Instructions for Biosafety Protocol Amendment

Research and Sponsored Programs 201J University Hall Wright State University Dayton, OH 45435 (937) 775-2425

Please use the attached amendment form for requesting a review and approval of changes to existing protocols involving the use of biohazardous agents or subject to the NIH Guidelines. This application should be used for all activities including research, teaching, and testing. The IBC requests the information in accordance with its charge. This information is required by the Occupational Safety and Health Administration's Occupational Exposure to Hazardous Chemicals in Laboratories Standard, its Bloodborne Pathogens Standard and/or the NIH Guidelines for Research Involving Recombinant DNA (rDNA) Molecules.

The application rules and procedures are as follows:

- Use the "Save As" function to save document on your disk.
- Please be thorough and complete all sections please type.
 - o Incomplete applications will be returned without review.
 - o Hand written applications will be returned without review.
- If you need more space, attach additional sheets.
- Obtain necessary signatures.
- Submit one (1) original application with original signatures to the IBC Facilitator.
- Submission deadlines will be strictly enforced. For a complete listing of these dates, please refer to the Office of Research and Sponsored Program's Web site at http://www.wright.edu/rsp/ or contact the IBC Facilitator as listed below.

For additional information or assistance in completing this form, please contact the Biosafety Officer in the Department of Environmental Health and Safety at 937-775-2623/4286 (voice/fax).

Submit completed application and direct administrative questions to:

Chris Piekkola, IBC Facilitator
Office of Research and Sponsored Programs
Room 201J, University Hall
Wright State University
Dayton, OH 45435
937-775-3332/3781 (voice/fax)
christine.piekkola@wright.edu

Note: The information provided may become publicly available under Ohio's Open Records Act.



Biosafety Protocol Amendment

Wright State University
Research and Sponsored Programs

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For RSP use only:	30	
Amendment No.: _		
Date Received:		y,

	n contains proprietary/confi any relevant documentation)	dential information (Please attac	ch a justification	
IBC No	Associated AUP No	Associated IR	B No	
Title:				
Principal Investiga	tor			
Principal Investigate	or Name:			
		Email:		
		ity for the safe conduct of work this application is accurate and De		
((Signature of Principal Inves			
Biosafety Officer				
I have reviewed this	amendment and found it to	be suitable for IBC review:		
Name:				
			ate:	
((Signature of Biosafety Offic	eer)		
Current Project Inf	ormation			
What is the current	level of biocontainment?			
BSL-1	BSL-2	BSL-2+	BSL-3	
Is the current project	ct exempt from the NIH Gu	idelines? Yes	No	
Amendment Type				
What type of change	e is requested? (check all tha	t apply)		
Personne	·1	Procedure		
Biohazar	dous agent	Biosafety level		
Animal u	9	Human subject use		
Project L	ocation (from/to):	,		
Other:				

List NEW Personnel Only (use additional sheet if necessary)

1. Name:	username:	Title:	
Signature:	Date:	Contact:	
2. Name:	username:	Title:	
Signature:	Date:	Contact:	
3. Name:	username:	Title:	
Signature:	Date:	Contact:	
4. Name:	username:	Title:	
Signature:	Date:	Contact:	
5. Name:	username:	Title:	
Signature:	Date:	Contact:	

<u>Narrative Section.</u> Please provide a complete description of the protocol change. Include enough detail to allow for an accurate risk assessment (similar to the types of information requested on the original application). Amendments with insufficient information may cause delays in the review process. Attach additional sheets as necessary.