equipment failures

DESCRIPTION OF INCIDENT: (use additional space as necessary)

**Principal Investigator’s Agreement**

I acknowledge responsibility for this project, and I agree to fully comply with all pertinent NIH, CDC and NSU guidelines and policies. I assure that all faculty, staff and students involved in this project will be trained and qualified to carry out the research in a responsible manner in accordance with NIH, CDC and NSU policies and procedures.

**X**  **Date:**

Principal Investigator Signature

**Faculty Supervisor/ Sponsor** (if applicable)

I have reviewed and approved the scientific and ethical aspects of this research project. I agree to supervise all compliance aspects associated with it and adhere to all applicable CDC, NIH and NSU biosafety guidelines.

**X**  **Date:**

Faculty Sponsor Signature

**Please email completed form to IBC@nova.edu.**